

**State:** VermontGMCB **Filing Company:** MVP Health Insurance Company  
**TOI/Sub-TOI:** H16G Group Health - Major Medical/H16G.003A Small Group Only - PPO  
**Product Name:** VT SG Grandfathered HIC 1Q/2Q 2015  
**Project Name/Number:** /

## Filing at a Glance

Company: MVP Health Insurance Company  
Product Name: VT SG Grandfathered HIC 1Q/2Q 2015  
State: VermontGMCB  
TOI: H16G Group Health - Major Medical  
Sub-TOI: H16G.003A Small Group Only - PPO  
Filing Type: GMCB Rate  
Date Submitted: 07/31/2014  
SERFF Tr Num: MVPH-129662230  
SERFF Status: Assigned  
State Tr Num:  
State Status:  
Co Tr Num:  
  
Implementation: 01/01/2015  
Date Requested:  
Author(s): Kristen Marsh, Matt Lombardo, Evan Steinhart, Eric Bachner  
Reviewer(s): Thomas Crompton (primary), Kelly Macnee, David Dillon, Judith Henkin, Jacqueline Lee  
Disposition Date:  
Disposition Status:  
Implementation Date:  
  
State Filing Description:

**State:** VermontGMCB **Filing Company:** MVP Health Insurance Company  
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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: Group
Submission Type: New Submission	Group Market Size: Small
Group Market Type: Employer	Overall Rate Impact: 8.7%
Filing Status Changed: 08/01/2014	
State Status Changed:	Deemer Date:
Created By: Matt Lombardo	Submitted By: Matt Lombardo
Corresponding Filing Tracking Number:	
PPACA: Not PPACA-Related	
PPACA Notes: null	
Include Exchange Intentions:	No

### Filing Description:

The proposed rates enclosed within this filing are available to Small Group Grandfathered Vermont members with contract effective dates beginning between January 1, 2015 - June 30, 2015.

## Company and Contact

### Filing Contact Information

Matt Lombardo,	mlombardo@mvphealthcare.com
625 State Street	518-388-2483 [Phone]
Schenectady, NY 12305	

### Filing Company Information

MVP Health Insurance Company	CoCode: 11125	State of Domicile: New York
625 State Street	Group Code: 1198	Company Type: Health
Schenectady, NY 12305	Group Name:	Insurance
(518) 388-2469 ext. [Phone]	FEIN Number: 14-1827918	State ID Number:

## Filing Fees

Fee Required?	Yes
Fee Amount:	\$150.00
Retaliatory?	No
Fee Explanation:	Standard filing fee.

SERFF Tracking #:

MVPH-129662230

State Tracking #:

Company Tracking #:

State: VermontGMCB

Filing Company:

MVP Health Insurance Company

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### Rate Information

Rate data applies to filing.

Filing Method: SERFF

Rate Change Type: Increase

Overall Percentage of Last Rate Revision: 2.500%

Effective Date of Last Rate Revision: 01/01/2014

Filing Method of Last Filing: SERFF

### 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):
MVP Health Insurance Company	Increase	8.700%	8.700%	\$1,490,365	418	\$13,854,132	8.800%	8.600%

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## Rate Review Detail

### COMPANY:

Company Name: MVP Health Insurance Company  
 HHS Issuer Id: 92802

### PRODUCTS:

Product Name	HIOS Product ID	HIOS Submission ID	Number of Covered Lives
Preferred Suite EPO	92802VT004	92802VT004000	200
Preferred Suite HD EPO	92802VT006	92802VT006000	2604
Preferred Suite PPO	92802VT005	92802VT005000	2

Trend Factors:

### FORMS:

New Policy Forms:  
 Affected Forms:  
 Other Affected Forms: VT EPO COC, VT HDHP COC

### REQUESTED RATE CHANGE INFORMATION:

Change Period: Annual  
 Member Months: 177,469  
 Benefit Change: Increase  
 Percent Change Requested: Min: 8.6 Max: 8.8 Avg: 8.7

### PRIOR RATE:

Total Earned Premium: 13,854,132.00  
 Total Incurred Claims: 11,360,388.00  
 Annual \$: Min: 303.75 Max: 675.50 Avg: 382.42

### REQUESTED RATE:

Projected Earned Premium: 15,344,497.00  
 Projected Incurred Claims: 12,348,742.00  
 Annual \$: Min: 329.87 Max: 736.05 Avg: 423.55

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Company Tracking #:

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MVP Health Insurance Company

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Product Name: VT SG Grandfathered HIC 1Q/2Q 2015

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## Supporting Document Schedules

<b>Satisfied - Item:</b>	Actuarial Memorandum
<b>Comments:</b>	
<b>Attachment(s):</b>	1Q 2015 ACT MEMO HIC Small Group.pdf Rolling 12 Medical and Rx Data - SG HIC.xlsx VT SG HIC GF Q1 & Q2 2015 Rate Filing - SERFF.pdf VT SG HIC GF Q1 & Q2 2015 Rate Filing - SERFF.xlsx
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Actuarial Memorandum and Certifications
<b>Bypass Reason:</b>	N/A - Grandfathered Filing
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Civil Union Rating Requirements
<b>Comments:</b>	MVP's certificate of coverage complies with 8 V.S.A. § 4724.
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Consumer Disclosure Form
<b>Comments:</b>	
<b>Attachment(s):</b>	Consumer Disclosure Form about Rate Increases - SG Grandfathered.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Filing Compliance Certification
<b>Comments:</b>	
<b>Attachment(s):</b>	Certificate of Compliance.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Third Party Filing Authorization
<b>Bypass Reason:</b>	N/A
<b>Attachment(s):</b>	

SERFF Tracking #:

MVPH-129662230

State Tracking #:

Company Tracking #:

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Filing Company:

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Product Name: VT SG Grandfathered HIC 1Q/2Q 2015

Project Name/Number: /

<b>Item Status:</b>	
<b>Status Date:</b>	
<b>Bypassed - Item:</b>	Unified Rate Review Template
<b>Bypass Reason:</b>	N/A - Grandfathered Filing
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

SERFF Tracking #:

MVPH-129662230

State Tracking #:

Company Tracking #:

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State:

VermontGMCB

Filing Company:

MVP Health Insurance Company

TOI/Sub-TOI:

H16G Group Health - Major Medical/H16G.003A Small Group Only - PPO

Product Name:

VT SG Grandfathered HIC 1Q/2Q 2015

Project Name/Number:

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***Attachment Rolling 12 Medical and Rx Data - SG HIC.xlsx is not a PDF document and cannot be reproduced here.***

***Attachment VT SG HIC GF Q1 & Q2 2015 Rate Filing - SERFF.xlsx is not a PDF document and cannot be reproduced here.***



## ACTUARIAL MEMORANDUM 1Q and 2Q 2015 Small Group Grandfathered AR42 Filing

### Purpose

The purpose of this filing is to demonstrate the development of premium rates in support of MVP Health Insurance Company's Small Group EPO/PPO and High Deductible EPO/PPO grandfathered product portfolio and seek approval of the premium rates. The premium rates included in this filing are for group effective dates between 1/1/2015 and 6/30/2015. The rates are effective for 12 months. This rate filing has been prepared to satisfy the requirements of 8 V.S.A § 5104 and is not intended to be used for other purposes.

### Summary of Requested Rate Increases

The requested quarterly rate change from the current approved 4th Quarter rates are:

EPO/PPO Medical: 0.9%

Rx riders: 0.9%

HDHP: 0.9%

The requested quarterly rate changes result in average annual rate changes for 1st Quarter group renewals as follows:

Q1 Renewal Impact - Grandfathered			
	Medical Only	Rx Only	Medical + Rx
HD	8.7%	N/A	8.7%
Non-HD	8.6%	9.4%	8.7%
		Total	8.7%

The proposed quarterly rate changes from 1Q 2015 to 2Q 2015 are:

EPO/PPO Medical: 1.3%

Rx riders: 2.3%

HDHP: 1.5%

The requested quarterly rate changes result in average annual rate changes for 2nd Quarter group renewals as follows:

Q2 Renewal Impact - Grandfathered			
	Medical Only	Rx Only	Medical + Rx
HD	8.8%	N/A	8.8%
Non-HD	8.7%	9.8%	8.8%
		Total	8.8%

MVP is not proposing a change to the rate slope implied in the approved 3Q/4Q 2014 Small Group grandfathered rate filing.

## **Small Group Grandfathered Enrollment Distribution by Renewal Quarter (as of June 2014)**

1<sup>st</sup> Q: 57%  
2<sup>nd</sup> Q: 11%  
3<sup>rd</sup> Q: 21%  
4<sup>th</sup> Q: 12%

## **Development of Base Premium Rates**

Small group EPO/PPO and HDHP incurred claim data for the period 1/1/2013 – 12/31/2013 completed through 5/31/2014 was the basis for this rate development. MVP utilized grandfathered and non-grandfathered small group claim data over this time period to form a more credible base of experience.

Exhibit 3 demonstrates the development of the proposed 1st quarter rate action. Historical fee for service claims are adjusted to remove claims in excess of \$100,000 which are replaced with a pooling charge. The pooling charge being used reflects the average cost of claims in excess of \$100,000 for the rolling 12 end dates shown in the attached file, “Rolling 12 Medical and Rx Data - SG HIC”, that do not include any 2013 dates of service. The adjusted claims are then projected to the rating period, and the impact of new benefit mandates, New York’s paid claim surcharge expense (HCRA), and non-fee for service medical expenses not reflected in the experience period data are added to the claim projection. Experience period Rx claims are then projected to the rating period and adjusted for the percentage of members purchasing an Rx rider. Rx claims are adjusted for the impact of mandates not yet reflected in the experience period data and rebates are removed from the projected claim cost. The basis of MVP’s Rx rebate assumptions were formed by analyzing Rx rebates as a % of Rx claim expense over the experience period by product type. This amount was multiplied by MVP’s projected gross Rx claim cost to derive a PMPM Rx rebate projection.

The projected net claims are converted to a gross claims cost to account for taxes/assessments being charged in 1Q 2015, a modification in the single conversion factor due to a change in the average contract size, and other retention items. Other retention items include administrative costs, contribution to reserves, and bad debt.

The projected rating period required gross premium is compared to the prior rating period gross premium to indicate the suggested quarterly rate change. This analysis is done separately for the HDHP experience block and the EPO/PPO experience block and blended together to determine the proposed book of business quarterly rate change. Because the distribution of membership between HDHP and EPO/PPO products is different for grandfathered members than the distribution of experience period membership, MVP is using a current snapshot of small group grandfathered members to derive a blended rate increase.

The expected non fee for service medical expenses added to the projection reflect costs associated with net reinsurance expense, Wellstyle Rewards program administrative expense, PCP incentive payments and Medical Home, Healthways capitation expense, and other miscellaneous MVP claim expenses not included in the historical experience period data such as manual checks, FFS write offs and Massachusetts surcharges.

Benefit mandates impacting the projection include the mental health/substance abuse PCP copay mandate and the Rx OOP maximum mandate (Bill H559). The impacts of each are outlined below:

### *Copay Adjustment for Mental Health/Substance Abuse*

New legislation has been passed by the State of VT requiring carriers to charge a plan’s PCP copay for mental health and substance abuse (MH/SA) claims taking place in the outpatient or office setting. MVP re-priced its experience period MH/SA claims to reflect this modification which resulted in \$0.57 PMPM being added to the starting claim cost for non-HDHPs in 2015. MVP’s experience period HDHP claims were not impacted by this mandate.

### *Bill H559 Impact*

Bill H559 was effective beginning with October 2012 renewals. Included in this regulation is a new out of pocket maximum for prescription drug expenses. This mandate is applicable to drug rider coverage, as well as drug coverage that is part of an integrated benefit plan.

MVP has learned that claim adjustments attributable to Bill H559 were not being processed within MVP's claim system during the experience period driving this rate filing. Therefore, an adjustment to the experience period claims was needed. To quantify the impact of this mandate, MVP analyzed member level drug claims over the experience period. MVP captured amounts paid by members in excess of the Rx OOP maximum. The sum of these amounts was trended to the projection period to quantify the impact of this mandate on drug claims in 2015.

### **Trend Factors**

The development of annual medical paid claim trend factors is illustrated in Exhibit 2a. Consistent with recently submitted filings, MVP is applying 0% utilization trend to its data. Regression analysis has been performed on MVP's utilization data in the past, and it was concluded that the predictive ability of the historical utilization trends was weak and not reliable. The assumed unit cost trends reflect known and assumed price increases from MVP's provider network. The 2014 unit cost trend factors are consistent with the unit cost trend factors used in MVP's recently submitted 2015 Exchange filing.

In addition to the medical cost inflation rate assumed from the historical experience period to the rating period, an adjustment is needed to reflect the impact of cost share leveraging on the carrier's share of the medical cost. Leveraging is a result of the fixed nature of deductibles and copays in health benefit plans. When there are fixed member deductibles and copays, the carrier bears a greater portion of the cost of medical inflation. Therefore, an additional factor adjustment is made to the trend assumption to capture this cost.

The trend applied to the deductible portion of the experience period was derived using the distribution of claims for MVP's VT book of business. Claims below the average deductible amount over the experience period were trended at the applicable allowed trend rate while claims greater than the deductible were held flat. The average HDHP deductible over the experience period is \$3,070 and the average non-HDHP deductible over the experience period is \$733.

Annual Rx trend factors split by generic, brand and specialty drugs are also illustrated in Exhibit 2a. These trend factors were supplied by MVP's pharmacy vendor and reflect their best estimate of MVP's expected changes to pharmacy costs and drug utilization. Supporting documentation illustrating how the Rx trends shown on Exhibit 2a were converted to paid trends can be found in Exhibits 2b and 2c.

The 2015 specialty unit cost trend has increased since MVP submitted its 2015 Exchange filing. MVP had conversations with its pharmacy vendor regarding the assumed impact of Sovaldi on its specialty trend. The pharmacy vendor's trend did not adequately capture the impact of Sovaldi based on an analysis performed on MVP's commercial book of business over the first four months of 2014 and an adjustment was made to account for this change. MVP increased its specialty trend by 4.1% to account for the shortfall of the vendor's trend.

### **Retention Expenses and Target Loss Ratio**

Exhibit 5 in the rate filing illustrates the non-claim expense loads included in the proposed premium rates. This portion of the premium rates is intended to cover MVP's general administrative expenses, distribution expenses, taxes/assessments, bad debt expense and a contribution to surplus. A summary of the taxes/assessments included in the premium rates are provided below:

#### *Temporary Individual Reinsurance Pool*

Beginning in 2014, carriers will be assessed a fee to fund the Temporary Reinsurance Pool which supports the individual reinsurance program both in and out of the exchange from 2014 through 2016. In the proposed HHS Notice of Benefit and Parameters for 2015, this fee is \$3.67 PMPM.

#### *ACA Insurer Tax*

Beginning in 2014, carriers will be taxed based on earned premium. Based on estimates from consultants, this tax will be approximately 2.0% for 2014 dates of service.

### *Paid Claim Taxes*

In addition to the State of Vermont 0.999% tax on paid claims, MVP is subject to New York HCRA taxes which are based on paid medical claims. The New York HCRA tax is based only on claims paid for services performed by New York hospitals. The New York HCRA load equals 0.25% and is based on historical HCRA fees incurred by Vermont members.

### *Comparative Effectiveness Research Fee*

Prescribed Federal fee equal to \$0.17 PMPM to fund the Federal Research Fund.

### *VT Vaccine Pilot*

This is a Vermont state assessment based on plan premiums which is used to fund immunizations provided by the state.

### **2Q2015 Rate Tables**

The trend factor used to derive the 2Q2015 rate table reflects 3 months of the assumed 2015 paid claim trend. Essentially this is the same result as projecting the experience period data an extra 3 months to the midpoint of the 2Q rating period.

### **Supplemental Exhibits**

Also included with this filing is a historical claim and membership summary for the past 36 months grouped into rolling 12 month periods. The data is shown by product type (HDHP vs non-HDHP) and also aggregated for the entire Small Group AR42 block. Incurred claims from January 2011 – December 2013 completed through May 31, 2014 are reflected in the data.

### **Retired Products**

This is a closed block of business and plans with no membership are being removed from this rate filing. The following coplans are being retired from the Small Group Grandfathered portfolio effective January 1, 2015: VE038S, VE058S, VP038S, VPHD-12S, VPHD-14S, and VT07S[A-C].

### **Actuarial Certification**

I, Matthew Lombardo, am a Member of the American Academy of Actuaries. I have examined the assumptions and methods used in determining MVP's requested rates. Based on my review and examination, it is my opinion that the proposed premium rates are reasonable in relation to the benefits provided and that they are not excessive, inadequate, nor unfairly discriminatory. This rate filing conforms to the applicable Standards of Practice as promulgated by the Actuarial Standards Board.



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Matthew Lombardo, FSA, MAAA  
Actuarial Manager, Commercial Pricing  
MVP Health Plan, Inc.

07/31/2014

Date



**MVP Health Care -- Q1 & Q2 2015 SG HIC Grandfathered Rate Filing**

Small Group VT HIC AR42 Rate Filing - Grandfathered Business  
For Effective Dates Beginning Between January 1, 2015 - June 30, 2015

- Exhibit 1 -- Summary of Medical Coplans Offered
- Exhibit 2a -- Pricing Trend Assumptions
- Exhibit 2b -- Rx Trend Non-HDHP
- Exhibit 2c -- Rx Trend HDHP
- Exhibit 3 -- Claim Projection and Proposed Single Rate Change
- Exhibit 4 -- Conversion Factor and Tier Ratios
- Exhibit 5 -- Retention Loads and Paid Claim Surcharges
- Exhibit 6a -- Medical Base Rates
- Exhibit 6b -- Medical Riders
- Exhibit 6c -- Rx Riders

**Exhibit 1 -- Summary of Medical Coplans Offered**

Small Group VT HIC AR42 Rate Filing - Grandfathered Business  
For Effective Dates Beginning Between January 1, 2015 - June 30, 2015

Coplan	Product Type	In-Network Benefits										Out-of-Network Benefits			Pharmacy
		PCP	SCP	IP (Med/Surg)	ER	OP Surg	DME	Amb	Ded	Coins.	OOP Max	Coins	Ded	OOP Max	
VE003S	EPO	\$25	\$40	\$500	\$100	\$150	50%	\$100	\$0	0%	N/A	N/A	N/A	N/A	Riders Available
VE004S	EPO	\$25	\$40	\$1,000	\$100	\$150	50%	\$100	\$0	0%	N/A	N/A	N/A	N/A	Riders Available
VE006S	EPO	\$30	\$50	\$1,000	\$100	\$150	50%	\$100	\$0	0%	N/A	N/A	N/A	N/A	Riders Available
VE031S	HyEPO	\$25	\$40	20%	\$100	20%	50%	20%	\$500	20%	\$1,500	N/A	N/A	N/A	Riders Available
VE033S	HyEPO	\$25	\$40	20%	\$100	20%	50%	20%	\$2,000	20%	\$6,000	N/A	N/A	N/A	Riders Available
VE036S	HyEPO	\$25	\$40	20%	\$100	20%	50%	20%	\$1,000	20%	\$2,000	N/A	N/A	N/A	Riders Available
VE037S	HyEPO	\$25	\$40	20%	\$100	20%	50%	20%	\$2,000	20%	\$4,000	N/A	N/A	N/A	Riders Available
VE047S	HyEPO	\$30	\$50	20%	\$100	20%	50%	20%	\$500	20%	\$1,500	N/A	N/A	N/A	Riders Available
VE052S	HyEPO	\$30	\$50	20%	\$100	20%	50%	20%	\$1,000	20%	\$2,000	N/A	N/A	N/A	Riders Available
VE053S	HyEPO	\$30	\$50	20%	\$100	20%	50%	20%	\$2,000	20%	\$4,000	N/A	N/A	N/A	Riders Available
VE054S	HyEPO	\$30	\$50	20%	\$100	20%	50%	20%	\$3,000	20%	\$6,000	N/A	N/A	N/A	Riders Available
VEHD-01S	HDEPOagg	\$0	\$0	\$0	\$0	\$0	0%	\$0	\$1,500	0%	\$2,500	N/A	N/A	N/A	\$10/\$30/\$50
VEHD-02S	HDEPOagg	\$0	\$0	\$0	\$0	\$0	0%	\$0	\$2,500	0%	\$3,500	N/A	N/A	N/A	\$10/\$30/\$50
VEHD-03S	HDEPOagg	\$0	\$0	\$0	\$0	\$0	0%	\$0	\$5,000	0%	\$5,000	N/A	N/A	N/A	\$0 after Deductible
VEHD-06S	HDEPOagg	10%	10%	10%	10%	10%	10%	10%	\$2,500	10%	\$5,000	N/A	N/A	N/A	10%/10%/30%
VEHD-07S	HDEPOagg	20%	20%	20%	20%	20%	20%	20%	\$1,500	20%	\$3,000	N/A	N/A	N/A	20%/20%/40%
VEHD-08S	HDEPOagg	20%	20%	20%	20%	20%	20%	20%	\$2,000	20%	\$4,000	N/A	N/A	N/A	20%/20%/40%
VEHD-09S	HDEPOagg	20%	20%	20%	20%	20%	20%	20%	\$2,500	20%	\$5,000	N/A	N/A	N/A	20%/20%/40%
VEHD-12S	HDEPOagg	10%	10%	10%	10%	10%	10%	10%	\$2,500	10%	\$5,000	N/A	N/A	N/A	50%
VEHD-14S	HDEPOagg	20%	20%	20%	20%	20%	20%	20%	\$2,000	20%	\$4,000	N/A	N/A	N/A	50%
VEHD-15S	HDEPOagg	20%	20%	20%	20%	20%	20%	20%	\$2,500	20%	\$5,000	N/A	N/A	N/A	50%
VEHD-17S	HDEPOagg	\$30	\$50	\$500	\$150	\$200	50%	\$150	\$2,500	0%	\$5,000	N/A	N/A	N/A	\$10/\$30/\$50
VEHD-18	HDEPO	\$0	\$0	\$0	\$0	\$0	0%	\$0	\$2,500	0%	\$3,500	N/A	N/A	N/A	\$10/\$30/\$50
VEHD-19	HDEPO	\$0	\$0	\$0	\$0	\$0	0%	\$0	\$5,000	0%	\$5,000	N/A	N/A	N/A	\$0 after Deductible
VP048S	HyPPO	\$30	\$50	20%	\$100	20%	50%	20%	\$1,000	20%	\$3,000	40%	\$2,000	\$6,000	Riders Available
VP051S	HyPPO	\$30	\$50	20%	\$100	20%	50%	20%	\$500	20%	\$1,000	40%	\$1,000	\$3,000	Riders Available
VPHD-03S	HDEPOagg	\$0	\$0	\$0	\$0	\$0	0%	\$0	\$5,000	0%	\$5,000	20%	\$10,000	\$20,000	\$0 after Deductible
VPHD-04S	HDEPOagg	10%	10%	10%	10%	10%	10%	10%	\$1,500	10%	\$3,000	30%	\$3,000	\$6,000	10%/10%/30%
VPHD-06S	HDEPOagg	10%	10%	10%	10%	10%	10%	10%	\$2,500	10%	\$5,000	30%	\$5,000	\$10,000	10%/10%/30%
VPHD-09S	HDEPOagg	20%	20%	20%	20%	20%	20%	20%	\$2,500	20%	\$5,000	40%	\$5,000	\$10,000	20%/20%/40%
VT03SA	EPO	\$15	\$40	\$300	\$75	\$100	50%	\$40	\$0	0%	N/A	N/A	N/A	N/A	Riders Available
VT03SB	EPO	\$20	\$40	\$0	\$100	\$100	50%	\$40	\$0	0%	N/A	N/A	N/A	N/A	Riders Available
VT03SC	EPO	\$25	\$40	\$300	\$100	\$100	50%	\$40	\$0	0%	N/A	N/A	N/A	N/A	Riders Available

<b>Exhibit 2 -- Pricing Trend Assumptions</b>
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Small Group VT HIC AR42 Rate Filing - Grandfathered Business  
For Effective Dates Beginning Between January 1, 2015 - March 31, 2015

	<b>Midpoint</b>
Experience Period: January 1, 2013 - December 31, 2013	July 1, 2013
Rating Period: January 1, 2015 - December 31, 2015	July 1, 2015

^ Reflects Q1 2015 rating period

<b>Medical Trend Summary</b>
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<b>2014 Annual Trend</b>
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	% of Allowed Claims	Unit Cost	Utilization	Total
IP	21.1%	6.0%	0.0%	6.0%
OP and Other Med	47.9%	5.4%	0.0%	5.4%
PHY	31.0%	15.3%	0.0%	15.3%
<b>Medical Total</b>		<b>8.6%</b>	<b>0.0%</b>	<b>8.6%</b>

<b>2015 Annual Trend</b>
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	% of Allowed Claims	Unit Cost	Utilization	Total
IP	21.1%	6.0%	0.0%	6.0%
OP and Other Med	47.9%	5.4%	0.0%	5.4%
PHY	31.0%	3.5%	0.0%	3.5%
<b>Medical Total</b>		<b>5.0%</b>	<b>0.0%</b>	<b>5.0%</b>

<b>Leveraging Impact - Small Group Non-HDHP Fee-For-Service Medical Claims</b>
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	Allowed	Coinsurance	Copay	Deductible	Paid*
Experience Period:	\$533.68	\$8.00	\$23.92	\$12.64	\$489.11
24 Months of Trend:	1.140	1.140	1.000	1.043	1.149
Projection Period:	\$608.14	\$9.12	\$23.92	\$13.18	\$561.91
Allowed Trend (Annual)	6.7%				
Paid Trend (Annual)	7.2%				
<b>Leveraging (Annual)</b>	<b>0.4%</b>				

<b>Leveraging Impact - Small Group HDHP Fee-For-Service Medical Claims</b>
----------------------------------------------------------------------------

	Allowed	Coinsurance	Copay	Deductible	Paid*
Experience Period:	\$334.11	\$1.45	\$0.24	\$81.12	\$251.31
24 Months of Trend:	1.140	1.140	1.000	1.063	1.164
Projection Period:	\$380.73	\$1.65	\$0.24	\$86.26	\$292.58
Allowed Trend (Annual)	6.7%				
Paid Trend (Annual)	7.9%				
<b>Leveraging (Annual)</b>	<b>1.1%</b>				

\*Ignores impact of removing high cost claims and replacing with pooling charge. Paid projection will not tie out to FFS claim projection on Tab 3 unless these adjustments are taken into account.

<b>Rx Trend Summary</b>
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	<b>2014 Trend</b>		<b>2015 Trend</b>	
	Unit Cost	Utilization	Unit Cost	Utilization
Generic	-1.4%	3.8%	-1.8%	3.6%
Brand	12.5%	-7.0%	10.1%	-4.6%

<b>Exhibit 2b -- Rx Trend Development - Non-HDHP</b>
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Small Group VT HIC AR42 Rate Filing - Grandfathered Business  
For Effective Dates Beginning Between January 1, 2015 - June 30, 2015

Experience Period: Jan 2013 - Dec 2013  
Member Months with Rx Benefit: 35,130

<b>Rx Claim Information</b>	<b>Generic</b>	<b>Brand</b>	<b>Specialty</b>	<b>Total</b>
Experience Period Scripts / 1000	13,536	2,116	129	15,781
Experience Period Allowed PMPM	\$25.11	\$35.30	\$35.75	\$96.16
Experience Period Deductible PMPM	\$0.05	\$0.01	\$0.00	\$0.07
Experience Period Copay PMPM	\$5.79	\$4.76	\$0.36	\$10.90
Experience Period Coinsurance PMPM	\$1.11	\$2.00	\$0.00	\$3.11
Experience Period Cost Sharing PMPM	\$6.95	\$6.77	\$0.36	\$14.08
Experience Period Paid PMPM	\$18.15	\$28.52	\$35.40	\$82.07
Annual Util Trend	1.037	0.942	1.035	1.025
Annual Unit Cost Trend	0.984	1.113	1.121	1.058
Annual Deductible Trend	1.020	1.049	1.160	1.026
Annual Paid Trend	1.015	1.065	1.161	1.097
Months of Trend to Q1 2015*	24	24	24	24
Projected Scripts / 1000 as of Q1 2015	14,551	1,878	138	16,567
Projected Allowed PMPM as of Q1 2015	\$26.15	\$38.81	\$48.09	\$113.05
Projected Deductible PMPM	\$0.06	\$0.02	\$0.00	\$0.07
Projected Copay PMPM	\$6.22	\$4.23	\$0.38	\$10.83
Projected Coinsurance PMPM	\$1.16	\$2.20	\$0.00	\$3.36
Projected Cost Sharing PMPM as of Q1 2015	\$7.44	\$6.44	\$0.38	\$14.26
Projected Paid PMPM as of Q1 2015	\$18.71	\$32.37	\$47.71	\$98.79

\*\*Midpoint of Experience Period -- 07/01/2013, Midpoint of Q1 2015 Rating Period -- 07/01/2015

<b>Exhibit 2c -- Rx Trend Development - HDHP</b>
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Small Group VT HIC AR42 Rate Filing - Grandfathered Business  
For Effective Dates Beginning Between January 1, 2015 - June 30, 2015

Experience Period: Jan 2013 - Dec 2013  
Member Months: 139,230

<b>Rx Claim Information</b>	<b>Generic</b>	<b>Brand</b>	<b>Specialty</b>	<b>Total</b>
Experience Period Scripts / 1000	7,676	1,054	39	8,770
Experience Period Allowed PMPM	\$12.70	\$16.30	\$9.66	\$38.67
Experience Period Deductible PMPM	\$6.94	\$5.76	\$0.94	\$13.63
Experience Period Copay PMPM	\$0.96	\$0.65	\$0.04	\$1.64
Experience Period Coinsurance PMPM	\$0.07	\$0.46	\$0.04	\$0.57
Experience Period Cost Sharing PMPM	\$7.96	\$6.87	\$1.01	\$15.84
Experience Period Paid PMPM	\$4.74	\$9.44	\$8.65	\$22.83
Annual Util Trend	1.037	0.942	1.035	1.026
Annual Unit Cost Trend	0.984	1.113	1.121	1.042
Annual Deductible Trend	1.020	1.020	1.020	1.020
Annual Paid Trend	1.019	1.073	1.175	1.102
Months of Trend to Q1 2015*	24	24	24	24
Projected Scripts / 1000 as of Q1 2015	8,252	936	42	9,230
Projected Allowed PMPM as of Q1 2015	\$13.22	\$17.93	\$13.00	\$44.15
Projected Deductible PMPM	\$7.21	\$5.98	\$0.98	\$14.17
Projected Copay PMPM	\$1.03	\$0.57	\$0.04	\$1.64
Projected Coinsurance PMPM	\$0.07	\$0.51	\$0.05	\$0.63
Projected Cost Sharing PMPM as of Q1 2015	\$8.31	\$7.07	\$1.07	\$16.44
Projected Paid PMPM as of Q1 2015	\$4.92	\$10.86	\$11.93	\$27.71

\*\*Midpoint of Experience Period -- 07/01/2013, Midpoint of Q1 2015 Rating Period -- 07/01/2015

<b>Exhibit 3 -- Claim Projection &amp; Proposed Rate Change</b>
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Small Group VT HIC AR42 Rate Filing - Grandfathered Business  
For Effective Dates Beginning Between January 1, 2015 - March 31, 2015

<b>SG HIC Non-HDHP Projection of Claims and Proposed Rate Change</b>
----------------------------------------------------------------------

Experience Period: Jan 2013 - Dec 2013  
Completed Through: 5/31/2014

Experience Period Member Months	38,239
1) Experience Period Medical Claims PMPM	\$469.33
1a) Claims in Excess of \$100k over Experience Period	\$99.34
1b) Pooling Charge	1.106
2) IBNR Factor	1.042
3) Experience Period Incurred Medical Claims = [ 1) - 1a) ] * 1b) * 2)	\$426.38
4) Annual Medical Trend <i>Includes Paid Leveraging</i>	1.072
5) Months of Trend to Q1 2015*	24
6a) Capitations and Non-FFS Claim Expenses	\$8.15
6b) Mental Health/ Substance Abuse Mandate	\$0.57
6c) NY State HCRA Surcharge	0.25%
7) Trended Incurred Medical Claims PMPM as of Q1 2015 = [ [ 3) * 4) ^ [ 5) / 12 ] + 6a) + 6b) ] * [ 1 + 6c) ]	\$499.81
8) Experience Period Rx Claims PMPM	\$82.07
8a) Percent of Membership Purchasing Rx Rider	91.9%
9) Annual Rx Trend <i>Includes Paid Leveraging</i>	1.097
10) Months of Trend to Q1 2015*	24
11) Trended Gross Rx Claims PMPM as of Q1 2015 = 8) * 8a) * 9) ^ [ 10) / 12 ]	\$90.76
11a) Impact of Bill H559	\$0.14
11b) Rx Rebates	(\$8.64)
12) Trended Net Rx Claims PMPM as of Q1 2015 = 11) + 11a) + 11b)	\$82.26
13) Total Net Claims PMPM as of Q1 2015 = 7) + 12)	\$582.07
14) PMPM Taxes/Assessments for Q1 2015 <i>See Exhibit 5</i>	\$3.84
15) % of Paid Claims Taxes/Assessments for Q1 2015 <i>See Exhibit 5</i>	0.999%
16) % of Premium Taxes/Assessments for Q1 2015 <i>See Exhibit 5</i>	4.60%
17) % of Premium Retention Components for Q1 2015 <i>See Exhibit 5</i>	11.75%
18) Change in Single Conversion Factor for Q1 2015 <i>See Exhibit 4</i>	0.51%
19) Gross Claim Cost for Q1 2015 = [ 13) + 14) ] * [ 1 + 15) ] * [ 1 + 18) ] / [ 1 - 16) - 17) ]	\$711.03
20) Projected Revenue Collected at Q4 2014 Rate Level	\$633.20
21) Q1 2015 Required Rate Action = 19) / 20) - 1	<b>12.3%</b>

\*Midpoint of Experience Period -- 7/1/13, Midpoint of Q1 2015 Rating Period -- 7/1/2015

<b>Exhibit 3 -- Claim Projection &amp; Proposed Rate Change</b>
-----------------------------------------------------------------

Small Group VT HIC AR42 Rate Filing - Grandfathered Business  
For Effective Dates Beginning Between January 1, 2015 - March 31, 2015

<b>SG HIC HDHP Projection of Claims and Proposed Rate Change</b>
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Experience Period: Jan 2013 - Dec 2013  
Paid Through: 5/31/2014

Experience Period Member Months	139,230
1) Experience Period Medical Claims PMPM	\$245.39
1a) Claims in Excess of \$100k over Experience Period	\$30.07
1b) Pooling Charge	1.106
2) IBNR Factor	1.024
3) Experience Period Incurred Medical Claims = [ 1) - 1a) ] * 1b) * 2)	\$243.84
4) Annual Medical Trend <i>Includes Paid Leveraging</i>	1.079
5) Months of Trend to Q1 2015*	24
6a) Capitations and Non-FFS Claim Expenses	\$8.15
6b) Mental Health/ Substance Abuse Mandate	\$0.00
6c) NY State HCRA Surcharge	0.25%
7) Trended Incurred Medical Claims PMPM as of Q1 2015 = [ [ 3) * 4) ^ [ 5) / 12 ] + 6a) + 6b) ] * [ 1 + 6c) ]	\$292.78
8) Experience Period Rx Claims PMPM	\$22.83
9) Annual Rx Trend <i>Includes Paid Leveraging</i>	1.102
10) Months of Trend to Q1 2015*	24
11) Trended Gross Rx Claims PMPM as of Q1 2015 = 8) * 9) ^ [ 10) / 12 ]	\$27.71
11a) Impact of Bill H559	\$2.64
11b) Rx Rebates	(\$4.51)
12) Trended Net Rx Claims PMPM as of Q1 2015 = 11) + 11a) + 11b)	\$25.83
13) Total Net Claims PMPM as of Q1 2015 = 7) + 12)	\$318.61
14) PMPM Taxes/Assessments for Q1 2015 <i>See Exhibit 5</i>	\$3.84
15) % of Paid Claims Taxes/Assessments for Q1 2015 <i>See Exhibit 5</i>	0.999%
16) % of Premium Taxes/Assessments for Q1 2015 <i>See Exhibit 5</i>	4.60%
17) % of Premium Retention Components for Q1 2015 <i>See Exhibit 5</i>	11.75%
18) Change in Single Conversion Factor for Q1 2015 <i>See Exhibit 4</i>	0.08%
19) Gross Claim Cost for Q1 2015 = [ 13) + 14) ] * [ 1 + 15) ] * [ 1 + 18) ] / [ 1 - 16) - 17) ]	\$389.64
20) Projected Revenue Collected at Q4 2014 Rate Level	\$391.27
21) Q1 2015 Required Rate Action = 19) / 20) - 1	<b>-0.4%</b>

\*Midpoint of Experience Period -- 7/1/13, Midpoint of Q1 2015 Rating Period -- 7/1/2015

**Exhibit 3 -- Claim Projection & Proposed Rate Change**

Small Group VT HIC AR42 Rate Filing - Grandfathered Business  
For Effective Dates Beginning Between January 1, 2015 - March 31, 2015

**SG HIC Projection of Claims and Proposed Rate Change**

	Current Membership (Jun-14 Grandfathered Members)	Projected Revenue Collected at Q4 2014 Rate Level	Gross Claim Cost for Q1 2015	Proposed Rate Change
Non-HDHP	202	\$633.20	\$711.03	12.3%
HDHP	2,817	\$391.27	\$389.64	-0.4%
<b>Total</b>	<b>3,019</b>	<b>\$407.46</b>	<b>\$411.14</b>	<b>0.9%</b>

<b>Exhibit 4 -- Conversion Factor and Tier Ratios</b>
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Small Group VT HIC AR42 Rate Filing - Grandfathered Business  
For Effective Dates Beginning Between January 1, 2015 - June 30, 2015

<b>VT Small Group AR42 Subscriber and Membership Summary -- January - December 2013 Membership</b>
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**Non-HDHP Data**

Tier	Contract Type	Subscriber Months	Member Months	Avg Contract Size	Load Factor
2	Single	2,598	2,598	1.000	1.000
2	Family	1,542	6,251	4.054	2.500
3	Single	10,631	10,631	1.000	1.000
3	Double	3,871	7,742	2.000	2.000
3	Family	2,460	9,955	4.047	2.600
4	Single	465	465	1.000	1.000
4	Double	13	26	2.000	2.000
4	Parent/Child(ren)	152	464	3.053	1.900
4	Family	24	107	4.458	2.800

Proposed Conversion Factor 1.192

Current Conversion Factor 1.186

% Change in Conversion Factor 0.51%

**HDHP Data**

Tier	Contract Type	Subscriber Months	Member Months	Avg Contract Size	Load Factor
2	Single	6,165	6,165	1.000	1.000
2	Family	3,957	15,650	3.955	2.500
3	Single	39,416	39,416	1.000	1.000
3	Double	11,548	23,096	2.000	2.000
3	Family	13,449	52,798	3.926	2.600
4	Single	852	852	1.000	1.000
4	Double	32	64	2.000	2.000
4	Parent/Child(ren)	311	913	2.936	1.900
4	Family	77	276	3.584	2.800

Proposed Conversion Factor 1.208

Current Conversion Factor 1.207

% Change in Conversion Factor 0.08%

**Exhibit 5 -- Retention Loads, Taxes/Assessments, and Paid Claim Surcharges**

Small Group VT HIC AR42 Rate Filing - Grandfathered Business  
For Effective Dates Beginning Between January 1, 2015 - June 30, 2015

<b>% of Premium Retention Components</b>		
	<b>EPO/PPO</b>	<b>HDHP</b>
General Administrative Load	9.50%	9.50%
Broker Load	0.00%	0.00%
Bad Debt	0.25%	0.25%
Contribution to Reserves	2.00%	2.00%
<b>Total % of Premium Retention Components</b>	<b>11.75%</b>	<b>11.75%</b>

<b>% of Premium Taxes and Assessments</b>		
	<b>EPO/PPO</b>	<b>HDHP</b>
Premium Tax	2.00%	2.00%
VT Vaccine Pilot	0.60%	0.60%
ACA Insurer Tax	2.00%	2.00%
<b>Total % of Premium Taxes/Assessments</b>	<b>4.60%</b>	<b>4.60%</b>

<b>% of Paid Claim Taxes and Assessments</b>		
	<b>EPO/PPO</b>	<b>HDHP</b>
Vermont Paid Claim Surcharge	0.999%	0.999%
New York State HCRA Surcharge	0.250%	0.250%
<b>Total % of Paid Claim Taxes/Assessments</b>	<b>1.249%</b>	<b>1.249%</b>

<b>PMPM Taxes and Assessments</b>		
	<b>EPO/PPO</b>	<b>HDHP</b>
<b>Q1 2015 Contract Effective Dates</b>		
Fed Reinsurance Assessment	\$3.67	\$3.67
Comparative Eff Research Tax	\$0.17	\$0.17
<b>Total PMPM Taxes/Assessments</b>	<b>\$3.84</b>	<b>\$3.84</b>
<b>Q2 2015 Contract Effective Dates</b>		
Fed Reinsurance Assessment	\$3.67	\$3.67
Comparative Eff Research Tax	\$0.17	\$0.17
<b>Total PMPM Taxes/Assessments</b>	<b>\$3.84</b>	<b>\$3.84</b>

<b>Exhibit 6a -- Medical Base Rates (Q1 2015)</b>
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Small Group VT HIC AR42 Rate Filing - Grandfathered Business  
For Effective Dates Beginning Between January 1, 2015 - March 31, 2015

Coplan	Product Type	Single	Double	Parent/Child	2T Family	3T Family	4T Family	Single Quarterly Change	Double Quarterly Change	Parent/Child Quarterly Change	2T Family Quarterly Change	3T Family Quarterly Change	4T Family Quarterly Change	Single Annual Rate Change
VE003S	EPO	\$690.08	\$1,380.16	\$1,311.15	\$1,725.20	\$1,794.21	\$1,932.22	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.6%
VE004S	EPO	\$680.13	\$1,360.26	\$1,292.25	\$1,700.33	\$1,768.34	\$1,904.36	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.6%
VE006S	EPO	\$652.99	\$1,305.98	\$1,240.68	\$1,632.48	\$1,697.77	\$1,828.37	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.6%
VE031S	HyEPO	\$622.56	\$1,245.12	\$1,182.86	\$1,556.40	\$1,618.66	\$1,743.17	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.6%
VE033S	HyEPO	\$509.17	\$1,018.34	\$967.42	\$1,272.93	\$1,323.84	\$1,425.68	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.6%
VE036S	HyEPO	\$589.65	\$1,179.30	\$1,120.34	\$1,474.13	\$1,533.09	\$1,651.02	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.6%
VE037S	HyEPO	\$524.29	\$1,048.58	\$996.15	\$1,310.73	\$1,363.15	\$1,468.01	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.6%
VE047S	HyEPO	\$603.93	\$1,207.86	\$1,147.47	\$1,509.83	\$1,570.22	\$1,691.00	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.6%
VE052S	HyEPO	\$574.20	\$1,148.40	\$1,090.98	\$1,435.50	\$1,492.92	\$1,607.76	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.6%
VE053S	HyEPO	\$513.95	\$1,027.90	\$976.51	\$1,284.88	\$1,336.27	\$1,439.06	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.6%
VE054S	HyEPO	\$477.61	\$955.22	\$907.46	\$1,194.03	\$1,241.79	\$1,337.31	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.6%
VEHD-01S	HDEPOagg	\$587.88	\$1,175.76	\$1,116.97	\$1,469.70	\$1,528.49	\$1,646.06	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.7%
VEHD-02S	HDEPOagg	\$496.18	\$992.36	\$942.74	\$1,240.45	\$1,290.07	\$1,389.30	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.7%
VEHD-03S	HDEPOagg	\$398.48	\$796.96	\$757.11	\$996.20	\$1,036.05	\$1,115.74	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.7%
VEHD-06S	HDEPOagg	\$461.59	\$923.18	\$877.02	\$1,153.98	\$1,200.13	\$1,292.45	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.7%
VEHD-07S	HDEPOagg	\$529.28	\$1,058.56	\$1,005.63	\$1,323.20	\$1,376.13	\$1,481.98	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.7%
VEHD-08S	HDEPOagg	\$473.91	\$947.82	\$900.43	\$1,184.78	\$1,232.17	\$1,326.95	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.7%
VEHD-09S	HDEPOagg	\$437.69	\$875.38	\$831.61	\$1,094.23	\$1,137.99	\$1,225.53	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.7%
VEHD-12S	HDEPOagg	\$449.47	\$898.94	\$853.99	\$1,123.68	\$1,168.62	\$1,258.52	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.7%
VEHD-14S	HDEPOagg	\$467.20	\$934.40	\$887.68	\$1,168.00	\$1,214.72	\$1,308.16	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.7%
VEHD-15S	HDEPOagg	\$431.56	\$863.12	\$819.96	\$1,078.90	\$1,122.06	\$1,208.37	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.7%
VEHD-17S	HDEPOagg	\$455.13	\$910.26	\$864.75	\$1,137.83	\$1,183.34	\$1,274.36	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.7%
VEHD-18	HDEPO	\$528.95	\$1,057.90	\$1,005.01	\$1,322.38	\$1,375.27	\$1,481.06	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.7%
VEHD-19	HDEPO	\$416.21	\$832.42	\$790.80	\$1,040.53	\$1,082.15	\$1,165.39	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.7%
VP048S	HyPPO	\$577.15	\$1,154.30	\$1,096.59	\$1,442.88	\$1,500.59	\$1,616.02	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.6%
VP051S	HyPPO	\$649.54	\$1,299.08	\$1,234.13	\$1,623.85	\$1,688.80	\$1,818.71	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.6%
VPHD-03S	HDEPOagg	\$400.36	\$800.72	\$760.68	\$1,000.90	\$1,040.94	\$1,121.01	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.7%
VPHD-04S	HDEPOagg	\$570.85	\$1,141.70	\$1,084.62	\$1,427.13	\$1,484.21	\$1,598.38	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.7%
VPHD-06S	HDEPOagg	\$465.98	\$931.96	\$885.36	\$1,164.95	\$1,211.55	\$1,304.74	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.7%
VPHD-09S	HDEPOagg	\$441.90	\$883.80	\$839.61	\$1,104.75	\$1,148.94	\$1,237.32	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.7%
VT03SA	EPO	\$704.05	\$1,408.10	\$1,337.70	\$1,760.13	\$1,830.53	\$1,971.34	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.6%
VT03SB	EPO	\$704.05	\$1,408.10	\$1,337.70	\$1,760.13	\$1,830.53	\$1,971.34	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.6%
VT03SC	EPO	\$704.05	\$1,408.10	\$1,337.70	\$1,760.13	\$1,830.53	\$1,971.34	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.6%

<b>Exhibit 6a -- Medical Base Rates (Q2 2015)</b>
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Small Group VT HIC AR42 Rate Filing - Grandfathered Business  
For Effective Dates Beginning Between April 1, 2015 - June 30, 2015

Coplan	Product Type	Single	Double	Parent/Child	2T Family	3T Family	4T Family	Single Quarterly Change	Double Quarterly Change	Parent/Child Quarterly Change	2T Family Quarterly Change	3T Family Quarterly Change	4T Family Quarterly Change	Single Rate Annual Change
VE003S	EPO	\$699.10	\$1,398.20	\$1,328.29	\$1,747.75	\$1,817.66	\$1,957.48	1.3%	1.3%	1.3%	1.3%	1.3%	1.3%	8.7%
VE004S	EPO	\$689.02	\$1,378.04	\$1,309.14	\$1,722.55	\$1,791.45	\$1,929.26	1.3%	1.3%	1.3%	1.3%	1.3%	1.3%	8.7%
VE006S	EPO	\$661.53	\$1,323.06	\$1,256.91	\$1,653.83	\$1,719.98	\$1,852.28	1.3%	1.3%	1.3%	1.3%	1.3%	1.3%	8.7%
VE031S	HyEPO	\$630.69	\$1,261.38	\$1,198.31	\$1,576.73	\$1,639.79	\$1,765.93	1.3%	1.3%	1.3%	1.3%	1.3%	1.3%	8.7%
VE033S	HyEPO	\$515.81	\$1,031.62	\$980.04	\$1,289.53	\$1,341.11	\$1,444.27	1.3%	1.3%	1.3%	1.3%	1.3%	1.3%	8.7%
VE036S	HyEPO	\$597.35	\$1,194.70	\$1,134.97	\$1,493.38	\$1,553.11	\$1,672.58	1.3%	1.3%	1.3%	1.3%	1.3%	1.3%	8.7%
VE037S	HyEPO	\$531.13	\$1,062.26	\$1,009.15	\$1,327.83	\$1,380.94	\$1,487.16	1.3%	1.3%	1.3%	1.3%	1.3%	1.3%	8.7%
VE047S	HyEPO	\$611.82	\$1,223.64	\$1,162.46	\$1,529.55	\$1,590.73	\$1,713.10	1.3%	1.3%	1.3%	1.3%	1.3%	1.3%	8.7%
VE052S	HyEPO	\$581.70	\$1,163.40	\$1,105.23	\$1,454.25	\$1,512.42	\$1,628.76	1.3%	1.3%	1.3%	1.3%	1.3%	1.3%	8.7%
VE053S	HyEPO	\$520.65	\$1,041.30	\$989.24	\$1,301.63	\$1,353.69	\$1,457.82	1.3%	1.3%	1.3%	1.3%	1.3%	1.3%	8.7%
VE054S	HyEPO	\$483.83	\$967.66	\$919.28	\$1,209.58	\$1,257.96	\$1,354.72	1.3%	1.3%	1.3%	1.3%	1.3%	1.3%	8.7%
VEHD-01S	HDEPOagg	\$596.54	\$1,193.08	\$1,133.43	\$1,491.35	\$1,551.00	\$1,670.31	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	8.8%
VEHD-02S	HDEPOagg	\$503.48	\$1,006.96	\$956.61	\$1,258.70	\$1,309.05	\$1,409.74	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	8.8%
VEHD-03S	HDEPOagg	\$404.32	\$808.64	\$768.21	\$1,010.80	\$1,051.23	\$1,132.10	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	8.8%
VEHD-06S	HDEPOagg	\$468.37	\$936.74	\$889.90	\$1,170.93	\$1,217.76	\$1,311.44	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	8.8%
VEHD-07S	HDEPOagg	\$537.07	\$1,074.14	\$1,020.43	\$1,342.68	\$1,396.38	\$1,503.80	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	8.8%
VEHD-08S	HDEPOagg	\$480.88	\$961.76	\$913.67	\$1,202.20	\$1,250.29	\$1,346.46	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	8.8%
VEHD-09S	HDEPOagg	\$444.12	\$888.24	\$843.83	\$1,110.30	\$1,154.71	\$1,243.54	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	8.8%
VEHD-12S	HDEPOagg	\$456.07	\$912.14	\$866.53	\$1,140.18	\$1,185.78	\$1,277.00	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	8.8%
VEHD-14S	HDEPOagg	\$474.07	\$948.14	\$900.73	\$1,185.18	\$1,232.58	\$1,327.40	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	8.8%
VEHD-15S	HDEPOagg	\$437.90	\$875.80	\$832.01	\$1,094.75	\$1,138.54	\$1,226.12	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	8.8%
VEHD-17S	HDEPOagg	\$461.82	\$923.64	\$877.46	\$1,154.55	\$1,200.73	\$1,293.10	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	8.8%
VEHD-18	HDEPO	\$536.73	\$1,073.46	\$1,019.79	\$1,341.83	\$1,395.50	\$1,502.84	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	8.8%
VEHD-19	HDEPO	\$422.32	\$844.64	\$802.41	\$1,055.80	\$1,098.03	\$1,182.50	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	8.8%
VP048S	HyPPO	\$584.69	\$1,169.38	\$1,110.91	\$1,461.73	\$1,520.19	\$1,637.13	1.3%	1.3%	1.3%	1.3%	1.3%	1.3%	8.7%
VP051S	HyPPO	\$658.03	\$1,316.06	\$1,250.26	\$1,645.08	\$1,710.88	\$1,842.48	1.3%	1.3%	1.3%	1.3%	1.3%	1.3%	8.7%
VPHD-03S	HDEPOagg	\$406.23	\$812.46	\$771.84	\$1,015.58	\$1,056.20	\$1,137.44	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	8.8%
VPHD-04S	HDEPOagg	\$579.26	\$1,158.52	\$1,100.59	\$1,448.15	\$1,506.08	\$1,621.93	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	8.8%
VPHD-06S	HDEPOagg	\$472.83	\$945.66	\$898.38	\$1,182.08	\$1,229.36	\$1,323.92	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	8.8%
VPHD-09S	HDEPOagg	\$448.39	\$896.78	\$851.94	\$1,120.98	\$1,165.81	\$1,255.49	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	8.8%
VT03SA	EPO	\$713.26	\$1,426.52	\$1,355.19	\$1,783.15	\$1,854.48	\$1,997.13	1.3%	1.3%	1.3%	1.3%	1.3%	1.3%	8.7%
VT03SB	EPO	\$713.26	\$1,426.52	\$1,355.19	\$1,783.15	\$1,854.48	\$1,997.13	1.3%	1.3%	1.3%	1.3%	1.3%	1.3%	8.7%
VT03SC	EPO	\$713.26	\$1,426.52	\$1,355.19	\$1,783.15	\$1,854.48	\$1,997.13	1.3%	1.3%	1.3%	1.3%	1.3%	1.3%	8.7%

**Exhibit 6b -- Medical Riders (Q1 2015)**

Small Group VT HIC AR42 Rate Filing - Grandfathered Business  
 For Effective Dates Beginning Between January 1, 2015 - March 31, 2015

Rider	Description	Product Type	Single	Double	Parent/Child	2T Family	3T Family	4T Family	Single Quarterly Change	Double Quarterly Change	Parent/Child Quarterly Change	2T Family Quarterly Change	3T Family Quarterly Change	4T Family Quarterly Change	Single Rate Annual Change
VE313	Rider To Change Outpt Hosp Surg Copay In Copay EPO Plans From \$250 to \$150	EPO	\$2.60	\$5.20	\$4.94	\$6.50	\$6.76	\$7.28	0.8%	0.8%	0.8%	0.8%	0.8%	0.8%	8.3%
VT314	80% reimbursement for glasses/contacts up to \$160 once every 2 calendar years	EPO	\$3.56	\$7.12	\$6.76	\$8.90	\$9.26	\$9.97	0.8%	0.8%	0.7%	0.8%	0.9%	0.9%	8.5%
V301	Vision Exam 1 Every 2 Calendar Yr	EPO/PPO	\$4.44	\$8.88	\$8.44	\$11.10	\$11.54	\$12.43	0.9%	0.9%	1.0%	0.9%	0.9%	0.9%	8.6%
V306	60 Visits Outpatient Physical/Speech/Occupational Therapy (In/Out Of Network Cc	EPO/PPO	\$6.07	\$12.14	\$11.53	\$15.18	\$15.78	\$17.00	0.8%	0.8%	0.8%	0.9%	0.8%	0.8%	8.6%
V307	Exclusion For Elective Abortions	EPO/PPO	(\$0.18)	(\$0.36)	(\$0.34)	(\$0.45)	(\$0.47)	(\$0.50)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	5.9%
V308	Preventive Dental For Kids - \$25 Office Copayment	EPO/PPO	\$3.57	\$7.14	\$6.78	\$8.93	\$9.28	\$10.00	0.8%	0.8%	0.7%	0.9%	0.9%	0.9%	8.5%
V310	Annual Vision Exam - Per Calendar Yr	EPO/PPO	\$8.98	\$17.96	\$17.06	\$22.45	\$23.35	\$25.14	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.6%
V312	Dme, External Pros/Ostomy Buy - Up To 80% In-Network Only	EPO/PPO	\$1.15	\$2.30	\$2.19	\$2.88	\$2.99	\$3.22	0.9%	0.9%	0.9%	1.1%	1.0%	0.9%	8.5%
V700	Domestic Partners (Same And Opp Sex)	EPO/PPO	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	N/A	N/A	N/A	N/A	N/A	N/A	N/A
V702	Domestic Partners (Same And Opp Sex)	EPO/PPO	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	N/A	N/A	N/A	N/A	N/A	N/A	N/A
V314	Adult Preventative Dental	EPO/PPO	\$21.71	\$43.42	\$41.25	\$54.28	\$56.45	\$60.79	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.6%
V315	Adult Prev Dental w/ Family Restorative	EPO/PPO	\$29.60	\$59.20	\$56.24	\$74.00	\$76.96	\$82.88	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.6%
V316	Disposable Medical Supplies	EPO/PPO	\$1.39	\$2.78	\$2.64	\$3.48	\$3.61	\$3.89	0.7%	0.7%	0.8%	0.9%	0.6%	0.8%	8.6%
V317	Changes Contract Yr To Calendar Year	EPO/PPO	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	N/A	N/A	N/A	N/A	N/A	N/A	N/A
V361	Gym Membership Reimbursement - \$300 Maximum per Subscriber	EPO/PPO	\$3.83	\$7.66	\$7.28	\$9.58	\$9.96	\$10.72	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
V362	Youth Sports Reimbursement - \$300 Maximum per Subscriber	EPO/PPO	\$0.98	\$1.96	\$1.86	\$2.45	\$2.55	\$2.74	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
V363	Weight Loss Program Reimbursement - \$100 Maximum per Subscriber	EPO/PPO	\$0.31	\$0.62	\$0.59	\$0.78	\$0.81	\$0.87	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
VEHD 312a	Exam & Hardware, attaches to \$1250 INN Ded	HDEPO	\$4.56	\$9.12	\$8.66	\$11.40	\$11.86	\$12.77	0.9%	0.9%	0.8%	0.9%	0.9%	0.9%	8.8%
VEHD 312b	Exam & Hardware, attaches to \$1500 INN Ded	HDEPO	\$4.12	\$8.24	\$7.83	\$10.30	\$10.71	\$11.54	1.0%	1.0%	1.0%	1.0%	0.9%	1.1%	8.7%
VEHD 312c	Exam & Hardware, attaches to \$2000 INN Ded	HDEPO	\$3.40	\$6.80	\$6.46	\$8.50	\$8.84	\$9.52	0.9%	0.9%	0.9%	0.8%	0.9%	0.8%	8.6%
VEHD 312d	Exam & Hardware, attaches to \$2500 INN Ded	HDEPO	\$2.89	\$5.78	\$5.49	\$7.23	\$7.51	\$8.09	1.0%	1.0%	1.1%	1.1%	0.9%	1.0%	9.1%
VEHD 312e	Exam & Hardware, attaches to \$3000 INN Ded	HDEPO	\$2.51	\$5.02	\$4.77	\$6.28	\$6.53	\$7.03	0.8%	0.8%	0.8%	0.8%	0.9%	0.9%	8.7%
VEHD 312f	Exam & Hardware, attaches to \$4000 INN Ded	HDEPO	\$1.89	\$3.78	\$3.59	\$4.73	\$4.91	\$5.29	1.1%	1.1%	1.1%	1.1%	1.0%	1.0%	8.6%
VEHD 312g	Exam & Hardware, attaches to \$5000 INN Ded	HDEPO	\$1.52	\$3.04	\$2.89	\$3.80	\$3.95	\$4.26	0.7%	0.7%	0.7%	0.5%	0.5%	0.7%	8.6%
VEHD 312h	Exam & Hardware, attaches to \$10000 INN Ded	HDEPO	\$0.64	\$1.28	\$1.22	\$1.60	\$1.66	\$1.79	1.6%	1.6%	1.7%	1.3%	1.2%	1.7%	10.3%
VPHD 312a	Exam & Hardware, attaches to \$1250 INN Ded	HDPPPO	\$4.56	\$9.12	\$8.66	\$11.40	\$11.86	\$12.77	0.9%	0.9%	0.8%	0.9%	0.9%	0.9%	8.8%
VPHD 312b	Exam & Hardware, attaches to \$1500 INN Ded	HDPPPO	\$4.12	\$8.24	\$7.83	\$10.30	\$10.71	\$11.54	1.0%	1.0%	1.0%	1.0%	0.9%	1.1%	8.7%
VPHD 312c	Exam & Hardware, attaches to \$2000 INN Ded	HDPPPO	\$3.40	\$6.80	\$6.46	\$8.50	\$8.84	\$9.52	0.9%	0.9%	0.9%	0.8%	0.9%	0.8%	8.6%
VPHD 312d	Exam & Hardware, attaches to \$2500 INN Ded	HDPPPO	\$2.89	\$5.78	\$5.49	\$7.23	\$7.51	\$8.09	1.0%	1.0%	1.1%	1.1%	0.9%	1.0%	9.1%
VPHD 312e	Exam & Hardware, attaches to \$3000 INN Ded	HDPPPO	\$2.51	\$5.02	\$4.77	\$6.28	\$6.53	\$7.03	0.8%	0.8%	0.8%	0.8%	0.9%	0.9%	8.7%
VPHD 312f	Exam & Hardware, attaches to \$4000 INN Ded	HDPPPO	\$1.89	\$3.78	\$3.59	\$4.73	\$4.91	\$5.29	1.1%	1.1%	1.1%	1.1%	1.0%	1.0%	8.6%
VPHD 312g	Exam & Hardware, attaches to \$5000 INN Ded	HDPPPO	\$1.52	\$3.04	\$2.89	\$3.80	\$3.95	\$4.26	0.7%	0.7%	0.7%	0.5%	0.5%	0.7%	8.6%
VPHD 312h	Exam & Hardware, attaches to \$10000 INN Ded	HDPPPO	\$0.64	\$1.28	\$1.22	\$1.60	\$1.66	\$1.79	1.6%	1.6%	1.7%	1.3%	1.2%	1.7%	10.3%
VHD306	60 Visits Outpatient Physical/Speech/Occupational Therapy (In/Out Of Network Cc	HDHP	\$5.91	\$11.82	\$11.23	\$14.78	\$15.37	\$16.55	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.6%
VHD307	Exclusion For Elective Abortions	HDHP	(\$0.21)	(\$0.42)	(\$0.40)	(\$0.53)	(\$0.55)	(\$0.59)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	5.0%
VHD700	Domestic Partners (Same And Opp Sex)	HDHP	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	N/A	N/A	N/A	N/A	N/A	N/A	N/A
VHD702	Domestic Partners (Same And Opp Sex)	HDHP	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	N/A	N/A	N/A	N/A	N/A	N/A	N/A
VHD510-a	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-01)	HDHP	\$2.91	\$5.82	\$5.53	\$7.28	\$7.57	\$8.15	1.0%	1.0%	1.1%	1.1%	1.1%	1.1%	9.0%
VHD510-b	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-02)	HDHP	\$5.63	\$11.26	\$10.70	\$14.08	\$14.64	\$15.76	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.7%
VHD510-c	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-03 & VPHD-03)	HDHP	\$6.05	\$12.10	\$11.50	\$15.13	\$15.73	\$16.94	0.8%	0.8%	0.9%	0.8%	0.8%	0.8%	8.8%
VHD510-d	Safe Harbor preventative Rx list for qualified HDHP's (VPHD-04)	HDHP	\$2.72	\$5.44	\$5.17	\$6.80	\$7.07	\$7.62	0.7%	0.7%	0.8%	0.7%	0.7%	0.8%	8.4%
VHD510-f	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-06 & VPHD-06)	HDHP	\$3.89	\$7.78	\$7.39	\$9.73	\$10.11	\$10.89	0.8%	0.8%	0.8%	0.8%	0.7%	0.7%	8.7%
VHD510-g	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-07)	HDHP	\$2.51	\$5.02	\$4.77	\$6.28	\$6.53	\$7.03	0.8%	0.8%	0.8%	0.8%	0.9%	0.9%	8.7%
VHD510-h	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-08)	HDHP	\$3.76	\$7.52	\$7.14	\$9.40	\$9.78	\$10.53	0.8%	0.8%	0.7%	0.8%	0.8%	0.9%	8.7%
VHD510-i	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-09, VPHD-09)	HDHP	\$3.60	\$7.20	\$6.84	\$9.00	\$9.36	\$10.08	0.8%	0.8%	0.9%	0.8%	0.9%	0.8%	8.8%
VHD510-l	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-012 & VPHD-012)	HDHP	\$3.75	\$7.50	\$7.13	\$9.38	\$9.75	\$10.50	0.8%	0.8%	0.9%	0.8%	0.8%	0.8%	8.7%
VHD510-n	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-014 & VPHD-014)	HDHP	\$2.88	\$5.76	\$5.47	\$7.20	\$7.49	\$8.06	1.1%	1.1%	0.9%	1.0%	1.1%	1.0%	9.1%
VHD510-o	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-15)	HDHP	\$3.40	\$6.80	\$6.46	\$8.50	\$8.84	\$9.52	0.9%	0.9%	0.9%	0.8%	0.9%	0.8%	8.6%
VHD510-q	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-17)	HDHP	\$3.86	\$7.72	\$7.33	\$9.65	\$10.04	\$10.81	0.8%	0.8%	0.7%	0.8%	0.8%	0.8%	8.7%
VHD510-r	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-18)	HDHP	\$4.76	\$9.52	\$9.04	\$11.90	\$12.38	\$13.33	0.8%	0.8%	0.8%	0.8%	0.9%	0.8%	8.7%
VHD510-s	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-19)	HDHP	\$5.61	\$11.22	\$10.66	\$14.03	\$14.59	\$15.71	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	8.7%
VHD316	Disposable Medical Supplies	HDHP	\$0.85	\$1.70	\$1.62	\$2.13	\$2.21	\$2.38	1.2%	1.2%	1.3%	1.4%	1.4%	1.3%	9.0%
VHDC317	Changes Contract Yr To Calendar Year	HDHP	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	N/A	N/A	N/A	N/A	N/A	N/A	N/A
VHDC343	Gym Membership Reimbursement - \$300 Maximum per Subscriber	HDHP	\$3.83	\$7.66	\$7.28	\$9.58	\$9.96	\$10.72	-2.0%	-2.0%	-2.0%	-2.0%	-2.1%	-2.1%	-2.0%
VHDC344	Youth Sports Reimbursement - \$300 Maximum per Subscriber	HDHP	\$0.98	\$1.96	\$1.86	\$2.45	\$2.55	\$2.74	-2.0%	-2.0%	-2.1%	-2.0%	-1.9%	-2.1%	-2.0%
VHDC345	Weight Loss Program Reimbursement - \$100 Maximum per Subscriber	HDHP	\$0.31	\$0.62	\$0.59	\$0.78	\$0.81	\$0.87	-6.1%	-6.1%	-6.3%	-6.0%	-5.8%	-5.4%	-6.1%

Exhibit 6b -- Medical Riders (Q2 2015)

Small Group VT HIC AR42 Rate Filing - Grandfathered Business  
 For Effective Dates Beginning Between April 1, 2015 - June 30, 2015

Rider	Description	Product Type	Single	Double	Parent/Child	2T Family	3T Family	4T Family	Single Quarterly Change	Double Quarterly Change	Parent/Child Quarterly Change	2T Family Quarterly Change	3T Family Quarterly Change	4T Family Quarterly Change	Single Rate Annual Change
VE313	Rider To Change Outpt Hosp Surg Copay In Copay EPO Plans From \$250 to \$150	EPO	\$5.63	\$5.26	\$5.00	\$6.58	\$6.84	\$7.36	1.2%	1.2%	1.2%	1.2%	1.2%	1.1%	8.2%
VT314	80% reimbursement for glasses/contacts up to \$160 once every 2 calendar years	EPO	\$3.61	\$7.22	\$6.86	\$9.03	\$9.39	\$10.11	1.4%	1.4%	1.5%	1.5%	1.4%	1.4%	8.7%
V301	Vision Exam 1 Every 2 Calendar Yr	EPO/PPO	\$4.50	\$9.00	\$8.55	\$11.25	\$11.70	\$12.60	1.4%	1.4%	1.3%	1.4%	1.4%	1.4%	8.7%
V306	60 Visits Outpatient Physical/Speech/Occupational Therapy (In/Out Of Network C	EPO/PPO	\$6.15	\$12.30	\$11.69	\$15.38	\$15.99	\$17.22	1.3%	1.3%	1.4%	1.3%	1.3%	1.3%	8.7%
V307	Exclusion For Elective Abortions	EPO/PPO	(\$0.18)	(\$0.36)	(\$0.34)	(\$0.45)	(\$0.47)	(\$0.50)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	5.9%
V308	Preventive Dental For Kids - \$25 Office Copayment	EPO/PPO	\$3.62	\$7.24	\$6.88	\$9.05	\$9.41	\$10.14	1.4%	1.4%	1.5%	1.3%	1.4%	1.4%	8.7%
V310	Annual Vision Exam - Per Calendar Yr	EPO/PPO	\$9.10	\$18.20	\$17.29	\$22.75	\$23.66	\$25.48	1.3%	1.3%	1.3%	1.3%	1.3%	1.4%	8.7%
V312	Dme, External Pros/Ostomy Buy - Up To 80% In-Network Only	EPO/PPO	\$1.17	\$2.34	\$2.22	\$2.93	\$3.04	\$3.28	1.7%	1.4%	1.3%	1.7%	1.7%	1.9%	9.3%
V700	Domestic Partners (Same And Opp Sex)	EPO/PPO	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	N/A	N/A	N/A	N/A	N/A	N/A	N/A
V702	Domestic Partners (Same And Opp Sex)	EPO/PPO	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	N/A	N/A	N/A	N/A	N/A	N/A	N/A
V314	Adult Preventative Dental	EPO/PPO	\$22.00	\$44.00	\$41.80	\$55.00	\$57.20	\$61.60	1.3%	1.3%	1.3%	1.3%	1.3%	1.3%	8.7%
V315	Adult Prev Dental w/ Family Restorative	EPO/PPO	\$29.99	\$59.98	\$56.98	\$74.98	\$77.97	\$83.97	1.3%	1.3%	1.3%	1.3%	1.3%	1.3%	8.7%
V316	Disposable Medical Supplies	EPO/PPO	\$1.41	\$2.82	\$2.68	\$3.53	\$3.67	\$3.95	1.4%	1.4%	1.5%	1.4%	1.7%	1.5%	8.5%
V317	Changes Contract Yr To Calendar Year	EPO/PPO	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	N/A	N/A	N/A	N/A	N/A	N/A	N/A
V361	Gym Membership Reimbursement - \$300 Maximum per Subscriber	EPO/PPO	\$3.83	\$7.66	\$7.28	\$9.58	\$9.96	\$10.72	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
V362	Youth Sports Reimbursement - \$300 Maximum per Subscriber	EPO/PPO	\$0.98	\$1.96	\$1.86	\$2.45	\$2.55	\$2.74	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
V363	Weight Loss Program Reimbursement - \$100 Maximum per Subscriber	EPO/PPO	\$0.31	\$0.62	\$0.59	\$0.78	\$0.81	\$0.87	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
VEHD 312a	Exam & Hardware, attaches to \$1250 INN Ded	HDEPO	\$4.63	\$9.26	\$8.80	\$11.58	\$12.04	\$12.96	1.5%	1.5%	1.6%	1.6%	1.5%	1.5%	8.9%
VEHD 312b	Exam & Hardware, attaches to \$1500 INN Ded	HDEPO	\$4.18	\$8.36	\$7.94	\$10.45	\$10.87	\$11.70	1.5%	1.5%	1.4%	1.5%	1.4%	1.4%	8.9%
VEHD 312c	Exam & Hardware, attaches to \$2000 INN Ded	HDEPO	\$3.45	\$6.90	\$6.56	\$8.63	\$8.97	\$9.66	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	8.8%
VEHD 312d	Exam & Hardware, attaches to \$2500 INN Ded	HDEPO	\$2.93	\$5.86	\$5.57	\$7.33	\$7.62	\$8.20	1.4%	1.4%	1.5%	1.4%	1.5%	1.4%	8.9%
VEHD 312e	Exam & Hardware, attaches to \$3000 INN Ded	HDEPO	\$2.55	\$5.10	\$4.85	\$6.38	\$6.63	\$7.14	1.6%	1.6%	1.7%	1.6%	1.5%	1.6%	9.0%
VEHD 312f	Exam & Hardware, attaches to \$4000 INN Ded	HDEPO	\$1.92	\$3.84	\$3.65	\$4.80	\$4.99	\$5.38	1.6%	1.6%	1.7%	1.6%	1.7%	1.7%	9.1%
VEHD 312g	Exam & Hardware, attaches to \$5000 INN Ded	HDEPO	\$1.54	\$3.08	\$2.93	\$3.85	\$4.00	\$4.31	1.3%	1.3%	1.4%	1.3%	1.3%	1.2%	8.5%
VEHD 312h	Exam & Hardware, attaches to \$10000 INN Ded	HDEPO	\$0.65	\$1.30	\$1.24	\$1.63	\$1.69	\$1.82	1.6%	1.6%	1.6%	1.9%	1.8%	1.7%	10.2%
VPHD 312a	Exam & Hardware, attaches to \$1250 INN Ded	HDPPPO	\$4.63	\$9.26	\$8.80	\$11.58	\$12.04	\$12.96	1.5%	1.5%	1.6%	1.6%	1.5%	1.5%	8.9%
VPHD 312b	Exam & Hardware, attaches to \$1500 INN Ded	HDPPPO	\$4.18	\$8.36	\$7.94	\$10.45	\$10.87	\$11.70	1.5%	1.5%	1.4%	1.5%	1.5%	1.4%	8.9%
VPHD 312c	Exam & Hardware, attaches to \$2000 INN Ded	HDPPPO	\$3.45	\$6.90	\$6.56	\$8.63	\$8.97	\$9.66	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	8.8%
VPHD 312d	Exam & Hardware, attaches to \$2500 INN Ded	HDPPPO	\$2.93	\$5.86	\$5.57	\$7.33	\$7.62	\$8.20	1.4%	1.4%	1.5%	1.4%	1.5%	1.4%	8.9%
VPHD 312e	Exam & Hardware, attaches to \$3000 INN Ded	HDPPPO	\$2.55	\$5.10	\$4.85	\$6.38	\$6.63	\$7.14	1.6%	1.6%	1.7%	1.6%	1.5%	1.6%	9.0%
VPHD 312f	Exam & Hardware, attaches to \$4000 INN Ded	HDPPPO	\$1.92	\$3.84	\$3.65	\$4.80	\$4.99	\$5.38	1.6%	1.6%	1.7%	1.6%	1.7%	1.7%	9.1%
VPHD 312g	Exam & Hardware, attaches to \$5000 INN Ded	HDPPPO	\$1.54	\$3.08	\$2.93	\$3.85	\$4.00	\$4.31	1.3%	1.3%	1.4%	1.3%	1.3%	1.2%	8.5%
VPHD 312h	Exam & Hardware, attaches to \$10000 INN Ded	HDPPPO	\$0.65	\$1.30	\$1.24	\$1.63	\$1.69	\$1.82	1.6%	1.6%	1.6%	1.9%	1.8%	1.7%	10.2%
VHD306	60 Visits Outpatient Physical/Speech/Occupational Therapy (In/Out Of Network C	HDHP	\$6.00	\$12.00	\$11.40	\$15.00	\$15.60	\$16.80	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	8.9%
VHD307	Exclusion For Elective Abortions	HDHP	(\$0.21)	(\$0.42)	(\$0.40)	(\$0.53)	(\$0.55)	(\$0.59)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	5.0%
VHD700	Domestic Partners (Same And Opp Sex)	HDHP	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	N/A	N/A	N/A	N/A	N/A	N/A	N/A
VHD702	Domestic Partners (Same And Opp Sex)	HDHP	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	N/A	N/A	N/A	N/A	N/A	N/A	N/A
VHD510-a	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-01)	HDHP	\$2.95	\$5.90	\$5.61	\$7.38	\$7.67	\$8.26	1.4%	1.4%	1.4%	1.4%	1.3%	1.3%	8.9%
VHD510-b	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-02)	HDHP	\$5.71	\$11.42	\$10.85	\$14.28	\$14.85	\$15.99	1.4%	1.4%	1.4%	1.4%	1.4%	1.5%	8.8%
VHD510-c	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-03 & VPHD-03)	HDHP	\$6.14	\$12.28	\$11.67	\$15.35	\$15.96	\$17.19	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	8.9%
VHD510-d	Safe Harbor preventative Rx list for qualified HDHP's (VPHD-04)	HDHP	\$2.76	\$5.52	\$5.24	\$6.90	\$7.18	\$7.73	1.5%	1.5%	1.4%	1.5%	1.6%	1.4%	8.7%
VHD510-e	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-06 & VPHD-06)	HDHP	\$3.95	\$7.90	\$7.51	\$9.88	\$10.27	\$11.06	1.5%	1.5%	1.6%	1.5%	1.6%	1.6%	8.8%
VHD510-g	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-07)	HDHP	\$2.55	\$5.10	\$4.85	\$6.38	\$6.63	\$7.14	1.6%	1.6%	1.7%	1.6%	1.5%	1.6%	9.0%
VHD510-h	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-08)	HDHP	\$3.82	\$7.64	\$7.26	\$9.55	\$9.93	\$10.70	1.6%	1.6%	1.7%	1.6%	1.5%	1.6%	8.8%
VHD510-i	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-09, VPHD-09)	HDHP	\$3.65	\$7.30	\$6.94	\$9.13	\$9.49	\$10.22	1.4%	1.4%	1.5%	1.4%	1.4%	1.4%	8.6%
VHD510-j	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-012 & VPHD-012)	HDHP	\$3.81	\$7.62	\$7.24	\$9.53	\$9.91	\$10.67	1.6%	1.6%	1.5%	1.6%	1.6%	1.6%	8.9%
VHD510-k	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-014 & VPHD-014)	HDHP	\$2.92	\$5.84	\$5.55	\$7.30	\$7.59	\$8.18	1.4%	1.4%	1.5%	1.4%	1.3%	1.5%	9.0%
VHD510-l	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-15)	HDHP	\$3.45	\$6.90	\$6.56	\$8.63	\$8.97	\$9.66	1.5%	1.5%	1.5%	1.5%	1.5%	1.5%	8.8%
VHD510-m	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-17)	HDHP	\$3.92	\$7.84	\$7.45	\$9.80	\$10.19	\$10.98	1.6%	1.6%	1.6%	1.6%	1.5%	1.6%	8.9%
VHD510-n	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-18)	HDHP	\$4.83	\$9.66	\$9.18	\$12.08	\$12.56	\$13.52	1.5%	1.5%	1.5%	1.5%	1.5%	1.4%	8.8%
VHD510-o	Safe Harbor preventative Rx list for qualified HDHP's (VEHD-19)	HDHP	\$5.69	\$11.38	\$10.81	\$14.23	\$14.79	\$15.93	1.4%	1.4%	1.4%	1.4%	1.4%	1.4%	8.8%
VHD316	Disposable Medical Supplies	HDHP	\$0.86	\$1.72	\$1.63	\$2.15	\$2.24	\$2.41	1.2%	1.2%	0.6%	0.9%	1.4%	1.3%	8.9%
VHDC317	Changes Contract Yr To Calendar Year	HDHP	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	N/A	N/A	N/A	N/A	N/A	N/A	N/A
VHDC343	Gym Membership Reimbursement - \$300 Maximum per Subscriber	HDHP	\$3.83	\$7.66	\$7.28	\$9.58	\$9.96	\$10.72	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-2.0%
VHDC344	Youth Sports Reimbursement - \$300 Maximum per Subscriber	HDHP	\$0.98	\$1.96	\$1.86	\$2.45	\$2.55	\$2.74	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-2.0%
VHDC345	Weight Loss Program Reimbursement - \$100 Maximum per Subscriber	HDHP	\$0.31	\$0.62	\$0.59	\$0.78	\$0.81	\$0.87	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-6.1%

<b>Exhibit 6c -- Rx Riders (Q1 2015)</b>
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Small Group VT HIC AR42 Rate Filing - Grandfathered Business  
For Effective Dates Beginning Between January 1, 2015 - March 31, 2015

Rider	Description	Product Type	Single	Double	Parent/Child	2T Family	3T Family	4T Family	Single Quarterly Change	Double Quarterly Change	Parent/Child Quarterly Change	2T Family Quarterly Change	3T Family Quarterly Change	4T Family Quarterly Change	Single Rate Annual Change
V500S	\$10/\$30/\$50	EPO/PPO	\$143.08	\$286.16	\$271.85	\$357.70	\$372.01	\$400.62	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	9.4%
V501S	\$10/30%/50%	EPO/PPO	\$117.35	\$234.70	\$222.97	\$293.38	\$305.11	\$328.58	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	9.4%
V502S	50%	EPO/PPO	\$90.86	\$181.72	\$172.63	\$227.15	\$236.24	\$254.41	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	9.4%
V504S	0/\$30/\$50	EPO/PPO	\$160.36	\$320.72	\$304.68	\$400.90	\$416.94	\$449.01	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	9.4%
V601S	\$5/\$35/\$70	EPO/PPO	\$147.39	\$294.78	\$280.04	\$368.48	\$383.21	\$412.69	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	9.4%
V602S	\$5/\$35/\$70 - \$250 Brand Ded	EPO/PPO	\$136.80	\$273.60	\$259.92	\$342.00	\$355.68	\$383.04	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	9.4%
V603S	\$5/\$35/\$70 - \$500 Brand Ded	EPO/PPO	\$129.08	\$258.16	\$245.25	\$322.70	\$335.61	\$361.42	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	9.4%
V604S	\$5/\$45/\$90	EPO/PPO	\$141.14	\$282.28	\$268.17	\$352.85	\$366.96	\$395.19	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	9.4%
V605S	\$5/\$45/\$90 - \$250 Brand Ded	EPO/PPO	\$131.25	\$262.50	\$249.38	\$328.13	\$341.25	\$367.50	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	9.4%
V606S	\$5/\$45/\$90 - \$500 Brand Ded	EPO/PPO	\$124.07	\$248.14	\$235.73	\$310.18	\$322.58	\$347.40	0.9%	0.9%	0.9%	0.9%	0.9%	0.9%	9.4%

**Exhibit 6c -- Rx Riders (Q2 2015)**

Small Group VT HIC AR42 Rate Filing - Grandfathered Business  
For Effective Dates Beginning Between April 1, 2015 - June 30, 2015

Rider	Description	Product Type	Single	Double	Parent/Child	2T Family	3T Family	4T Family	Single Quarterly Change	Double Quarterly Change	Parent/Child Quarterly Change	2T Family Quarterly Change	3T Family Quarterly Change	4T Family Quarterly Change	Single Rate Annual Change
V500S	\$10/\$30/\$50	EPO/PPO	\$146.43	\$292.86	\$278.22	\$366.08	\$380.72	\$410.00	2.3%	2.3%	2.3%	2.3%	2.3%	2.3%	9.8%
V501S	\$10/30%/50%	EPO/PPO	\$120.10	\$240.20	\$228.19	\$300.25	\$312.26	\$336.28	2.3%	2.3%	2.3%	2.3%	2.3%	2.3%	9.8%
V502S	50%	EPO/PPO	\$92.99	\$185.98	\$176.68	\$232.48	\$241.77	\$260.37	2.3%	2.3%	2.3%	2.3%	2.3%	2.3%	9.8%
V504S	0/\$30/\$50	EPO/PPO	\$164.12	\$328.24	\$311.83	\$410.30	\$426.71	\$459.54	2.3%	2.3%	2.3%	2.3%	2.3%	2.3%	9.8%
V601S	\$5/\$35/\$70	EPO/PPO	\$150.85	\$301.70	\$286.62	\$377.13	\$392.21	\$422.38	2.3%	2.3%	2.3%	2.3%	2.3%	2.3%	9.8%
V602S	\$5/\$35/\$70 - \$250 Brand Ded	EPO/PPO	\$140.01	\$280.02	\$266.02	\$350.03	\$364.03	\$392.03	2.3%	2.3%	2.3%	2.3%	2.3%	2.3%	9.8%
V603S	\$5/\$35/\$70 - \$500 Brand Ded	EPO/PPO	\$132.11	\$264.22	\$251.01	\$330.28	\$343.49	\$369.91	2.3%	2.3%	2.3%	2.3%	2.3%	2.3%	9.8%
V604S	\$5/\$45/\$90	EPO/PPO	\$144.45	\$288.90	\$274.46	\$361.13	\$375.57	\$404.46	2.3%	2.3%	2.3%	2.3%	2.3%	2.3%	9.8%
V605S	\$5/\$45/\$90 - \$250 Brand Ded	EPO/PPO	\$134.33	\$268.66	\$255.23	\$335.83	\$349.26	\$376.12	2.3%	2.3%	2.3%	2.3%	2.3%	2.3%	9.8%
V606S	\$5/\$45/\$90 - \$500 Brand Ded	EPO/PPO	\$126.98	\$253.96	\$241.26	\$317.45	\$330.15	\$355.54	2.3%	2.3%	2.3%	2.3%	2.3%	2.3%	9.8%



## **Consumer Disclosure about Proposed Health Insurance Rate Increase Q1 and Q2 2015 Small Group AR42 Rate Filing – Grandfathered**

MVP Health Insurance Co. is a health care payer operating in Vermont and New York. MVP's mission is to provide high quality and affordable health care with a focus on wellness to our members.

MVP must obtain approval from the Green Mountain Care Board for the health insurance premium rates charged. MVP files quarterly premium rates which are guaranteed for 12 months. This rate filing seeks approval of MVP's 1st and 2nd quarter 2015 grandfathered premium rates (effective dates of coverage beginning between January 1, 2015 and June 30, 2015).

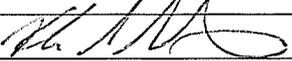
The premium rates filed for approval each quarter reflect MVP's current estimate of the cost to provide health insurance for that coverage period. The filed premium rates for the current quarter may be higher or lower than the previously filed premium rates. However, premium rates generally increase over time. Increases in premium rates are driven by many factors including increases in use of medical services by the insured population, increases in hospital and physician required charges for medical care, expanded covered services due to government mandates, fees and assessments charged by the government to insurers, and the exit of healthier individuals from the insurance market place as the cost of insurance increases.

The premium rates included in this rate filing reflect an 8.7% increase over the prior rates. The minimum proposed rate change for members renewing is 8.6% while the maximum rate change is 8.8%. There are 3,019 members in MVP's Grandfathered Small Group AR42 block of business, and 2,026 of these members renew in Q1 or Q2.

Certification of Compliance

I hereby certify that I have reviewed the applicable filing requirements for this filing and the filing complies with all applicable statutory and regulatory provisions for the state of Vermont.

Print Name: Karla Austen Title: Executive Vice President & Interim CFO

Signature:  Date: 7/31/14