SERFF Tracking #:	MVPH-129640114	State Tracking #:
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Company Tracking #:

State:	VermontGMCB	Filing Company:	MVP Health Insurance Company
TOI/Sub-TOI:	H16G Group Health - Major Medical/H16G.002A Large Group Only - PPO		
Product Name:	Agriservices Minimum Premium - Dec 2014		
Project Name/Number:	. /		

## Filing at a Glance

5	
Company:	MVP Health Insurance Company
Product Name:	Agriservices Minimum Premium - Dec 2014
State:	VermontGMCB
TOI:	H16G Group Health - Major Medical
Sub-TOI:	H16G.002A Large Group Only - PPO
Filing Type:	GMCB Rate
Date Submitted:	07/25/2014
SERFF Tr Num:	MVPH-129640114
SERFF Status:	Pending State Action
State Tr Num:	
State Status:	
Co Tr Num:	
Implementation	12/01/2014
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:	

Company Tracking #:

State:	VermontGMCB	Filing Company:	MVP Health Insurance Company
TOI/Sub-TOI:	H16G Group Health - Major Medical/H16G.002A Large Group Only - PPO		
Product Name:	Agriservices Minimum Premium - Dec 2014		
Project Name/Number:	/		

## **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:	Group Market Size: Large
Group Market Type: Association	Overall Rate Impact: 16%
Filing Status Changed: 08/08/2014	
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:

This filing contains proposed claim and retention costs for the grandfathered association, Agriservices. Agriservices purchases MVP's minimum premium contract with a maximum liability of 115% of expected claims cost. The effective date of this filing is 12/1/2014.

## **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:	This amount represents the standard fee associated with each GMCB rate filing. A check requested has been submitted to MVP's Accounts Payable Dept and will be sent to the GMCB in the near future.

SERFF Tracking #:	MVPH-129640114	State Tracking #:		Company Tracking #:	
State:	VermontGMCB		Filing Company:	MVP Health Insurance Company	
TOI/Sub-TOI:	H16G Group Heal	th - Major Medical/H16G.002A Larg	ge Group Only - PPO		
Product Name:	Agriservices Minin	num Premium - Dec 2014			
Project Name/Number:	/				

## **Correspondence Summary**

## **Objection Letters and Response Letters**

Objection Letters			Response Letters			
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Response	Jacqueline Lee	08/04/2014	08/04/2014	Matt Lombardo	08/08/2014	08/08/2014

SERFF Tracking #:	MVPH-129640114	State Tracking #:
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Company Tracking #:

State:	VermontGMCB	Filing Company:	MVP Health Insurance Company
TOI/Sub-TOI:	H16G Group Health - Major Medical/H16G.002A Large Group Only - PPO		
Product Name:	Agriservices Minimum Premium - Dec 2014		
Project Name/Number:	/		

## **Objection Letter**

Objection Letter Status	Pending Response	
Objection Letter Date	08/04/2014	
Submitted Date	08/04/2014	
Respond By Date	08/08/2014	

Dear Matt Lombardo,

Introduction:

Please see attached inquiry letter.

#### Conclusion:

Sincerely, Rita Tansen, ASA, MAAA Consulting Actuary Sincerely, Jacqueline Lee

Dallas Glenn A. Tobleman, F.S.A., F.C.A.S. S. Scott Gibson, F.S.A. Cabe W. Chadick, F.S.A Michael A. Mayberry, F.S.A. David M. Dillon, F.S.A. Gregory S. Wilson, F.C.A.S. Steven D. Bryson, F.S.A. Bonnie S. Albritton, F.S.A. Brian D. Rankin, F.S.A. Wesley R. Campbell, F.S.A. Jacqueline B. Lee, F.S.A. Robert E. Gove, A.S.A. J. Finn Knox-Seith, A.S.A. Brian C. Stentz, A.S.A. Jay W. Fuller, A.S.A. Sujaritha Tansen, A.S.A Josh A. Hammerquist, A.S.A. Xiaoxiao (Lisa) Jiang, A.S.A. Jennifer M. Allen, A.S.A. Sergei Mordovin, A.S.A. Robert B. Thomas, Jr., F.S.A., C.F.A. (Of Counsel)



Kansas City

Gary L. Rose, F.S.A. Terry M. Long, F.S.A. David L. Batchelder, A.S.A. Leon L. Langlitz, F.S.A. Gary R. McElwain, FLMI Anthony G. Proulx, F.S.A. Thomas L. Handley, F.S.A. D. Patrick Glenn, A.S.A., A.C.A.S. Christopher H. Davis, F.S.A. Karen E. Elsom, F.S.A. Jill J. Humes, F.S.A.

London / Kansas City Roger K. Annin, F.S.A. Timothy A. DeMars, F.S.A. Scott E. Morrow, F.S.A.

Baltimore David A. Palmer, C.F.E.

August 4, 2014

Matt Lombardo MVP Health Insurance Company 625 State Street Schenectady, NY 12305

Re: MVP Health Insurance Company Agriservices Association – Groups renewing December 1, 2014 SERFF Tracking #: MVPH-129640114

Dear Mr. Lombardo:

We have been retained by the Green Mountain Care Board ("GMCB") to review the above referenced group product filing submitted on 7/25/2014. The following additional information is required for this filing. In your itemized response, we request that you re-state each question.

- 1. Please submit the SERFF PDF Pipeline with all communications for the previously approved MVPHIC's Agri Services Association 2014 Premium Rate Filing.
- 2. We note that the assumed medical trend of 8.5% is higher than the 3Q/4Q14 large group PPO filing. Provide quantitative support for the assumed 8.5% medical trend and 4.8% Rx trend. How were the distribution between non-HDHP and HDHP products considered in setting these trend assumptions?
- 3. Please demonstrate the derivation of single conversion factor of 1.2407. Provide a similar breakdown for the prior filing and explain any differences.
- 4. Provide a breakdown of the components contributing to the assumed 11.75% in retention expense. Provide a similar breakdown for the prior filing and explain any differences.





- 5. Provide a breakdown of the components contributing to the \$18.21 in taxes and assessments. Provide a similar breakdown for the prior filing and explain any differences.
- 6. The expected claims in Exhibit A1 show a sharp rise for plan options 4 and 5. Explain the methodology adopted in developing the relativities among coplans.
  - i. Please quantitatively demonstrate how the expected claim liability PMPM shown in Section IV, line 11 on Exhibit A was adjusted in deriving the plan-specific expected claim liability PMPM in Exhibit A1. In doing so, demonstrate the step-by-step development of rate increase for each plan.
  - ii. What were the benefit relativities for the plans in the prior rate filing? What caused the sharp rise in benefit relativities for plan options 4 and 5?
- 7. Based on May 2014 contracts, we note that HDHP plans comprise 57% of Dairy and 78% of ASA groups. Please provide the experience period membership distribution by plan and contract type.
- 8. How many of your current groups are 100% experience rated versus those that use manual rates?
- 9. Please provide historic actual-to-expected experience for this group.

Please be aware that we expect to have further questions regarding the filing as the review continues.

To ensure that the review of your filing has been completed before statutory deadlines, we expect you to respond as expeditiously as possible, but no later than August 8, 2014.

We trust that you understand these forms may not be used in Vermont until they are formally approved by the GMCB.

Sincerely,

Sujaritha Tansen

Rita Tansen A.S.A., M.A.A.A. Consulting Actuary Lewis & Ellis, Inc. rtansen@lewisellis.com (972)850-0850





SERFF Tracking #:	MVPH-129640114	State Tracking #:		Company Tracking #:	
State:	VermontGMCB		Filing Company:	MVP Health Insurance Company	
TOI/Sub-TOI:	H16G Group Healt	h - Major Medical/H16G.002A Larg	ge Group Only - PPO		
Product Name:	Agriservices Minim	num Premium - Dec 2014			
Project Name/Number:	/				

## **Response Letter**

Response Letter Status	Submitted to State
Response Letter Date	08/08/2014
Submitted Date	08/08/2014

Dear Thomas Crompton,

Introduction:

#### **Response 1**

#### Comments:

Please see the Supporting Documentation items below which contain MVP's response to your 8/4/14 Objection Letter.

## Regards,

Matt Lombardo

#### Changed Items:

Supporting Document Schedule Item Changes		
Satisfied - Item:	Response to Objection Letter #1	
Comments:		
Attachment(s):	PDF Pipeline Dec 2013 Filing.pdf Quantitative Responses to Objection #1.pdf Quantitative Responses to Objection #1.xlsx Response to Objection #1.pdf	

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

#### **Conclusion:**

Sincerely,

Matt Lombardo

SERFF Tracking #:	MVPH-1296401	14 State T	Fracking #:		Company Trackir	ng #:		
State: TOI/Sub-TOI:	VermontG H16G Gro	-	ledical/H16G.002A Large	Filing Compar Group Only - PPO	<b>ny:</b> MVP Hea	Ith Insurance Company	,	
Product Name: Project Name/Number:	Agriservice /	es Minimum Premiu	m - Dec 2014					
Rate Informati	on							
Rate data applies	to filing.							
Filing Method:				SERFF				
Rate Change Type:	1			Increase				
Overall Percentage	of Last Rate	e Revision:		3.600%				
Effective Date of La	ast Rate Revi	ision:		12/01/2013				
Filing Method of La	ast Filing:			SERFF				
			Cor	mpany Rate Infori	mation			
	Company	Overall %	Overall %	Written	Number of Policy	Written	Maximum %	Minimum %
Company	Rate	Indicated	Rate	Premium	Holders Affected	Premium for	Change	Change
Name:	Change:	Change:	Impact:	Change for this Program:	for this Program:	this Program:	(where req'd):	(where req'd
MVP Health Insurance Company	Increase	16.000%	16.000%	\$883,292	1	\$5,529,760	31.800%	0.100%

SERFF Tracking #: MVPH-129640114 State Tracking #:

Company Tracking #:

State:	VermontGMCB	Filing Company:	MVP Health Insurance Company
TOI/Sub-TOI:	H16G Group Health - Major Medical/H16G.002A Large Group Only - PPO		
Product Name:	Agriservices Minimum Premium - Dec 2014		
Project Name/Number:			

## **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 HD EPO	92802VT006	92802VT00601	401
Preferred Suite HD PPO	92802VT007	92802VT00701	533
Preferred Suite PPO	92802VT005	92802VT00501	437

**Trend Factors:** 

#### FORMS:

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

#### **REQUESTED RATE CHANGE INFORMATION:**

Annual
18,074
Increase
Min: 0.1 Max: 31.8 Avg: 16.0

#### PRIOR RATE:

Total Earned Premium:	5,529,760.00
Total Incurred Claims:	4,700,296.00
Annual \$:	Min: 2,734.44 Max: 6,741.12 Avg: 3,670.50

#### **REQUESTED RATE:**

Projected Earned Premium:	6,413,052.00
Projected Incurred Claims:	5,451,094.00
Annual \$:	Min: 3,533.76 Max: 6,615.72 Avg: 4,257.86

SERFF Tracking #:	MVPH-129640114	State Tracking #:	C	Company Tracking #:	
State:	VermontGMCB		Filing Company:	MVP Health Insurance Company	
TOI/Sub-TOI:	H16G Group Hea	lth - Major Medical/H16G.002A Larg	e Group Only - PPO		
Product Name:	Agriservices Minir	num Premium - Dec 2014			
Project Name/Number:	/				

## Supporting Document Schedules

Satisfied - Item:	Actuarial Memorandum
Comments:	
Attachment(s):	Act Memo Agriservices Dec 2014.pdf Agri Services Dec 2014 Filing - SERFF.pdf Agri Services Dec 2014 Filing - SERFF.xlsm
Item Status:	
Status Date:	
Bypassed - Item:	Actuarial Memorandum and Certifications
Bypass Reason:	N/A - Large Group Grandfathered Filing
Attachment(s):	
Item Status:	
Status Date:	
Satisfied - Item:	Civil Union Rating Requirements
Comments:	MVP complies with 8 V.S.A. § 4724.
Attachment(s):	
Item Status:	
Status Date:	
Satisfied - Item:	Consumer Disclosure Form
Comments:	
Attachment(s):	Consumer Disclosure Form about Rate Increases - Agriservices.pdf
Item Status:	
Status Date:	
Satisfied - Item:	Filing Compliance Certification
Comments:	
Attachment(s):	Compliance Certification.PDF
Item Status:	
Status Date:	
Bypassed - Item:	Third Party Filing Authorization
Bypass Reason:	N/A
Attachment(s):	

SERFF Tracking #:	MVPH-129640114	State Tracking #:	с	ompany Tracking #:	
State:	VermontGMCB		Filing Company:	MVP Health Insurance Company	
TOI/Sub-TOI:	H16G Group Heal	th - Major Medical/H16G.002A Lar	ge Group Only - PPO		
Product Name:	Agriservices Minin	num Premium - Dec 2014			
Project Name/Number:	/				
Item Status:					
Status Date:					
Bypassed - Item:	Un	ified Rate Review Template	9		
Bypass Reason:	N//	A - Grandfathered Large Gr	oup Minimum Premium Filing		
Attachment(s):					
Item Status:					
Status Date:					
Satisfied - Item:	Re	sponse to Objection Letter	#1		
Comments:					
Attachment(s):	Qu Qu	OF Pipeline Dec 2013 Filing. antitative Responses to Ob antitative Responses to Ob sponse to Objection #1.pdf	jection #1.pdf jection #1.xlsx		
Item Status:					
Status Date:					

SERFF Tracking #:	MVPH-129640114	State Tracking #:	C	Company Tracking #:	
State:	VermontGMCB		Filing Company:	MVP Health Insurance Company	
TOI/Sub-TOI:	H16G Group Healt	h - Major Medical/H16G.002A Lar	ge Group Only - PPO		
Product Name:	Agriservices Minim	um Premium - Dec 2014			
Project Name/Number:	/				

Attachment Agri Services Dec 2014 Filing - SERFF.xlsm is not a PDF document and cannot be reproduced here.

Attachment Quantitative Responses to Objection #1.xlsx is not a PDF document and cannot be reproduced here.

#### ACTUARIAL MEMORANDUM Agriservices Association Premium Rate Filing Effective date 12/1/14-11/30/15

Agriservices Association is an association for farmers. Agriservices utilizes MVP's large group Minimum Premium Plan (MPP) funding arrangement to offer 5 health plan options to their member groups. The MPP funding arrangement includes individual stop-loss coverage at a pooling level of \$200,000. Agriservices is renewing their MVP contract with a December 1, 2014 effective date. Premium rates are guaranteed for 12 months.

For MPP contracts, MVP establishes the expected claim liability and the maximum expected claim liability for each plan offering as well as the fixed monthly retention and stop loss fees. The expected claim liability and the maximum expected claim liability reflect the total expected medical and pharmacy claim expense for their member groups (net stop loss claims) as well as any non-claim expenses associated with capitations, physician incentives, wellness rewards, etc. and the associated state and federal taxes and assessment due. These are illustrated in Exhibit A1.

The fixed retention and stop loss fees are billed to Agriservices monthly (i.e. the minimum premium). Actual claims and associated taxes and assessments are billed to the group monthly up to the aggregate maximum expected claim liability and monthly surplus and deficits are carried forward throughout the contract period. The maximum expected claim liability for Agriservices is 115% of the expected claim liability; this represents an increase over the prior approved filing which had a maximum claim liability equal to 110% of the expected claim liability. Agriservices membership has decreased recently and increasing the maximum claim liability will help offset the risk of volatility in future claims cost.

Fully insured premium equivalents are determined for each benefit plan. The fully insured premium equivalents are derived by adding the expected claim liability, retention fee, and stop loss fee along with Agriservices specific fees for each benefit plan. These are illustrated in Exhibit B. The premium rate changes by plan and division are illustrated in Exhibit B1. Based on May 2014 enrollment, the proposed December 2014 premium rates represent an aggregate increase of 16.0% and range between 0.1% and 31.8%; please see the table, "Final Proposed Increases by Product" on Exhibit B1 for the rate changes by coplan and division.

#### **Development of Expected Claims, Retention, Stop Loss Fees, and Premium Rates**

The experience period represents 12 months of incurred claims for 04/01/13 - 03/31/14 paid through 05/31/14 completed for IBNR. The gross required premium PMPM for the Agriservices block of business was derived using the 3Q/4Q 2014 Large Group filed experience rated formula and is illustrated in Exhibit A. The experience period incurred claims illustrated on line 3 under the section "claims information" have already been adjusted with IBNR.

The composite gross required premium is split into two components for MPP funding arrangements: the expected claim liability and the fixed monthly retention and stop loss fee. The expected claim liability includes the expected claim costs, Vermont premium tax, Vermont paid claims assessments, and Federal ACA fees. The retention fee covers the cost of general administration, bad debt service fee, and profit/risk charges. The total retention expense as a percent of gross premium is 11.75%. Removed from this retention fee is the credit assumed in the development of the gross required premium for Rx rebates. The amount of the credit is \$1.23 PMPM and is illustrated in Exhibit A, section III, line 18. The stop loss fee covers the expected cost of individual claims in excess of \$200,000 as these are excluded from the expected claim liability by plan and excluded from Agriservices' actual monthly claim liability. The stop loss fee is 2.7% of expected medical claims. This fee equals \$7.07 PMPM and is illustrated in Exhibit A, section III, line 19.

The proposed composite expected claim liability PMPM is converted into expected claim liabilities by contract type using the calculated Agriservices based premium conversion factors and compared to the current (December 2013) composite expected claim liabilities by contract type to derive the necessary change to the current expected claim

liability amounts. Based on the experience period enrollment, the aggregate required expected claim liability increase is 12.9 %.

Exhibit A1 illustrates the final December 2014 expected claim liability, maximum claim liability, retention, and stop loss fees. MVP is updating the relativities amongst the coplans being offered to calculate the expected claims PMPM for each benefit option. The re-sloped expected claims PMPM are revenue neutral and validate to the Expected Claim Liability PMPM shown in Section IV, Line 11 on Exhibit A; please see below for an illustrative example.

	Expected Claim Liability Gross PMPM	Single Conversion Factor	Expected Claim Liability Single Rate PMPM	Experience Period Member Months
VP019L	\$406.74	1.2407	\$504.64	2,779
VP017L	\$344.34	1.2407	\$427.22	1,526
VP020L	\$382.84	1.2407	\$474.99	2,173
VPHD-03L	\$244.72	1.2407	\$303.62	6,497
VEHD-02L	\$292.37	1.2407	\$362.74	5,099
Total	\$308.09	1.2407	\$382.25	18,074

MVP used the expected claim liabilities shown on Exhibit A1 to develop proposed premium rates for Agriservices on Exhibit B. MVP's proposed premium rate increases by coplan can be found on Exhibit B1 in the table, "MVP Proposed Increases by Product". Agriservices May 2014 enrollment has shifted towards benefit options with a larger benefit relativity correction which is driving the discrepancy between the expected claim liability increase shown on Exhibit B1 (+12.9%) and aggregate premium increase shown on Exhibit B1 (+16.0%).

To mitigate the rate increase based on MVP's proposed premium rates for Option #4, VPHD-03L, Agriservices has decided to decrease MVP's proposed premium rate for this option by 10% and increase the premium rates for Options #1-3 to come up with an aggregate increase of 16.0%. Please see the table, "Agriservices December 2014 Proposed Final Rates" on Exhibit B1 for the final proposed rates.

Agriservices has two divisions of association members: Dairymen and ASA. Prior to the 2013 rate development, the fully insured premium rates were derived separately for each group with the expected claim liability as the basis for the Dairymen premium rates and the maximum claim liability as the basis for the ASA premium rates. However, the entire population is used in developing the expected claim liability, and therefore the fully insured premium rates should be computed using the same expected claim liability for both groups. The spread between the two divisions is being removed in this filing which is driving the variation in the rate increases by division on Exhibit B1.

#### 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, or unfairly discriminatory. This rate filing conforms to the applicable Standards of Practice as promulgated by the Actuarial Standards Board.

Mitthew for hards

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

07/24/2014 Date



# **Rate Filing Adjustment**

# **MVP Health Insurance Company**

# ~ Article 42 ~

# **Agri Services**

# Rates Effective December 1, 2014 - November 30, 2015

# TABLE OF CONTENTS

PAGE

EXHIBIT	А	Large Group Experience Rating Formula	1
EXHIBIT	A1	Product Description and Rates	2
EXHIBIT	В	Derivation of Fully Insured Premium Equivalents	3
EXHIBIT	B1	Premium Rates for Member Groups of Agri Services	4

### MVP Health Care - Large Group Experience Rating Formula

I C	ase Information							
	Group Name:	Agri-Services Agency LLC	C	1	Date:		07/15/14	
	Group #:	400088	•		Effective Date	<i>.</i>	12/01/14 - 11/30/15	
	Marketing Rep:	9JEP - Jason PICKETT			Product Type		All	
	Underwriter:	Tracey Romand			r roudot rypo	Quotou.	7 (11	
				1				
II. N	Ianual Pure Premium Calculation	Medical w/ No	on-Pharmacy Ric	lers			Pharmacy	
1.	Manual Pure Premium		\$311.87				\$38.37	
2.	Industry Factor		1.100				1.100	
3.	Demographic Factor		1.216				1.216	
4.	Area Factor		1.000				n/a	Total pmpn
5.	Adjusted Manual Pure Premium		\$417.15				\$51.32	\$468.4
W F	xperience Pure Premium Calculation							
	Experience Period Start Date		04/01/13				04/01/13	
	Experience Period End Date		03/31/14				03/31/14	
	Paid Through Date		05/31/14				05/31/14	
	Midpoint of Experience Period		10/01/13				10/01/13	
			10/01/10				10/01/10	
1a.	Product Reflected in Experience							
1b.	Product in the Rate Quote (Enter Product ID)							
2a.	Member Months		18,074				18,074	
2b.	Out-of-Area Subscribers		20				n/a	
	ms Information					l		
3.	Date of Service Paid Claims (including net reinsurance and I	BNR)	\$4,235,758				\$412,409	
4.	Composite Completion Factor Adjustment		1.0000				1.0000	
5.	Incurred Claims		\$4,235,758				\$412,409	
	e Claims Pooling and Trend							
6.	Pooling Level (PL)		\$200,000				n/a	
7.	Actual Large Claims (Excess Over PL)		\$101,962				n/a	
8.	Completion Adjustment Factor		1.0000				n/a	
9.	Completion Adjusted Large Claims		\$101,962				n/a	
10.	Incurred Claims Less Large Claims		\$4,133,796				n/a	
11.	Trend Factor to Mid Point of Projection Period		1.146	8.5%			1.081	4.8%
	Trended Net Claims		\$4,735,875				\$445,611	
13.	Trended pmpm Net Claims		\$262.03				\$24.65	
Exp	erience Adjustments							
14.	Demographic Adjustment (Carrier Replacement Only)		1.000				1.000	
15.	Prior Period Adjustment, if applicable		1.000				1.000	
16.	Network Efficiency Factor		1.000				1.000	
17.	Benefit Adjustment		1.000				1.000	
18.	Pharmacy Rebate Factor		n/a				0.950	\$1.23
19.	Pooling Charge %		2.70%	\$7.07			n/a	
20.	Adjusted pmpm Net Claims		\$269.10				\$23.42	
21.	Covered Lives Assessment		\$0.06				n/a	
22.	Indigent Care		\$0.18				n/a	Total pmpn
23.	Experience Pure Premium		\$269.34				\$23.42	\$292.7
	mployer Specific Premium Rates		<u>Total</u>					
	nding the Manual Pure Premium and Experience		•					
1.	Adjusted Manual Pure Premium		\$468.48					
2.	Experience Pure Premium		\$292.76					
3.	Experience Credibility Weight		100%					
4.	Blended Pure Premium		\$292.76					
5.	Group Risk Assessment		1.000					
6.	VT Paid Claim Surcharge		0.999%					
7.	Other Charges (network access, healthy dollars etc)		\$0.04					
8.	Retention		\$41.80	11.75%				
9.	Taxes and Assessments		\$18.21					
10.	Group Required Pure Premium		\$355.73					
11.	Expected Claim Liability PMPM		\$308.09	(Required Pre	mium less Re	tention less	Pooling Charge plus R	x rebate credit)
V. M	inimum Premium Funding							
	acted Claim Liebility Development		Current Time D	line				
Exp	ected Claim Liability Development		Current Tier Rat		F			
1.	Loading Factors	<u><b>S</b></u> 1.2407	<u>D</u> 2.5435	PC n/a	<u>F</u> 2.9778			
	Loading Factors			n/a				
2.	Proposed Composite Expected Claim Liability by Tier	\$382.25	\$783.64		\$917.45			
2	Current Composite Expected Claim Liphility	\$338.69	\$694.31		\$812.85			
3.	Current Composite Expected Claim Liability	12.9%	5694.31 <b>12.9%</b>	n/a	\$812.85 <b>12.9%</b>			
1	Comparison of Final to Current	12.3%	12.3%	iva	12.3%			
	Final And Organization Marticle Data state Of 1997	Dumbata) to "						
4. 5	Fixed Agri Services Monthly Retention Charge ( Sec IV.9 -	, ,	,					
5.	Stop-Loss Charge ( Sec III 13 x 14 x 15 x 16 x 17 x 19 x loa	aung ractor)	See Exhibit A					
11								

### MVP Health Care VERMONT GROUP RATE QUOTE

#### Customer Name: Agri Services Contract Period: 12/1/2014 - 11/30/2015

#### Quote Expires: 12/01/2015

#### **Product Description and Rates:**

	Option 1			
Benefit Highlights	VP019L - Preferred PPO			
	In Network	Out of Network		
Office Visits	\$20.00	Coins/Ded		
Hospital Inpatient	Coins/Ded	Coins/Ded		
Annual Deductible	\$500/\$1,250	\$1,000/\$2,500		
Coinsurance	80%/20%	60%/40%		
Out-of-Pocket Maximum	\$1,000/\$2,500	\$3,000/\$7,500		
Lifetime Maximum	none	\$1,000,000		
Pharmacy		\$30/\$50		
Other	De	p to 26		
		Maximum Liability		
	Expected	- 115% Risk		
Rates:	Claims	Corridor		
Single	\$504.64	\$580.34		
Double	\$1,034.56	\$1,189.74		
Family	\$1,211.21	\$1,392.89		
	Retention**	Stop-loss \$200k		
Single	\$50.33	\$8.78		
Double	\$103.18	\$17.99		
Family	\$120.80	\$21.07		

Option 2				
VP017L - Preferred PPO				
In Network Out of Network				
\$20.00	Coins/Ded			
Coins/Ded	Coins/Ded			
\$2,000/\$5,000	\$4000/\$10,000			
80%/20%	60%/40%			
\$6,000/\$15,000	\$12,000/\$30,000			
none	\$1,000,000			
\$10/\$30				
Dep to 26				
	Maximum			
	Liability - 115%			
Expected Claims				
Expected Claims \$427.22	Liability - 115%			
•	Liability - 115% Risk Corridor			
\$427.22	Liability - 115% Risk Corridor \$491.31			
\$427.22 \$875.84	Liability - 115% Risk Corridor \$491.31 \$1,007.22			
\$427.22 \$875.84 \$1,025.39	Liability - 115% Risk Corridor \$491.31 \$1,007.22 \$1,179.20			
\$427.22 \$875.84 \$1,025.39 Retention**	Liability - 115% Risk Corridor \$491.31 \$1,007.22 \$1,179.20 Stop-loss \$200k			
\$427.22 \$875.84 \$1,025.39 <b>Retention**</b> \$50.33	Liability - 115% Risk Corridor \$491.31 \$1,007.22 \$1,179.20 Stop-loss \$200k \$8.78			

Option 3				
VP020L - Preferred PPO				
In Network Out of Network				
\$20.00	Coins/Ded			
Coins/Ded	Coins/Ded			
\$1,000/\$2,500	\$2,000/\$5,000			
80%/20%	60%/40%			
\$2,000/\$5,000	\$6,000/\$15,000			
none	\$1,000,000			
\$10/\$30				
Dep to				
	Maximum			
	Liability - 115%			
Expected Claims	Risk Corridor			
\$474.99	\$546.24			
\$973.77	\$1,119.83			
\$1,140.04	\$1,311.05			
Retention**	Stop-loss \$200k			
\$50.33	\$8.78			
\$103.18	\$17.99			
\$120.80	\$21.07			

	Option 4		
Benefit Highlights	VPHD-03L - Pro	eferred HD PPO *	
	In Network	Out of Network	
Office Visits	Prev Care - \$0	Coins/Ded	
Hospital Inpatient	Coins/Ded	Coins/Ded	
Annual Deductible	\$5,000/\$10,000	\$10,000/\$20,000	
Coinsurance	0%	80%/20%	
Out-of-Pocket Maximum	\$5,000/\$10,000	\$20,000/\$40,000	
Lifetime Maximum	none \$1,000,000		
Pharmacy		er Deductible - no OON	
Other	De	p to 26	
	Maximum Liabili		
	Expected	- 115% Risk	
Rates:	Claims	Corridor	
Single	\$303.62	\$349.17	
Double	\$622.45	\$715.82	
Family	\$728.74	\$838.05	
	Retention**	Stop-loss \$200k	
Single	\$50.33	\$8.78	
Double	\$103.18	\$17.99	
Family	\$120.80	\$21.07	

Option 5		
VEHD-02L - Prefe	rred HD EPO *	
In Network	Out of Network	
Prev Care - \$0	N/A	
Coins/Ded	N/A	
\$2,500/\$5,000	N/A	
0%	N/A	
\$3,500/\$7,000	N/A	
none	N/A	
\$10/\$30/\$50 Dep to 26		
Expected Claims	Maximum Liability - 115% Risk Corridor	
\$362.74	\$417.16	
\$743.65	\$855.20	
\$870.63	\$1,001.23	
Retention**	Stop-loss \$200k	
\$50.33	\$8.78	
\$103.18	\$17.99	
\$120.80	\$21.07	

#### Exhibit B - Derivation of Fully Insured Premium Equivalents

]	Calculated	d rates by prod	uct for 12/1/14	-11/30/15 effec	ctive dates
	VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L
Single Rates	Option 1	Option 2	Option 3	Option 4	Option 5
Expected Claims (exhibit A)	\$504.64	\$427.22	\$474.99	\$303.62	\$362.74
Retention (exhibit A)	\$50.33	\$50.33	\$50.33	\$50.33	\$50.33
Stop Loss (exhibit A)	\$8.78	\$8.78	\$8.78	\$8.78	\$8.78
Agri Services Accident coverage (per contract)	\$3.00	\$3.00	\$3.00	\$3.00	\$3.00
Agri Services Broker load (3%)	\$17.00	\$14.68	\$16.11	\$10.97	\$12.75
Agri Services Administrative Load (8%)	<u>\$45.34</u>	<u>\$39.15</u>	<u>\$42.97</u>	<u>\$29.26</u>	<u>\$33.99</u>
Total Single Rate	\$629.09	\$543.16	\$596.18	\$405.96	\$471.58
	VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L
Double Rates	Option 1	Option 2	Option 3	Option 4	Option 5
Expected Claims (exhibit A)	\$1,034.56	\$875.84	\$973.77	\$622.45	\$743.65
Retention (exhibit A)	\$103.18	\$103.18	\$103.18	\$103.18	\$103.18
Stop Loss (exhibit A)	\$17.99	\$17.99	\$17.99	\$17.99	\$17.99
Agri Services Accident coverage (per contract)	\$3.00	\$3.00	\$3.00	\$3.00	\$3.00
Agri Services Broker load (3%)	\$34.76	\$30.00	\$32.94	\$22.40	\$26.03
Agri Services Administrative Load (8%)	<u>\$92.70</u>	<u>\$80.00</u>	<u>\$87.84</u>	<u>\$59.73</u>	<u>\$69.43</u>
Total Double Rate	\$1,286.19	\$1,110.02	\$1,218.72	\$828.76	\$963.29
	VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L
Family Rates	Option 1	Option 2	Option 3	Option 4	Option 5
Expected Claims (exhibit A)	\$1,211.21	\$1,025.39	\$1,140.04	\$728.74	\$870.63
Retention (exhibit A)	\$120.80	\$120.80	\$120.80	\$120.80	\$120.80
Stop Loss (exhibit A)	\$21.07	\$21.07	\$21.07	\$21.07	\$21.07
Agri Services Accident coverage (per contract)	\$3.00	\$3.00	\$3.00	\$3.00	\$3.00
Agri Services Broker load (3%)	\$40.68	\$35.11	\$38.55	\$26.21	\$30.46
Agri Services Administrative Load (8%)	<u>\$108.49</u>	<u>\$93.62</u>	<u>\$102.79</u>	<u>\$69.89</u>	<u>\$81.24</u>
Total Family Rate	\$1,505.24	\$1,298.99	\$1,426.25	\$969.70	\$1,127.20

#### Exhibit B1

#### MVP Health Care Premium Rates for Member Groups of Agriservices Rates effective 12/1/13-11/30/14

	s Fully Insured Premi	Option 1	Option 2	Option 3	Option 4	Option 5
Association Marshara	Detec		•	•		•
Association Members	Rates	VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L
Dairymens	Single	\$628.16	\$492.84	\$585.25	\$277.23	\$371.83
Dairymens	Double	\$1,284.19	\$1,007.56	\$1,196.48	\$566.75	\$760.17
Dairymens	Family	\$1,501.63	\$1,178.16	\$1,399.07	\$662.72	\$888.88
ASA	Single	\$683.43	\$536.22	\$636.76	\$301.62	\$404.56
ASA	Double	\$1,392.94	\$1,092.89	\$1,297.80	\$614.75	\$824.54
ASA	Family	\$1,629.44	\$1,278.44	\$1,518.15	\$719.12	\$964.54
		Total Mont	hly Revenue Expec	ted based on 5/14 c	ontract counts	\$460,813
roposed Premium Rates usi	ng Plan Specific Expec	ted Claim Liabilit Option 1	ies Option 2	Option 3	Option 4	Option 5
Association Members	Rates	<u>VP019L</u>	VP017L	VP020L	VPHD-03L	VEHD-02L
Dairymens	Single	\$629.09	\$543.16	\$596.18	\$405.96	\$471.58
,	Ũ				+	
Dairymens	Double	\$1,286.19	\$1,110.02	\$1,218.72	\$828.76	\$963.29
Dairymens	Family	\$1,505.24	\$1,298.99	\$1,426.25	\$969.70	\$1,127.20
ASA	Single	\$629.09	\$543.16	\$596.18	\$405.96	\$471.58
ASA	Double	\$1,286.19 \$1,505,24	\$1,110.02	\$1,218.72 \$1,426.25	\$828.76 \$960.70	\$963.29
ASA	Family	\$1,505.24	\$1,298.99	\$1,426.25	\$969.70	\$1,127.20
		Total Mont	hly Revenue Expec	ted based on 5/14 c	ontract counts	\$534,421
IVP Proposed Increases by F		<b>0</b> · · · ·	10		10	
Dairymens	Single	0.1%	10.2%	1.9%	46.4%	26.8%
Dairymens	Double	0.2%	10.2%	1.9%	46.2%	26.7%
Dairymens	Family	0.2%	10.3%	1.9%	46.3%	26.8%
ASA	Single	-8.0%	1.3%	-6.4%	34.6%	16.6%
ASA	Double	-7.7%	1.6%	-6.1%	34.8%	16.8%
ASA	Family	-7.6%	1.6%	-6.1%	34.8%	16.9%
	Average By Plan	-2.3%	7.3%	-3.3%	39.7%	19.2%
Composite Requ	ired Revenue Change	16.0%				
Agriservices December 2014	Proposed Final Rates					
-		Option 1	Option 2	Option 3	Option 4	Option 5
Association Members	Rates	VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L
Dairymens	Single	\$684.00	\$590.57	\$648.22	\$365.36	\$471.58
Dairymens	Double	\$1,398.46	\$1,206.91	\$1,325.09	\$745.88	\$963.29
Dairymens	Family	\$1,636.63	\$1,412.37	\$1,550.74	\$872.73	\$1,127.20
ASA	Single	\$684.00	\$590.57	\$648.22	\$365.36	\$471.58
ASA	Double	\$1,398.46	\$1,206.91	\$1,325.09	\$745.88	\$963.29
ASA	Family	\$1,636.63	\$1,412.37	\$1,550.74	\$872.73	\$1,127.20
		Total Mont	hlv Revenue Expec	ted based on 5/14 c	ontract counts	\$534,421
			,			16.0%
inal Proposed Increases by I	Product					
Dairymens	Single	8.9%	19.8%	10.8%	31.8%	26.8%
Dairymens	Double	8.9%	19.8%	10.7%	31.6%	26.7%
Dairymens	Family	9.0%	19.9%	10.8%	31.7%	26.8%
ASA	Single	0.1%	10.1%	1.8%	21.1%	16.6%
ASA	Double	0.4%	10.4%	2.1%	21.3%	16.8%
ASA	Family	0.4%	10.5%	2.1%	21.4%	16.9%
	Average By Plan	6.2%	16.7%	5.2%	25.8%	19.2%
Composite Pog	lired Revenue Change		10.170	0.270	20.070	10.270
Composite Requ	med Revenue Change	10.0 /0				
Contract Counts as of 5/14		P2000ACO VP019L	P2000ACQ VP017L	P2000ACP VP020L	P000414 VPHD-03L	E001847 VEHD-02L

Contract Counts as of 5/14		VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L
Dairymens	Single	57	28	16	70	43
-	Double	6	3	5	22	5
	Family	15	9	4	37	9
ASA	Single	26	5	27	113	116
	Double	3	8	7	26	24
	Family	6	7	9	30	33
Total Dairymens		78	40	25	129	57
Total ASA		35	20	43	169	173
Grand Total		113	60	68	298	230



### Consumer Disclosure about Proposed Health Insurance Rate Increase December 2014 Agriservices Rate Filing

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. This rate filing seeks approval of Agriservice's minimum premium rates for effective dates of coverage beginning between December 1, 2014 and November 30, 2015.

The premium rates filed for approval 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 average increase of 16.0% over the prior rates with increases ranging from 0.1% to 31.8%. 1,371 members will be impacted by this rate filing.

The proposed premium rates for this filing are subject to a public comment period which begins on the day the GMCB posts this filing to its website and concludes after 15 days.

Signature: Date: 7/25/14
Print Name: Karla Austen Title: Executive Vice President & Interim CFO
Vermont.
the filing complies with all applicable statutory and regulatory provisions for the state of
I hereby certify that I have reviewed the applicable filing requirements for this filing and
Certification of Compliance

SERFF Tracking #: MVPH-129148249 State Tracking #: 67485

Company Tracking #:

State:	Vermont	Filing Company:	MVP Health Insurance Company
TOI/Sub-TOI:	H16G Group Health - Major Medical/H16G.002A	Large Group Only - PPO	
Product Name:	Agriservices December 2013 Filing		
Project Name/Number	. /		

## Filing at a Glance

Company:	MVP Health Insurance Company
Product Name:	Agriservices December 2013 Filing
State:	Vermont
TOI:	H16G Group Health - Major Medical
Sub-TOI:	H16G.002A Large Group Only - PPO
Filing Type:	Rate
Date Submitted:	08/06/2013
SERFF Tr Num:	MVPH-129148249
SERFF Status:	Closed-Approved
State Tr Num:	67485
State Status:	Approved
Co Tr Num:	
Co Status:	
Implementation	12/01/2013
Date Requested:	
Author(s):	Kristen Marsh, Matt Lombardo, Evan Steinhart
Reviewer(s):	Phil Keller (primary)
Disposition Date:	12/12/2013
Disposition Status:	Approved
Implementation Date:	01/01/2014

SERFF Tracking #	: MVPH-129148249	State Tracking #: 67485
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Company Tracking #:

State:	Vermont	Filing Company:	MVP Health Insurance Company
TOI/Sub-TOI:	H16G Group Health - Major Medical/H16G.002A L		
Product Name:	Agriservices December 2013 Filing		
Project Name/Number:	/		

## **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: Large
Group Market Type: Association	Overall Rate Impact: 5.1%
Filing Status Changed: 12/12/2013	Company Status Changed:
State Status Changed: 12/12/2013	Deemer Date:
Created By: Matt Lombardo	Submitted By: Matt Lombardo
Corresponding Filing Tracking Number:	
PPACA: Not PPACA-Related	

Include Exchange Intentions:

No

#### Filing Description:

The premium rates proposed in this filing are for members of the Agriservices Association with effective dates of coverage beginning between 12/1/2013 and 11/30/2014. Agriservices has a minimum premium contract.

## **Company and Contact**

#### Filing Contact Information

Filing Company Information	0-0-le: 11105	Otata of Demisilar New Varia
625 State Street Schenectady, NY 12305	518-388-2483 [Phone]	
Matt Lombardo,	mlombardo@mvphealthcare.com	

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**

MVP Health Insurance (	Company	\$50.00	08/06/2013	72666257
Company		Amount	Date Processed	Transaction #
Per Company:	Yes			
Fee Explanation:				
Retaliatory?	No			
Fee Amount:	\$50.00			
Fee Required?	Yes			
•				

SERFF Tracking #:	MVPH-129148249	State Tracking #:	67485		Company Tracking #:	
State:	Vermont			Filing Company:	MVP Health Insurance Company	
TOI/Sub-TOI:	H16G Group Hea	lth - Major Medical/H16G.(	02A Large Group	Only - PPO		
Product Name:	Agriservices Dece	ember 2013 Filing				
Project Name/Number:	/					

## **Correspondence Summary**

## Dispositions

Status	Created By	Created On	Date Submitted
Approved	Phil Keller	12/12/2013	12/12/2013

#### Amendments

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Supporting Document	Health Filing Data	Matt Lombardo	11/06/2013	11/06/2013

SERFF Tracking #:	MVPH-1291482	49 State 7	Tracking #: 67485	5	Company Tracki	ng #:		
State: TOI/Sub-TOI: Product Name: Project Name/Number:		up Health - Major M es December 2013 I	edical/H16G.002A Larg Filing	Filing Compar ge Group Only - PPO	ny: MVP Hea	alth Insurance Company	V	
Disposition								
Disposition Date: 12/1	12/2013							
Implementation Date: Status: Approved	01/01/2014							
HHS Status: HHS App State Review: Review	•	1						
Comment:								
Company	Company Rate	Overall % Indicated	Overall % Rate	Written Premium	Number of Policy Holders Affected		Maximum % Change	Minimum % Change
Name:	Change:	Change:	Impact:	Change for this Program:	for this Program:	this Program:	(where req'd)	: (where req'd)
MVP Health Insurance Company	Increase	3.600%	3.600%	\$194,506	2	\$5,402,942	3.600%	3.600%
Percent Change Ap	proved:							
Minimum:					3.600%			
Maximum:					3.600%			
Weighted Average:					3.600%			
Schedule		Ş	Schedule Item		Sche	dule Item Status	Public	Access
Supporting Docum	ent	ŀ	Actuarial Memoran	dum			Yes	
Supporting Docum	ent	F	Filing Compliance C	Certification			Yes	
Supporting Docum	ent	H	Health Administrativ	ve Forms			Yes	
Supporting Docum	ent (revised)	ŀ	Health Filing Data				Yes	
Supporting Dooum	ont	L	Jaalth Filing Data				Vaa	

Supporting Document	Health Administrative Forms	Yes
Supporting Document (revised)	Health Filing Data	Yes
Supporting Document	Health Filing Data	Yes
Supporting Document	Third Party Filing Authorization	Yes
Supporting Document	Consumer Disclosure Form	Yes
Supporting Document	Unified Rate Review Template	Yes

SERFF Tracking #:	MVPH-129148249	State Tracking #:	67485		Company Tracking #:	
State:	Vermont			Filing Company:	MVP Health Insurance Company	
TOI/Sub-TOI:	H16G Group Heal	lth - Major Medical/H16G.0	002A Large Grou	o Only - PPO		
Product Name:	Agriservices Dece	ember 2013 Filing				
Project Name/Number:	/					

### **Amendment Letter**

Submitted Date: 11/06/2013

Comments:

The rate filing attached below reflects the GMCB's Decision and Order rendered on 11/5/13. The medical trend used to develop premium rates has been modified to 5.5% and the Rx trend has been modified to 4.2%.

Regards,

Matt Lombardo

Changed Items:

No Form Schedule Items Changed.

No Rate Schedule Items Changed.

Supporting Document Schedule	e Item Changes
Satisfied - Item:	Health Filing Data
Comments:	The rate filing attached below reflects the GMCB's Decision and Order rendered on 11/5/13. The medical trend used to develop premium rates has been modified to 5.5% and the Rx trend has been modified to 4.2%. Regards, Matt Lombardo
Attachment(s):	Agri Services 2014 Filing v2 DFR recommendation.pdf
Previous Version	
Satisfied - Item:	Health Filing Data
Comments:	
Attachment(s):	Agri Services 2014 Filing v1.pdf

SERFF Tracking #: MVPH-129148249 State Tracking #: 67485

Company Tracking #:

State:	Vermont	Filing Company:	MVP Health Insurance Company
TOI/Sub-TOI:	H16G Group Health - Major Medical/H16G.002A	Large Group Only - PPO	
Product Name:	Agriservices December 2013 Filing		
Project Name/Number	. /		

## Post Submission Update Request Processed On 12/12/2013

Status:	Allowed
Created By:	Matt Lombardo
Processed By:	Phil Keller
Comments:	

Company Rate Information:

## Company Name: MVP Health Insurance Company

<b>Requested Change</b> 3.600% 3.600% \$194506	<b>Prior Value</b> 5.100% 5.100%
3.600%	5.100%
\$194506	<b>*</b>
φ101000	\$275550
3.600%	5.100%
3.600%	5.100%
REMOVED	
	Agriservices PPO
	1
	3.600%

Product:	NEW	
Product Name	Agriservices PPO	
Number of Covered Lives	0	

#### REQUESTED RATE CHANGE INFORMATION:

Min:	3.600	5.100
Max:	3.600	5.1
Weighted Avg.:	3.600	5.1
REQUESTED RATE:		
Min:	227.870	231.050
Max:	561.760	561.620
Weighted Avg.:	307.570	312.020

SERFF Tracking #:	MVPH-1291482	249 <b>State</b>	Tracking #:	67485		Com	pany Trackii	ng #:			
State: TOI/Sub-TOI: Product Name: Project Name/Number:		up Health - Major I es December 2013		)2A Large Gi	Filing Compa roup Only - PPO	ny:	MVP Hea	lth Insurar	ce Compan	y	
Rate Informati	on										
Rate data applies	to filing.										
Filing Method:					SERFF						
Rate Change Type	:				Increase						
<b>Overall Percentage</b>	e of Last Rate	e Revision:			4.000%						
Effective Date of La	ast Rate Rev	ision:			01/01/2013						
Filing Method of La	ast Filing:				SERFF						
				Com	oany Rate Infor	mation					
	Company	Overall %	Overa	II %	Written	Number	of Policy	Writte	า	Maximum %	Minimum %
Company	Rate	Indicated	Rate		Premium	Holders	Affected	Premiu	um for	Change	Change
Name:	Change:	Change:	Impac	t:	Change for	for this I	Program:	this Pr	ogram:	(where req'd)	: (where req'd)
					this Program:						
MVP Health Insurance Company	Increase	3.600%	3.600%	6	\$194,506	2		\$5,402	942	3.600%	3.600%
Produc	ct Type:	НМО	PPO	EPO	POS	HSA	HDH	P	FFS	Other	
Cover	ed Lives:		577				961				
Policy	Holders:		1				1				

SERFF Tracking #: MVPH-129148249 State Tracking #: 67485

Company Tracking #:

State:	Vermont	Filing Company:	MVP Health Insurance Company
TOI/Sub-TOI:	H16G Group Health - Major Medical/H16G.002A	Large Group Only - PPO	
Product Name:	Agriservices December 2013 Filing		
Project Name/Number:	/		

## **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
Agriservices PPO			0

Trend Factors:

FORMS:	
New Policy Forms:	
Affected Forms:	
Other Affected Forms:	VECOC, VECOC-HDHP

#### **REQUESTED RATE CHANGE INFORMATION:**

Change Period:	Annual
Member Months:	18,199
Benefit Change:	Increase
Percent Change Requested:	Min: 3.6 Max: 3.6 Avg: 3.6

#### **PRIOR RATE:**

Total Earned Premium:	5,402,942.00
Total Incurred Claims:	4,358,077.00
Annual \$:	Min: 219.93 Max: 542.19 Avg: 296.88

#### **REQUESTED RATE:**

Projected Earned Premium:	5,678,493.00
Projected Incurred Claims:	4,763,265.00
Annual \$:	Min: 227.87 Max: 561.76 Avg: 307.57

SERFF Tracking #:	MVPH-129148249	State Tracking #:	67485	(	Company Tracking #:	
State:	Vermont			Filing Company:	MVP Health Insurance Company	
TOI/Sub-TOI:	H16G Group Heal	th - Major Medical/H16G.0	02A Large Grou	p Only - PPO		
Product Name:	Agriservices Dece	mber 2013 Filing				
Project Name/Number:	/					

## Supporting Document Schedules

Satisfied - Item:	Actuarial Memorandum
Comments:	
Attachment(s):	Act Memo Agriservices 2014 v1.pdf
Item Status:	
Status Date:	
Satisfied - Item:	Filing Compliance Certification
Comments:	
Attachment(s):	Certification of Compliance - MAF.pdf
Item Status:	
Status Date:	
Satisfied - Item:	Health Administrative Forms
Comments:	
Attachment(s):	Health Filing Form F106.pdf
Item Status:	
Status Date:	
Satisfied - Item:	Health Filing Data
Comments:	The rate filing attached below reflects the GMCB's Decision and Order rendered on 11/5/13. The medical trend used to develop premium rates has been modified to 5.5% and the Rx trend has been modified to 4.2%. Regards, Matt Lombardo
Attachment(s):	Agri Services 2014 Filing v2 DFR recommendation.pdf
Item Status:	
Status Date:	
Bypassed - Item:	Third Party Filing Authorization
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	
Satisfied - Item:	Consumer Disclosure Form
Comments:	

SERFF Tracking #:	MVPH-129148249 State Tracking #:		67485		Company Tracking #:	
State:	Vermont			Filing Company:	MVP Health Insurance Company	
TOI/Sub-TOI:	H16G Group Heal	th - Major Medical/H16G.0	02A Large Grou	p Only - PPO		
Product Name:	Agriservices Dece	mber 2013 Filing				
Project Name/Number:	/					
Attachment(s):	Co	nsumer Disclosure F	orm about Ra	ate Increases - Agriservice	s.pdf	
Item Status:						
Status Date:						
Bypassed - Item:	Un	ified Rate Review Te	mplate			
Bypass Reason:	La	rge Group Filing - N//	4			
Attachment(s):						
Item Status:						
Status Date:						

#### ACTUARIAL MEMORANDUM Agri Services Association Premium Rate Filing Effective date 12/1/13-11/30/14

Agri Services Association is an association for farmers. Agri Services utilizes MVP's large group Minimum Premium Plan funding arrangement to offer 5 health plan offerings to their member groups. The MPP funding arrangement includes individual stop-loss coverage at a pooling level of \$200,000. Agri Service is renewing their MVP contract with a December 1, 2013 effective date. Premium rates are guaranteed for 12 months.

For MPP contracts, MVP establishes the expected claim liability and the maximum expected claim liability for each plan offering as well as the fixed monthly retention and stop loss fees. The expected claim liability and the maximum expected claim liability reflect the total expected medical and pharmacy claim expense for their member groups (net stop loss claims) as well as any non claim expenses associated with capitations, physician incentives, wellness rewards, etc. and the associated state and federal taxes and assessment due. These are illustrated in Exhibit A.

The fixed retention and stop loss fees are billed to Agri Services monthly (i.e. the minimum premium). Actual claims and associated taxes and assessments are billed to the group monthly up to the aggregate maximum expected claim liability and monthly surplus and deficits are carried forward throughout the contract period. The maximum expected claim liability for Agri Services, based on their size, is 110% of the expected claim liability.

Fully insured premium equivalents are determined for each benefit plan. The fully insured premium equivalents are derived by adding the expected claim liability, retention fee and stop loss fee along with Agri Services specific fees for each benefit plan. These are illustrated in Exhibit B. These proposed fully insured premiums are compared to the current (2013) premiums to determine the required increase by plan. Per the request of Agri Services, the composite premium rate increase across all plans is applied to the current rates to derive the final 2014 premium rates filed for approval. These are illustrated in Exhibit B1. The final 2014 premium rates filed for approval result in a 5.1% increase from the current premium rates on file.

#### **Development of Expected Claims, Retention and Stop Loss fees**

The experience period represents 12 months of incurred claims for 05/01/12 - 04/30/13 paid through 06/30/12 completed for IBNR. The gross required PMPM premium for the Agri Services block of business was derived using the 3Q/4Q 2013 Large Group filed experience rated formula and is illustrated in Exhibit A1. The experience period incurred claims illustrated on line 3 under the section "claims information" have already been adjusted with IBNR and for to account for the new benefit mandates implemented and not fully reflected in their claim history (i.e. Autism and Rx OOPmax).

The composite gross required premium is split into two components for Minimum Premium Plan funding arrangements: the expected claim liability and the fixed monthly retention and stop loss fee. The expected claim liability includes the expected claim costs as well as the computed Vermont premium taxes and paid claim assessments as well as the new Federal ACA fees. The retention fee covers the cost of general administration, bad debt service fee and profit/risk charges. The total retention expense as a percent of premium is 12.75%. Netted from this retention fee is the credit assumed in the development of the gross required premium for Rx rebates. The amount of the credit is \$1.13 PMPM and is illustrated in Exhibit A1, section III, line 18. The stop loss fee covers the expected cost of individual claims in excess of \$200,000 as these are excluded from the expected claim liability by plan and excluded from Agri Services's actual monthly claim liability. The stop loss fee is 2.7% of expected medical claims. This fee is \$6.42 PMPM and is illustrated in Exhibit A1, section III, line 19.

The proposed composite expected claim liability PMPM is converted into expected claim liabilities by contract type using the calculated Agri Services based premium conversion factors and compared to the current (2013) composite

expected claim liabilities by contract type to derive the necessary change to the 2013 expected claim liability amounts. For this renewal this change is a decrease of 8.1% and is illustrated at the bottom of Exhibit A1.

Exhibit A illustrates the final 2014 expected claim liability, maximum claim liability, retention and stop loss fees.

#### **Development of Final Fully Insured Premium Rates by Division and Product**

Agri Services has two divisions of association members: Dairymen and ASA. Prior to the 2013 rate development, the fully insured premium rates were derived separately for each group with the expected claim liability as the basis for the Dairymen premium rates and the maximum claim liability as the basis for the ASA premium rates. However, the entire population is used in developing the expected claim liability and therefore the fully insured premium rates should be computed using the same expected claim liability for both groups. MVP rectified this in the 2013 rate development however, Agri services directed MVP to maintain the current spread between the two division's premium rates for the 2013 rates and to continue to do so this renewal.

In addition, there is a disconnect between the expected claim liabilities by product and the fully insured premium rates by product due to Agri services desire not to reflect MVP's prior changes in benefit relativities in the rates they charge their member groups. The result of this is that the premium rates for the Integrated High Deductible products are lower than what is reflected in the expected claim liabilities and vice verse for the non High Deductible products..

#### **Actuarial Certification**

I, Kathleen Fish, 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, or unfairly discriminatory. This rate filing conforms to the applicable Standards of Practice as promulgated by the Actuarial Standards Board.

Kalkleen Sol

Kathleen Fish, FSA, MAAA Director of Actuarial Services MVP Health Insurance Company <u>7/25/13</u> Date

## 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: Mark A. Fish

Title: Executive Vice President & CFO

Signature: Mark A. Fish

Date: 08/01/2013

#### Health Filing Form F106 (03/08) Required Information for all filings & the Fee

NAIC#:11125		
Company Name: MVP Healt	h Insurance Company	
Address:625 State Stre		
City, State, Zip: Schenectad	y, NY 12308	
	Contact Person: <u>Matt Le</u>	ombardo
Filing Contents:		
1) New _ <u>X</u> _ Change If Change: Latest Approval	Date: <u>1/16/2013</u> Vermon	t Filing Number (VFN) <u>61833</u>
2) <u>X</u> Rates: Forms:		
3) Policy Con Handbook Ride		Endorsement Other
4) Individual Sma	Ill Groups <u>X</u> Large Group	(51+) All Groups
Type of Filing:		
Accident Only	Dental	Miscellaneous
AD&D	Disability	Nursing Home Only
Advertising	Home Health Only	Organ Transplant
Blanket	Hospital Indemnity	Prescription Drug
Cancer Expense	Hospital Indemnity Limited Benefit	Student/Athlete
Comprehensive	Long Term Care:	Stop Loss/Excess Risk
Major Medical	Qualified	Travel
Conversion	Non-Qualified	Vision
Critical Illness	<u> </u>	<u>X</u> Other: Agri-Services Minimum Premium

#### **Mandatory – Filing Fee Information:**

- 1. State of Domicile: \_\_New York\_\_
- 2. Amount of Fee: <u>\$50.00</u>
- 3. Is the Fee you are sending based on your state of domicile's retaliatory fee? <u>Yes</u> X No
- 4. Explain how each part of the Fee was determined, showing all calculation (use separate sheet if necessary).

\_\_\_filing Fee in accordance with 8 VSA 4062a\_\_\_\_\_

5. Fee calculated by: <u>Matt Lombardo</u>

(Print Name)

Matt Lockb

(Signature)



# **Rate Filing Adjustment**

# **MVP Health Insurance Company**

# ~ Article 42 ~

# **Agri Services**

# Rates Effective December 1, 2013 - November 30, 2014

# TABLE OF CONTENTS

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EXHIBIT	А	Product Description and Rates	1
EXHIBIT	A1	Large Group Experience Rating Formula	2
EXHIBIT	В	Derivation of Fully Insured Premium Equivalents	3
EXHIBIT	B1	Premium Rates for Member Groups of Agri Services	4

### MVP Health Care VERMONT GROUP RATE QUOTE

### Customer Name: Agri Services

Contract Period: 12/1/2013 - 11/30/2014

### Quote Expires: 12/01/2014

### **Product Description and Rates:**

	Ор	tion 1		
Benefit Highlights	VP019L - F	Preferred PPO		
	In Network	Out of Network		
Office Visits	\$20.00	Coins/Ded		
Hospital Inpatient	Coins/Ded	Coins/Ded		
Annual Deductible	\$500/\$1,250	\$1,000/\$2,500		
Coinsurance	80%/20%	60%/40%		
Out-of-Pocket Maximum	\$1,000/\$2,500	\$3,000/\$7,500		
Lifetime Maximum	none	\$1,000,000		
Pharmacy	\$10/\$30/\$50			
Other	De	p to 26		
		Maximum Liability		
	Expected	- 110% Risk		
Rates:	Claims	Corridor		
Single	\$502.76	\$553.04		
Double	\$1,030.63	\$1,133.69		
Family	\$1,206.59	\$1,327.25		
	Retention**	Stop-loss \$200k		
Single	\$49.05	\$7.70		
Double	\$100.56	\$15.79		
Family	\$117.72	\$18.49		

Option 2						
VP017L - Preferred PPO						
In Network	Out of Network					
\$20.00	Coins/Ded					
Coins/Ded	Coins/Ded					
\$2,000/\$5,000	\$4000/\$10,000					
80%/20%	60%/40%					
\$6,000/\$15,000	\$12,000/\$30,000					
none	\$1,000,000					
\$10/\$30						
Dep to						
	Maximum					
	Liability - 110%					
Expected Claims	Risk Corridor					
\$382.17	\$420.39					
\$783.47	\$861.82					
\$917.25	\$1,008.98					
Retention**	Stop-loss \$200k					
\$49.05	\$7.70					
\$100.56	\$15.79					
\$117.72	\$18.49					

Option 3					
VP020L - Preferred PPO					
In Network	Out of Network				
\$20.00	Coins/Ded				
Coins/Ded	Coins/Ded				
\$1,000/\$2,500	\$2,000/\$5,000				
80%/20%	60%/40%				
\$2,000/\$5,000	\$6,000/\$15,000				
none	\$1,000,000				
\$10/\$30					
Dep to					
	Maximum				
	Liability - 110%				
Expected Claims	Risk Corridor				
\$464.74	\$511.21				
\$952.72	\$1,047.99				
\$1,115.40	\$1,226.94				
Retention**	Stop-loss \$200k				
\$49.05	\$7.70				
\$100.56	\$15.79				
\$117.72	\$18.49				

	Op	otion 4			
Benefit Highlights	VPHD-03L - Pr	eferred HD PPO *			
	In Network	Out of Network			
Office Visits	Prev Care - \$0	Coins/Ded			
Hospital Inpatient	Coins/Ded	Coins/Ded			
Annual Deductible	\$5,000/\$10,000	\$10,000/\$20,000			
Coinsurance	0%	80%/20%			
Out-of-Pocket Maximum	\$5,000/\$10,000	\$20,000/\$40,000			
Lifetime Maximum	none	\$1,000,000			
Pharmacy		Covered in Full after Deductible - no OON			
Other	De	Dep to 26			
		Maximum Liability			
	Expected	- 110% Risk			
Rates:	Claims	Corridor			
Single	\$219.45	\$241.40			
Double	\$449.89	\$494.88			
Family	\$526.71	\$579.38			
	Retention**	Stop-loss \$200k			
Single	<b>Retention**</b> \$49.05	\$7.70			
Single Double					

Option 5					
VEHD-02L - Preferred HD EPO *					
In Network	Out of Network				
Prev Care - \$0	N/A				
Coins/Ded	N/A				
\$2,500/\$5,000	N/A				
0%	N/A				
\$3,500/\$7,000	N/A				
none	N/A				
\$10/\$30/\$50 Dep to 26					
Expected Claims	Maximum Liability - 110% Risk Corridor				
Expected Claims \$295.69	Liability - 110%				
•	Liability - 110% Risk Corridor				
\$295.69	Liability - 110% Risk Corridor \$325.26				
\$295.69 \$606.15	Liability - 110% Risk Corridor \$325.26 \$666.77				
\$295.69 \$606.15 \$709.63	Liability - 110% Risk Corridor \$325.26 \$666.77 \$780.59				
\$295.69 \$606.15 \$709.63 Retention**	Liability - 110% Risk Corridor \$325.26 \$666.77 \$780.59 Stop-loss \$200k				

## MVP Health Care - Large Group Experience Rating Formula

1 0	Case Information				
·. 、				07/00/00	
	Group Name:	Agri-Services Agency LLC	Date:	07/30/88	
1	Group #:	400088	Effective Da		0/14
	Marketing Rep:	9JEP - Jason PICKETT	Product Typ	pe Quoted: HDEPO	
	Underwriter:	Tracey Romand			
Ш.	Manual Pure Premium Calculation	Medical w/ Non-Pharmacy Ri	ders	Pharmacy	
1.	Manual Pure Premium	\$312.07		\$40.56	
2					
Ζ.	Industry Factor	1.19		1.19	
2. 3. 4.	Demographic Factor	1.114		1.114	
4.	Area Factor	1.000		n/a	Total pmpm
5.	Adjusted Manual Pure Premium	\$414.83		\$53.79	\$468.62
III.	Experience Pure Premium Calculation				
	Experience Period Start Date	05/01/12		05/01/12	
	Experience Period End Date	04/30/13		04/30/13	
	•	06/30/13		06/30/13	
	Paid Through Date				
	Midpoint of Experience Period	11/01/12		11/01/12	
L					
1a.	Product Reflected in Experience				
1b.					
2a.	Member Months	18,199		18,199	
2b.	Out-of-Area Subscribers	28		n/a	
	ims Information				
3.	Date of Service Paid Claims (including net reinsurance)	\$3,975,434		\$382,643	
۲ <u>۵</u> .		1.0000		1.0000	
4. 5.	Composite Completion Factor Adjustment				
э. •	Incurred Claims	\$3,975,434		\$382,643	
La	rge Claims Pooling and Trend				
6. 7.	Pooling Level (PL)	\$200,000		n/a	
	Actual Large Claims (Excess Over PL)	\$38,427		n/a	
8.	Completion Adjustment Factor	1.0000		n/a	
8. 9.	Completion Adjusted Large Claims	\$38,427		n/a	
10.	Incurred Claims Less Large Claims	\$3,937,007		n/a	
11.	•	1.089	(5.5% Annual Trend)	1.067	(4.2% Annual Trend)
	,		(5.5% Annual Trend)		(4.2% Annual Tienu)
	Trended Net Claims	\$4,288,217		\$408,399	
13.	Trended pmpm Net Claims	\$235.63		\$22.44	
	perience Adjustments				
14.	Demographic Adjustment (Carrier Replacement Only)	1.000		1.000	
15.	Prior Period Adjustment, if applicable	1.000		1.000	
	Network Efficiency Factor	1.000		1.000	
	Benefit Adjustment	1.000		1.000	(already in line 3)
18.		n/a		0.950	\$1.12
			<b>*</b> 0.00		φ1.12
	Pooling Charge %	2.69%	\$6.33	n/a	
20.		\$241.96		\$21.32	
21.		\$0.04		n/a	
22.	Indigent Care	\$0.10		n/a	Total pmpm
23.	Experience Pure Premium	\$242.10		\$21.32	\$263.42
L					
IV.	Employer Specific Premium Rates	Total			
	ending the Manual Pure Premium and Experience	<u> </u>			
1.	Adjusted Manual Pure Premium	\$468.62			
	•	\$400.02 \$263.42			
2.	Experience Pure Premium				
3. 4. 5. 6. 7. 8. 9.	Experience Credibility Weight	100%			
4.	Blended Pure Premium	\$263.42			
5.	Group Risk Assessment	1.000			
6.	VT Paid Claim Surcharge	0.999%			
7.	Other Charges (network access, healthy dollars etc)	\$0.06			
8.	Retention	\$41.44			
9	Taxes and Assessments	\$17.45			
5. 10.		\$325.04			
10.	Expected Claim Liability PMPM	\$323.04	(Required Premium loss	Retention less Pooling Charge pl	is Ry rebate credit)
		φ <b>2</b> 76.39	(Nequired Fremium less r	Retention less Pooling Charge plu	us in iebale cieully
ا v. ا	Minimum Premium Funding				
1_					
Ex	pected Claim Liability Development	Current Tier Ra			
1		<u>s</u> <u>D</u>	<u>PC F</u>		
1.	Loading Factors	1.2166 2.4940	n/a 2.9198		
2.	Proposed Composite Expected Claim Liability by Tier	\$338.69 \$694.31	\$812.8	5	
1		,	÷•••	-	
3.	Current Composite Expected Claim Liability	\$317.66 \$651.19	\$762.36		
J.					
1	Comparison of Final to Current	6.6% 6.6%	n/a 6.6%		
1					
4.	Fixed Agri Services Monthly Retention Charge ( Sec IV.9 - F	Rx rebate) x loading factor) See Exhibit A	١		
5.	Stop-Loss Charge ( Sec III 13 x 14 x 15 x 16 x 17 x 19 x loa	, ,			
1		- /			
1					
L					

#### Exhibit B - Derivation of Fully Insured Premium Equivalents

	Calculated	Calculated rates by product for 12/1/13-11/30/14 effective dates				Change	e in Exhibit B (	Calculated Rat	es from prior re	
	VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L	VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L
Single Rates	Option 1	Option 2	Option 3	Option 4	Option 5	Option 1	Option 2	Option 3	Option 4	Option 5
expected claims(exhibit A)	\$502.76	\$382.17	\$464.74	\$219.45	\$295.69	6.6%	6.6%	6.6%	6.6%	6.6%
retention(exhibit A)	\$49.05	\$49.05	\$49.05	\$49.05	\$49.05	-5.1%	-5.1%	-5.1%	-5.1%	-5.1%
stop loss (exhibit A)	\$7.70	\$7.70	\$7.70	\$7.70	\$7.70	-0.1%	-0.1%	-0.1%	-0.1%	-0.1%
Agri Services Accident coverage(per contract)	\$3.00	\$3.00	\$3.00	\$3.00	\$3.00	0.0%	0.0%	0.0%	0.0%	0.0%
Agri Services Broker load (3%)	\$16.88	\$13.26	\$15.73	\$8.38	\$10.66	5.3%	5.0%	5.2%	4.1%	4.6%
Agri Services Administrative Load (8%)	<u>\$45.00</u>	<u>\$35.35</u>	<u>\$41.96</u>	<u>\$22.34</u>	<u>\$28.44</u>	5.3%	5.0%	5.2%	<u>4.1%</u>	4.6%
Total Single Rate	\$624.39	\$490.54	\$582.19	\$309.92	\$394.55	5.3%	5.0%	5.2%	4.1%	4.6%
	VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L	VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L
Double Rates	Option 1	Option 2	Option 3	Option 4	Option 5	Option 1	Option 2	Option 3	Option 4	Option 5
expected claims(exhibit A)	\$1,030.63	\$783.47	\$952.72	\$449.89	\$606.15	6.6%	6.6%	6.6%	6.6%	6.6%
retention(exhibit A)	\$100.56	\$100.56	\$100.56	\$100.56	\$100.56	-5.1%	-5.1%	-5.1%	-5.1%	-5.1%
stop loss (exhibit A)	\$15.79	\$15.79	\$15.79	\$15.79	\$15.79	-0.2%	-0.2%	-0.2%	-0.2%	-0.2%
Accident coverage provided by Agri Services	\$3.00	\$3.00	\$3.00	\$3.00	\$3.00	0.0%	0.0%	0.0%	0.0%	0.0%
Agri Services Broker load (3%)	\$34.50	\$27.08	\$32.16	\$17.08	\$21.76	5.3%	5.0%	5.3%	4.1%	4.6%
Agri Services Administrative Load (8%)	\$92.00	<u>\$72.23</u>	\$85.77	\$45.54	\$58.04	5.3%	5.0%	5.3%	4.1%	4.6%
	\$1,276.48	\$1,002.13	\$1,190.00	\$631.86	\$805.30	5.3%	5.0%	5.3%	4.1%	4.6%
	VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L	VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L
Family Rates	Option 1	Option 2	Option 3	Option 4	Option 5	Option 1	Option 2	Option 3	Option 4	Option 5
expected claims(exhibit A)	\$1,206.59	\$917.25	\$1,115.40	\$526.71	\$709.63	6.6%	6.6%	6.6%	6.6%	6.6%
retention(exhibit A)	\$117.72	\$117.72	\$117.72	\$117.72	\$117.72	-5.1%	-5.1%	-5.1%	-5.1%	-5.1%
stop loss (exhibit A)	\$18.49	\$18.49	\$18.49	\$18.49	\$18.49	-0.2%	-0.2%	-0.2%	-0.2%	-0.2%
Accident coverage provided by Agri Services	\$3.00	\$3.00	\$3.00	\$3.00	\$3.00	0.0%	0.0%	0.0%	0.0%	0.0%
Agri Services Broker load (3%)	\$40.37	\$31.69	\$37.64	\$19.98	\$25.47	5.3%	5.0%	5.3%	4.1%	4.6%
Agri Services Administrative Load (8%)	\$107.66	\$84.52	\$100.37	\$53.27	\$67.91	5.3%	5.0%	5.3%	4.1%	4.6%
	\$1,493.84	\$1,172.67	\$1,392.62	\$739.18	\$942.22	5.3%	5.0%	5.3%	4.1%	4.6%

#### Exhibit B1

#### MVP Health Care Premium Rates for Member Groups of Agri Services Rates effective 12/1/13-11/30/14

rrent Approved Agri Serv	vices Fully Insured Prer	nium Rates				
		Option 1	Option 2	Option 3	Option 4	Option 5
Association Members	<u>Rates</u>	VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L
Dairymens	Single	\$606.27	\$475.67	\$564.86	\$267.57	\$358.88
Dairymens	Double	\$1,239.45	\$972.46	\$1,154.79	\$547.01	\$733.68
Dairymens	Family	\$1,449.31	\$1,137.11	\$1,350.32	\$639.63	\$857.91
ASA	Single	\$659.62	\$517.53	\$614.57	\$291.11	\$390.46
ASA	Double	\$1,344.41	\$1,054.81	\$1,252.58	\$593.33	\$795.82
ASA	Family	\$1,572.67	\$1,233.90	\$1,465.26	\$694.07	\$930.93
		Revenue				\$523,174.89
posed Premium Rates u	Ising Plan Specific Expe	ected Claim Liaibi	ties			
	3	Option 1	Option 2	Option 3	Option 4	Option 5
Association Members	Rates	VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L
Dairymens	Single	\$624.39	\$490.54	\$582.19	\$309.92	\$394.55
Dairymens	Double	\$1,276.48	\$1,002.13	\$1,190.00	\$631.86	\$805.30
Dairymens	Family	\$1,493.84	\$1,172.67	\$1,392.62	\$739.18	\$942.22
ASA	Single	\$624.39	\$490.54	\$582.19	\$309.92	\$394.55
ASA	Double	\$1,276.48	\$1,002.13	\$1,190.00	\$631.86	\$805.30
ASA	Family	\$1,493.84	\$1,172.67	\$1,392.62	\$739.18	\$942.22
		Total Monthly				\$542,060.63
Proposed Increases b	y Product					
Dairymens	Single	3.0%	3.1%	3.1%	15.8%	9.9%
Dairymens	Double	3.0%	3.1%	3.0%	15.5%	9.8%
Dairymens	Family	3.1%	3.1%	3.1%	15.6%	9.8%
ASA	Single	-5.3%	-5.2%	-5.3%	6.5%	1.0%
ASA	Double	-5.1%	-5.0%	-5.0%	6.5%	1.2%
ASA	Family	-5.0%	-5.0%	-5.0%	6.5%	1.2%
	Average By Plan	-3.0%	-2.2%	0.4%	11.7%	7.8%
Composite Rec	quired Revenue Change	3.6%				
	·					
i Services 2013 Propose	ed Final Rates Using Co	, ,				
		Option 1	Option 2	Option 3	Option 4	Option 5
Association Members	Rates	<u>VP019L</u>	<u>VP017L</u>	VP020L	VPHD-03L	VEHD-02L
Dairvmens	Sinale	\$628.16	\$492.84	\$585.25	\$277.23	\$371.83

						3.6%
		Total Monthly				\$542,060.63
ASA	Family	\$1,629.44	\$1,278.44	\$1,518.15	\$719.12	\$964.54
ASA	Double	\$1,392.94	\$1,092.89	\$1,297.80	\$614.75	\$824.54
ASA	Single	\$683.43	\$536.22	\$636.76	\$301.62	\$404.56
Dairymens	Family	\$1,501.63	\$1,178.16	\$1,399.07	\$662.72	\$888.88
Dairymens	Double	\$1,284.19	\$1,007.56	\$1,196.48	\$566.75	\$760.17
Dairymens	Single	\$628.16	\$492.84	\$585.25	\$277.23	\$371.83
Association Members	Rales	VPUI9L	VPUITL	VPUZUL	VPHD-03L	

		P2000ACO	P2000ACQ	P2000ACP	P000414	E001847
Contract Counts as of 6/13		VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L
Dairyman's (subgroup 1)	Individual	26	10	62	114	123
	Double	7	9	11	28	37
	Family	7	7	7	27	32
ASA (subgroup 2)	Individual	78	37	24	77	50
	Double	11	2	3	19	2
	Family	19	7	11	35	9
Total Dairymans		40	26	80	169	192
total ASA		108	46	38	131	61
Grand Total		148	72	118	300	253



# Consumer Disclosure about Proposed Health Insurance Rate Increase December 2013 Agriservices Rate Filing

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 Agriservice's minimum premium rates for effective dates of coverage beginning between December 1, 2013 and November 30, 2014.

The premium rates filed for approval 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 a 5.1% increase over the prior rates. All products have the same proposed rate increase, and 1,538 members will be impacted by this rate filing.

SERFF Tracking #:	MVPH-129148249	State Tracking #:	67485	C	Company Tracking #:				
State:	Vermont			Filing Company:	MVP Health Insurance Company				
TOI/Sub-TOI:	H16G Group Heal	H16G Group Health - Major Medical/H16G.002A Large Group Only - PPO							
Product Name:	Agriservices Dece	mber 2013 Filing							
Project Name/Number:	/								

# 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)
08/05/2013		Supporting Document	Health Filing Data	11/06/2013	Agri Services 2014 Filing v1.pdf (Superceded)



# **Rate Filing Adjustment**

# **MVP Health Insurance Company**

# ~ Article 42 ~

# **Agri Services**

# Rates Effective December 1, 2013 - November 30, 2014

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EXHIBIT	В	Derivation of Fully Insured Premium Equivalents	3
EXHIBIT	B1	Premium Rates for Member Groups of Agri Services	4

## MVP Health Care VERMONT GROUP RATE QUOTE

### Customer Name: Agri Services

Contract Period: 12/1/2013 - 11/30/2014

### Quote Expires: 12/01/2014

### **Product Description and Rates:**

	Option 1				
Benefit Highlights	VP019L - F	Preferred PPO			
	In Network Out of Network				
Office Visits	\$20.00	Coins/Ded			
Hospital Inpatient	Coins/Ded	Coins/Ded			
Annual Deductible	\$500/\$1,250	\$1,000/\$2,500			
Coinsurance	80%/20%	60%/40%			
Out-of-Pocket Maximum	\$1,000/\$2,500	\$3,000/\$7,500			
Lifetime Maximum	none	\$1,000,000			
Pharmacy	\$10/\$30/\$50				
Other	De	p to 26			
		Maximum Liability			
	Expected	- 110% Risk			
Rates:	Claims	Corridor			
Single	\$509.83	\$560.81			
Double	\$1,045.13	\$1,149.64			
Family	\$1,223.57	\$1,345.93			
	Retention**	Stop-loss \$200k			
Single	\$49.73	\$7.82			
Double	\$101.95	\$16.02			
Family	\$119.36	\$18.76			

Option 2					
VP017L - Pre	ferred PPO				
In Network	Out of Network				
\$20.00	Coins/Ded				
Coins/Ded	Coins/Ded				
\$2,000/\$5,000	\$4000/\$10,000				
80%/20%	60%/40%				
\$6,000/\$15,000	\$12,000/\$30,000				
none	\$1,000,000				
\$10/\$30					
Dep to					
	Maximum				
	Liability - 110%				
Expected Claims	Risk Corridor				
\$387.55	\$426.31				
\$794.49	\$873.94				
\$930.16	\$1,023.18				
Retention**	Stop-loss \$200k				
\$49.73	\$7.82				
\$101.95	\$16.02				
\$119.36	\$18.76				

Option 3						
VP020L - Preferred PPO						
In Network	Out of Network					
\$20.00	Coins/Ded					
Coins/Ded	Coins/Ded					
\$1,000/\$2,500	\$2,000/\$5,000					
80%/20%	60%/40%					
\$2,000/\$5,000	\$6,000/\$15,000					
none	\$1,000,000					
\$10/\$30						
Dep to						
	Maximum					
	Liability - 110%					
Expected Claims	Risk Corridor					
\$471.28	\$518.41					
\$966.12	\$1,062.73					
\$1,131.09	\$1,244.20					
Retention**	Stop-loss \$200k					
\$49.73	\$7.82					
\$101.95	\$16.02					
\$119.36	\$18.76					

	Option 4					
Benefit Highlights	VPHD-03L - P	referred HD PPO *				
	In Network	Out of Network				
Office Visits	Prev Care - \$0	Coins/Ded				
Hospital Inpatient	Coins/Ded	Coins/Ded				
Annual Deductible	\$5,000/\$10,000	\$10,000/\$20,000				
Coinsurance	0%	80%/20%				
Out-of-Pocket Maximum	\$5,000/\$10,000	\$20,000/\$40,000				
Lifetime Maximum	none	\$1,000,000				
		Covered in Full after Deductible - no OON				
Pharmacy						
Pharmacy Other		er Deductible - no OON p to 26				
	De	ep to 26				
Other		p to 26 Maximum Liability				
Other	De Expected	ep to 26 Maximum Liability - 110% Risk				
Other Rates:	Expected Claims	pp to 26 Maximum Liability - 110% Risk Corridor				
Other Rates: Single	Expected Claims \$222.53	Maximum Liability - 110% Risk Corridor \$244.78				
Other Rates: Single Double	Expected Claims \$222.53 \$456.23	Maximum Liability - 110% Risk Corridor \$244.78 \$501.85				
Other Rates: Single Double	Expected Claims \$222.53 \$456.23 \$534.12	Maximum Liability - 110% Risk Corridor \$244.78 \$501.85 \$587.53				
Other Rates: Single Double Family	Expected           Claims           \$222.53           \$456.23           \$534.12           Retention**	Maximum Liability - 110% Risk Corridor \$244.78 \$501.85 \$587.53 Stop-loss \$200k				

Option 5					
VEHD-02L - Preferred HD EPO *					
In Network	Out of Network				
Prev Care - \$0	N/A				
Coins/Ded	N/A				
\$2,500/\$5,000	N/A				
0%	N/A				
\$3,500/\$7,000	N/A				
none	N/A				
\$10/\$30/\$50 Dep to 26					
Expected Claims	Maximum Liability - 110% Risk Corridor				
Expected Claims \$299.85	Liability - 110%				
	Liability - 110% Risk Corridor				
\$299.85	Liability - 110% Risk Corridor \$329.84				
\$299.85 \$614.68	Liability - 110% Risk Corridor \$329.84 \$676.15				
\$299.85 \$614.68 \$719.61	Liability - 110% Risk Corridor \$329.84 \$676.15 \$791.57				
\$299.85 \$614.68 \$719.61 Retention**	Liability - 110% Risk Corridor \$329.84 \$676.15 \$791.57 Stop-loss \$200k				

## MVP Health Care - Large Group Experience Rating Formula

L Case Information							
I. Case Information Group Name:	Agri-Services Agency LLC		Date		Г	07/30/88	
Group #:	400088	,		tive Date:		12/01/13 - 11/30/	14
Marketing Rep:	9JEP - Jason PICKETT			uct Type Q		HDEPO	17
Underwriter:	Tracey Romand						
				<u> </u>			
II. Manual Pure Premium Calculation	Medical w/ Nor	n-Pharmacy Riders			Γ	Pharmacy	]
1. Manual Pure Premium		\$312.07				\$40.56	
<ol> <li>Industry Factor</li> <li>Demographic Factor</li> <li>Area Factor</li> </ol>		1.19				1.19	
3. Demographic Factor		1.114				1.114	Total
4. Area Factor     5. Adjusted Manual Pure Premium		1.000 \$414.83				n/a \$53.79	Total pmpm \$468.62
III. Experience Pure Premium Calculation							
Experience Period Start Date		05/01/12				05/01/12	
Experience Period End Date		04/30/13				04/30/13	
Paid Through Date		06/30/13				06/30/13	
Midpoint of Experience Period		11/01/12				11/01/12	
1a. Product Reflected in Experience							
1b. Product in the Rate Quote (Enter Product ID)							
2a. Member Months		18,199				18,199	
2b. Out-of-Area Subscribers		28				n/a	
Claims Information		\$3 075 /2/				\$382,643	
<ol> <li>Date of Service Paid Claims (including net reinsurance)</li> <li>Composite Completion Factor Adjustment</li> </ol>		\$3,975,434 1.0000				\$382,643 1.0000	
<ol> <li>Composite Completion Factor Adjustment</li> <li>Incurred Claims</li> </ol>		\$3,975,434				\$382,643	
Large Claims Pooling and Trend		++,+++,++++				400 <u></u> ,010	
6. Pooling Level (PL)		\$200,000				n/a	
7. Actual Large Claims (Excess Over PL)		\$38,427				n/a	
<ol> <li>Completion Adjustment Factor</li> <li>Completion Adjusted Large Claims</li> </ol>		1.0000				n/a	
		\$38,427				n/a	
10. Incurred Claims Less Large Claims		\$3,937,007				n/a	
11. Trend Factor to Mid Point of Projection Period			Annual Trend	d)		1.079	(4.9% Annual Trend)
12. Trended Net Claims		\$4,350,393 \$239.05				\$412,872 \$22.69	
13. Trended pmpm Net Claims Experience Adjustments		\$239.00				φzz.09	
14. Demographic Adjustment (Carrier Replacement Only)		1.000				1.000	
15. Prior Period Adjustment, if applicable		1.000				1.000	
16. Network Efficiency Factor		1.000				1.000	
17. Benefit Adjustment		1.000				1.000	(already in line 3)
18. Pharmacy Rebate Factor		n/a				0.950	\$1.13
19. Pooling Charge %		2.69%	\$6.42			n/a	
20. Adjusted pmpm Net Claims		\$245.47				\$21.56	
21. Covered Lives Assessment		\$0.04				n/a	
22. Indigent Care		\$0.10 \$245.61				n/a	Total pmpm
23. Experience Pure Premium		\$245.61				\$21.56	\$243.14
IV. Employer Specific Premium Rates Blending the Manual Pure Premium and Experience		<u>Total</u>					
1. Adjusted Manual Pure Premium		\$468.62					
2 Eventiones Dure Promium		\$267.17					
Experience Pare Fremulan     Experience Credibility Weight     Blended Pure Premium     Group Risk Assessment     VT Paid Claim Surcharge     Other Charges (network access, healthy dollars etc)     Retention     Taxes and Assessments		100%					
4. Blended Pure Premium		\$267.17					
5. Group Risk Assessment		1.000					
6. VT Paid Claim Surcharge		0.999%					
7. Other Charges (network access, healthy dollars etc)		\$0.06					
8. Retention		\$42.01					
		\$17.61					
10. Group Required Pure Premium		\$329.52	rod Drami	less Det	tion lass D	ling Charge at	Dy repete erectia
11. Expected Claim Liability PMPM		\$282.22 (Requi	rea Premium	i iess Ketel	MUTH IESS POO	oning Gharge plus	Rx rebate credit)
V. Minimum Premium Funding							
Expected Claim Liability Development		Current Tier Ratios	-				
1 Looding Factors	<u>S</u>	<u>D</u> <u>P</u>	<u>c</u>	<u>F</u>			
Loading Factors     Proposed Composite Expected Claim Liability by Tier	1.2166 <b>\$343.34</b>	2.4940 n. <b>\$703.85</b>		.9198 <b>24.02</b>			
3. Current Composite Expected Claim Liability Comparison of Final to Current	\$317.66 <b>8.1%</b>	\$651.19 <b>8.1% n</b>		762.36 <b>3.1%</b>			
<ol> <li>Fixed Agri Services Monthly Retention Charge( (Sec IV.9 -</li> <li>Stop-Loss Charge (Sec III 13 x 14 x 15 x 16 x 17 x 19 x log</li> </ol>	, ,	See Exhibit A See Exhibit A					

#### Exhibit B - Derivation of Fully Insured Premium Equivalents

	Calculated	Calculated rates by product for 12/1/13-11/30/14 effective dates						e in Exhibit B (	Calculated Rat	es from prior re	enewal
	VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L		VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L
Single Rates	Option 1	Option 2	Option 3	Option 4	Option 5		Option 1	Option 2	Option 3	Option 4	Option 5
expected claims(exhibit A)	\$509.83	\$387.55	\$471.28	\$222.53	\$299.85		8.1%	8.1%	8.1%	8.1%	8.1%
retention(exhibit A)	\$49.73	\$49.73	\$49.73	\$49.73	\$49.73		-3.8%	-3.8%	-3.8%	-3.8%	-3.8%
stop loss (exhibit A)	\$7.82	\$7.82	\$7.82	\$7.82	\$7.82		1.3%	1.3%	1.3%	1.3%	1.3%
Agri Services Accident coverage(per contract)	\$3.00	\$3.00	\$3.00	\$3.00	\$3.00		0.0%	0.0%	0.0%	0.0%	0.0%
Agri Services Broker load (3%)	\$17.11	\$13.44	\$15.95	\$8.49	\$10.81		6.8%	6.5%	6.7%	5.5%	6.1%
Agri Services Administrative Load (8%)	<u>\$45.63</u>	<u>\$35.85</u>	<u>\$42.55</u>	<u>\$22.65</u>	<u>\$28.83</u>		<u>6.8%</u>	6.5%	<u>6.7%</u>	5.5%	6.1%
Total Single Rate	\$633.12	\$497.39	\$590.33	\$314.22	\$400.04		6.8%	6.5%	6.7%	5.5%	6.1%
	VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L		VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L
Double Rates	Option 1	Option 2	Option 3	Option 4	Option 5		Option 1	Option 2	Option 3	Option 4	Option 5
expected claims(exhibit A)	\$1,045.13	\$794.49	\$966.12	\$456.23	\$614.68		8.1%	8.1%	8.1%	8.1%	8.1%
retention(exhibit A)	\$101.95	\$101.95	\$101.95	\$101.95	\$101.95		-3.8%	-3.8%	-3.8%	-3.8%	-3.8%
stop loss (exhibit A)	\$16.02	\$16.02	\$16.02	\$16.02	\$16.02		1.3%	1.3%	1.3%	1.3%	1.3%
Accident coverage provided by Agri Services	\$3.00	\$3.00	\$3.00	\$3.00	\$3.00		0.0%	0.0%	0.0%	0.0%	0.0%
Agri Services Broker load (3%)	\$34.98	\$27.46	\$32.61	\$17.32	\$22.07		6.8%	6.5%	6.7%	5.5%	6.1%
Agri Services Administrative Load (8%)	\$93.29	\$73.24	\$86.97	\$46.18	\$58.85		6.8%	6.5%	6.7%	5.5%	6.1%
	\$1,294.38	\$1,016.17	\$1,206.68	\$640.70	\$816.58		6.8%	6.5%	6.7%	5.5%	6.1%
	VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L		VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L
Family Rates	Option 1	Option 2	Option 3	Option 4	Option 5		Option 1	Option 2	Option 3	Option 4	Option 5
expected claims(exhibit A)	\$1,223.57	\$930.16	\$1,131.09	\$534.12	\$719.61		8.1%	8.1%	8.1%	8.1%	8.1%
retention(exhibit A)	\$119.36	\$119.36	\$119.36	\$119.36	\$119.36		-3.8%	-3.8%	-3.8%	-3.8%	-3.8%
stop loss (exhibit A)	\$18.76	\$18.76	\$18.76	\$18.76	\$18.76		1.3%	1.3%	1.3%	1.3%	1.3%
Accident coverage provided by Agri Services	\$3.00	\$3.00	\$3.00	\$3.00	\$3.00		0.0%	0.0%	0.0%	0.0%	0.0%
Agri Services Broker load (3%)	\$40.94	\$32.14	\$38.17	\$20.26	\$25.82		6.8%	6.5%	6.7%	5.6%	6.1%
Agri Services Administrative Load (8%)	\$109.18	\$85.70	<u>\$101.78</u>	\$54.02	\$68.86		6.8%	6.5%	6.7%	5.6%	6.1%
	\$1,514.80	\$1,189.12	\$1,412.15	\$749.52	\$955.41		6.8%	6.5%	6.7%	5.6%	6.1%

#### Exhibit B1

#### MVP Health Care Premium Rates for Member Groups of Agri Services Rates effective 12/1/13-11/30/14

Irrent Approved Agri Serv	vices Fully Insured Pren	nium Rates				
		Option 1	Option 2	Option 3	Option 4	Option 5
Association Members	<u>Rates</u>	VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L
Dairymens	Single	\$606.27	\$475.67	\$564.86	\$267.57	\$358.88
Dairymens	Double	\$1,239.45	\$972.46	\$1,154.79	\$547.01	\$733.68
Dairymens	Family	\$1,449.31	\$1,137.11	\$1,350.32	\$639.63	\$857.91
ASA	Single	\$659.62	\$517.53	\$614.57	\$291.11	\$390.46
ASA	Double	\$1,344.41	\$1,054.81	\$1,252.58	\$593.33	\$795.82
ASA	Family	\$1,572.67	\$1,233.90	\$1,465.26	\$694.07	\$930.93
		Total Month	nly Revenue Expec	ted based on 6/13 c	contract counts	\$523,174.89
oposed Premium Rates u	using Plan Specific Ever	atad Claim Liaihi	tion			
oposed Fremium Rates u	ising Fian Specific Expe	Option 1	Option 2	Option 3	Option 4	Option 5
Association Members	Rates	VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L
Dairymens	Single	\$633.12	\$497.39	\$590.33	\$314.22	\$400.04
Dairymens	Double	\$1,294.38	\$1,016.17	\$1,206.68	\$640.70	\$816.58
Dairymens	Family	\$1,514.80	\$1,189.12	\$1,412.15	\$749.52	\$955.41
ASA	Single	\$633.12	\$497.39	\$590.33	\$314.22	\$400.04
ASA	Double	\$1.294.38	\$1.016.17	\$1,206.68	\$640.70	\$816.58
ASA	Family	\$1,514.80	\$1,189.12	\$1,412.15	\$749.52	\$955.41
	•	Total Month	nly Revenue Expec	ted based on 6/13 o	contract counts	\$549,636.93
VP Proposed Increases by	v Product					
Dairymens	Single	4.4%	4.6%	4.5%	17.4%	11.5%
Dairymens	Double	4.4%	4.5%	4.5%	17.1%	11.3%
Dairymens	Family	4.5%	4.6%	4.6%	17.2%	11.4%
ASA	Single	-4.0%	-3.9%	-3.9%	7.9%	2.5%
ASA	Double	-3.7%	-3.7%	-3.7%	8.0%	2.6%
ASA	Family	-3.7%	-3.6%	-3.6%	8.0%	2.6%
	Average By Plan	-1.7%	-0.8%	1.8%	13.2%	9.3%
Composite Rec	quired Revenue Change	5.1%				
gri Services 2013 Propose	ed Final Rates Using Co	, ,				
Association Members	Rates	Option 1 VP019L	Option 2 VP017L	Option 3 VP020L	Option 4 VPHD-03L	Option 5 VEHD-02L

	-	Option 1	Option 2	Option 3	Option 4	Option 5	
Association Members	Rates	VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L	
Dairymens	Single	\$636.94	\$499.73	\$593.43	\$281.10	\$377.03	
Dairymens	Double	\$1,302.14	\$1,021.64	\$1,213.20	\$574.67	\$770.79	
Dairymens	Family	\$1,522.62	\$1,194.63	\$1,418.62	\$671.98	\$901.30	
ASA	Single	\$692.99	\$543.71	\$645.66	\$305.84	\$410.21	
ASA	Double	\$1,412.41	\$1,108.16	\$1,315.94	\$623.34	\$836.07	
ASA	Family	\$1,652.22	\$1,296.31	\$1,539.37	\$729.17	\$978.02	
		Total Month	Total Monthly Revenue Expected based on 6/13 contract counts				
						5.1%	

		P2000ACO	P2000ACQ	P2000ACP	P000414	E001847
Contract Counts as of 6/13		VP019L	VP017L	VP020L	VPHD-03L	VEHD-02L
Dairyman's (subgroup 1)	Individual	26	10	62	114	123
	Double	7	9	11	28	37
	Family	7	7	7	27	32
ASA (subgroup 2)	Individual	78	37	24	77	50
	Double	11	2	3	19	2
	Family	19	7	11	35	9
Total Dairymans		40	26	80	169	192
total ASA		108	46	38	131	61
Grand Total		148	72	118	300	253

#### Derivation of Trend Factors Used in Rate Development

Experience Period Start Date	04/01/13
Experience Period End Date	03/31/14
Paid Through Date	05/31/14
Midpoint of Experience Period	10/01/13

	VPHD	-03L	VEHD	D-02L	VP0	19L	VP	017L	VP	020L		
Product Type Quoted	HDP	PO	HDE	PO	HYF	PO	HY	PPO	HY	PPO	тс	TAL
	Medical	Pharmacy	Medical	Pharmacy	Medical	Pharmacy	Medical	Pharmacy	Medical	Pharmacy	Medical	Pharmacy
Incurred Claims	\$808,333	\$103,551	\$1,346,025	\$68,880	\$1,061,497	\$86,345	\$300,610	\$53,581	\$719,292	\$100,051	\$4,235,758	\$412,408
Pooling Level (PL)	\$200,000	n/a	\$200,000	n/a	\$200,000	n/a	\$200,000	n/a	\$200,000	n/a	\$200,000	n/a
Actual Large Claims (Excess Over PL)	\$0	n/a	\$0	n/a	\$101,962	n/a	\$0	n/a	\$0	n/a	\$101,962	n/a
Completion Adjustment Factor	1.0000	n/a	1.0000	n/a	1.0000	n/a	1.0000	n/a	1.0000	n/a	1.0000	n/a
Completion Adjusted Large Claims	\$0	n/a	\$0	n/a	\$101,962	n/a	\$0	n/a	\$0	n/a	\$101,962	n/a
Incurred Claims Less Large Claims	\$808,333	n/a	\$1,346,025	n/a	\$959,535	n/a	\$300,610	n/a	\$719,292	n/a	\$4,133,796	n/a
Trend Factor to Mid Point of Projection Period	1.149	1.084	1.149	1.084	1.142	1.078	1.142	1.078	1.142	1.078	1.146	1.081
Trended Net Claims	\$928,775	\$112,249	\$1,546,583	\$74,666	\$1,095,789	\$93,080	\$343,297	\$57,760	\$821,431	\$107,855	\$4,735,875	\$445,610
											8.5%	4.8%

			Prod	uct 1	Proc	duct 3
	Tre	end	med yr1	rx yr1	med yr1	rx yr1
Month/Year	Medical	Rx	1.149	1.084	1.142	1.078
10/2013	1.0039	1.0025	1.005	1.0035	1.0047	1.0033
11/2013	1.0039	1.0025	1.005	1.0035	1.0047	1.0033
12/2013	1.0039	1.0025	1.005	1.0035	1.0047	1.0033
1/2014	1.0073	1.0029	1.0084	1.004	1.0081	1.0037
2/2014	1.0073	1.0029	1.0084	1.004	1.0081	1.0037
3/2014	1.0073	1.0029	1.0084	1.004	1.0081	1.0037
4/2014	1.0073	1.0029	1.0084	1.004	1.0081	1.0037
5/2014	1.0073	1.0029	1.0084	1.004	1.0081	1.0037
6/2014	1.0073	1.0029	1.0084	1.004	1.0081	1.0037
7/2014	1.0073	1.0029	1.0084	1.004	1.0081	1.0037
8/2014	1.0073	1.0029	1.0084	1.004	1.0081	1.0037
9/2014	1.0073	1.0029	1.0084	1.004	1.0081	1.0037
10/2014	1.0073	1.0029	1.0084	1.004	1.0081	1.0037
11/2014	1.0073	1.0029	1.0084	1.004	1.0081	1.0037
12/2014	1.0073	1.0029	1.0084	1.004	1.0081	1.0037
1/2015	1.0036	1.0034	1.0047	1.0044	1.0044	1.0042
2/2015	1.0036	1.0034	1.0047	1.0044	1.0044	1.0042
3/2015	1.0036	1.0034	1.0047	1.0044	1.0044	1.0042
4/2015	1.0036	1.0034	1.0047	1.0044	1.0044	1.0042
5/2015	1.0036	1.0034	1.0047	1.0044	1.0044	1.0042

	Allowed T	rend
Year	Medical	Rx
2013	4.8%	3.0%
2014	9.1%	3.5%
2015	4.4%	4.1%
2016	4.4%	4.1%

Coplan Type	Annual Leveraging Fx
HDEPO	1.3%
HDPPO	1.3%
HyPPO	1.0%
PPO	1.0%

#### **Single Conversion Factor Development** December 2014 Subs \* Rate Subscriber Member **Tier Ratios** Tier Contract Type Months Months Ratio 3T 6,024 Single 6,024 6,024 1.00 3T Double 1,296 2,592 2,657 2.05 3T Family 1,908 7,836 4,579 2.40 9,228 16,452 13,260 Single Conversion Factor 1.2407 December 2013 Subs \* Rate Tier **Contract Type** SM ММ Ratio **Tier Ratios** 3T S 6,837 6,837 6,837 1.00

3,558

7,804

18,199

1.2165

3,651

4,471

14,960

2.05

2.40

1,781

1,863

10,481

Single Conversion Factor Calc

ЗT

3T

D

F

8/8/2014

### **Derivation of Expected Gross Claim Liabilities Between Coplans**

Dec-14 Expected Gross Claim Liability

Base Plan Offered	Experience Pd MM	December 2013 Agriservices Expected Claim Liability Relativities	Expected Gross Claim Liability PMPM Based on December 2013 Relativities	Proposed Benefit Relativities	December 2014 Proposed Expected Gross Claim Liabilities
VP019L	2,779	100.0%	\$472.61	100.0%	\$406.74
VP017L	1,526	76.0%	\$359.25	84.7%	\$344.34
VP020L	2,173	92.4%	\$436.87	94.1%	\$382.84
VPHD-03L	6,497	43.6%	\$206.29	60.2%	\$244.72
VEHD-02L	5,099	58.8%	\$277.95	71.9%	\$292.37
Total	18,074	65.2%	\$308.09	75.7%	\$308.09

	riod Enrollment by	Sup-Gloup
Option # 1		
P2000AC1 PPO	ASA 0001	Dairymans 0002
Individual	318	908
Double	74	119
Family	79	220
Total	471	1247
Option # 2		
P2000AC2_PPO	ASA 0001	Dairymans 0002
Individual	118	445
Double	110	24
<u>Family</u>	<u>88</u>	<u>94</u>
Total	316	563
	-	
Option # 3		
P2000AC3_PPO	ASA 0001	Dairymans 0002
Individual	639	262
Double	120	42
<u>Family</u>	<u>95</u>	<u>111</u>
Total	854	415
	1	
Option # 4		
P000498S/F_HDPPO	<u>ASA 0001</u>	Dairymans 0002
Individual	1339	904
Double	339	260
<u>Family</u>	<u>353</u>	<u>430</u>
Total	2031	1594
	Т	
Option # 5		<b>.</b>
E002536S/F - HDEPO	<u>ASA 0001</u>	Dairymans 0002
Individual	1477	593
Double	427	35
<u>Family</u>	<u>388</u>	<u>109</u>
Total	2292	737

#### Experience Period Enrollment by Sub-Group



### Agri-Services Agency LLC

Reconciliations by contract year

Jan-Dec 2009							Monthly			Cumulative	Account
	(	Contracts			Monthly	Actual	Surplus/	Cumulative	Cumulative	Surplus/	is Billed
_	Individual	<u>Double</u>	<u>Family</u>	Total	<u>Maximum</u>	<u>Claims</u>	(Deficit)	<u>Maximum</u>	<u>Claims</u>	(Deficit)	for claims
Totals	8325	1563	2107	11995	\$5,905,807	\$3,982,751	\$1,645,561	\$5,628,312	\$3,982,751	\$1,645,561	\$3,982,751

Contracts         Monthly         Actual         Surplus/         Cumulative           Individual         Double         Family         Total         Maximum         Claims         (Deficit)         Maximum	Cumulative	Surplus/	is Billed
Individual Double Family Total Maximum Claims (Deficit) Maximum			
•	<u>Claims</u>	(Deficit)	for claims
Totals 7008 1484 1640 10132 \$5,026,909 \$4,272,900 \$686,208 \$4,959,108	\$4,272,900	\$686,208	\$4,272,900

Jan-Dec 2011										Cumulative	Account
	C	Contracts			Monthly	Actual	Surplus/	Cumulative	Cumulative	Surplus/	is Billed
-	Individual	Double	<u>Family</u>	Total	<u>Maximum</u>	<u>Claims</u>	(Deficit)	<u>Maximum</u>	Claims	(Deficit)	for claims
Totals	6704	1457	1766	9927	\$4,703,529	\$3,924,090	\$728,260	\$4,652,351	\$3,924,090	\$728,260	\$3,924,090

Contracts       Monthly       Actual       Surplus/       Cumulative       Cumulative       Surplus/       is Billed         Individual       Double       Family       Total       Maximum       Claims       (Deficit)       Maximum       Claims       (Deficit)       for claims         Totals       6948       1614       1887       10449       \$4,959,053       \$4,072,868       \$862,058       \$4,972,868       \$862,058       \$4,072,868       \$862,058       \$4,072,868       \$862,058       \$4,072,868       \$862,058       \$4,072,868       \$862,058       \$4,072,868       \$862,058       \$4,072,868       \$4,072	Jan-Nov 2012	Ν	Aonthly	Cumulative Account
	Contracts	Monthly Actual S	urplus/ Cumulative Cumulative	Surplus/ is Billed
	Individual Double Family	<u>Total Maximum Claims (</u>	Deficit) <u>Maximum Claims</u>	(Deficit) for claims
	Totals 6948 1614 1887	10449 \$4,959,053 \$4,072,868 \$8	<b>*</b> 362,058 <b>\$</b> 4,934,925 <b>\$</b> 4,072,868	\$862,058 \$4,072,868

Dec 2012-Nov	v 2013									Cumulative	Account
	(	Contracts			Monthly	Actual	Surplus/	Cumulative	Cumulative	Surplus/	is Billed
	Individual	Double	<u>Family</u>	Total	Maximum	<u>Claims</u>	(Deficit)	<u>Maximum</u>	<u>Claims</u>	(Deficit)	for claims
Totals	6620	1475	1800	9895	\$4,773,704	\$3,944,714	\$784,676	\$4,729,390	\$3,944,714	\$784,676	\$3,944,714

Dec 2013-Jun 20	2014									Cumulative	Account
year to date	Co	ontracts			Monthly	Actual	Surplus/	Cumulative	Cumulative	Surplus/	is Billed
Inc	<u>idividual</u>	<u>Double</u>	<u>Family</u>	<u>Total</u>	<u>Maximum</u>	<u>Claims</u>	(Deficit)	Maximum	<u>Claims</u>	(Deficit)	for claims
Totals	3774	826	1142	5742	\$2,894,854	\$2,746,437	\$75,633	\$2,822,071	\$2,746,437	\$75.633	\$2,746,437



625 State Street, PO Box 2207 Schenectady, NY 12301-2207 myphealthcare.com

August 8, 2014

Ms. Rita Tansen A.S.A., M.A.A.A Lewis & Ellis, Inc. P.O. Box 851857 Richardson, TX 75085

Re: MVP 2015 Vermont Exchange Rate Filing SERFF Tracking #: MVPH-129640114

Dear Ms. Tansen:

This letter is in response to your correspondence received 08/04/14 regarding the above mentioned rate filing. The verbal responses to your questions are provided below and any numerical examples are included in the attached excel workbook with tabs corresponding to each numbered question.

Q1. The requested information has been attached.

Q2. Different leveraged trend factors are applied to HDHP products versus non-HDHP Products as outlined in the Experience Addendum. The mix of membership between HDHP and non-HDHP for Agriservices is not the same as that for the Large group MVPHIC block of business reflected in the 3Q/4Q14 filing. Please see Tab #2 in the attached excel workbook for the quantitative derivation of the trend assumptions.

Q3.The single conversion factor is computed as the weighted average contract size / weighted average load ratio using the group specific census over the experience period. The computation of the single conversion factor for the current and the prior Agriservices filing are illustrated in Tab #3 in the attached excel workbook.

Q4. A breakdown of the requested expense loads is as follows:

(	Current Filing				
% Premium Load		PMPM	Category		
	9.50%	\$33.79	General Admin		
	0.25%	\$0.89	Bad Debt		
	2.00%	\$7.11	Contribution to Reserves		
	11.75%	\$41.80	Total		

**Prior Filing** 

% Premium Load	PMPM	Category
9.50%	\$30.89	General Admin
0.25%	\$0.80	Bad Debt
3.00%	\$9.75	Contribution to Reserves
12.75%	\$41.44	Total

These are the same % premium loads that were in the prior filing with the exception of contribution to reserves. The December 2013 filing reflected a 3% contribution to reserves.



Q5. A breakdown of the requested expense loads for the current and prior filing is outlined below:

Current Filing		
Load	PMPM	Category
2.00%	\$7.12	ACA Insurer tax
2.00%	\$7.12	Premium tax
\$5.25	\$3.80	2014 Temp Reins Pool Fee (1 Month)
\$3.67		2015 Temp Reins Pool Fee (11 Months)
\$0.17	\$0.17	PPCORI
	\$18.21	Total

#### Prior Filing

Load	PMPM	Category
1.83%	\$5.96	ACA Insurer tax
2.00%	\$6.51	Premium tax
\$5.25	\$4.81	2014 Temp Reins Pool Fee (11 Months)
\$0.17	\$0.17	PPCORI
	\$17.45	Total

The only difference between the two filings is in the federal taxes. The federal taxes are prorated in each filing based on the 1 month/11 month contract split between the two calendar years. In both filings a 2% charge was assumed for the ACA Insurer tax and the Temporary Reinsurance Fee load was \$5.25 PMPM for 2014 dates of service and \$3.67 PMPM for 2015 dates of service.

Q6. Agriservices relativities between plans have not changed since 2010. At this time, the relativities for plan options #4 and #5 were too low. MVP has since made benefit relativity modifications to its manual rates to address this issue. In previous rate filings, MVP has suggested that Agriservices modify the benefit relativities of the expected claim liabilities between plans to more accurately reflect the manual rates MVP was charging, but Agriservices chose to keep the 2010 plan relativities. For this rate filing, the benefit relativities between plan options are being addressed and the result is a substantial increase to the expected claim liability for options #4 and #5 with lower increases being proposed for options #1 - #3.

MVP has updated its benefit relativity model, and the proposed relativities of the expected gross claim liability reflect MVP's best estimate of the actuarial value between the plans being offered at the time of submission. Please see Tab #6 of the attached excel file for a quantitative derivation.

Q7. Please Tab #7 in the attached excel file.

Q8. Agriservices is MVP's only 100% credible group in Vermont.

Q9. Please Tab #9 in the attached excel file.



625 State Street, PO Box 2207 Schenec:ady, NY 12301-2207 mvphealthcare.com

If you have any questions or require any additional information, please contact me at 518-388-2483.

Sincerely,

Wither Fortoto 1

Matthew Lombardo, FSA, MAAA Actuarial Manager, Commercial Pricing MVP Health Care