

**Green Mountain Care Board**  
144 State Street  
Montpelier, VT 05602

802-828-2177  
www.gmcbboard.vermont.gov

*Kevin Mullin, Chair  
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Robin Lunge, JD, MHCD  
Maureen Usifer  
Tom Pelham  
Susan Barrett, JD, Executive Director*

July 25, 2018

Gary F. Karnedy, Esq.  
30 Main Street, Suite 500  
P.O. Box 1489  
Burlington, VT 05402-1489

Re: Docket no. GMCB 008-18rr

Dear Mr. Karnedy:

As you recall, the Board asked a number of questions at hearing relating to the rate filing that your witness was unable to answer, which are listed below. The questions are straightforward; we are therefore requesting that you provide the responses no later than July 30, 2018, and that the parties adhere to the scheduling order and submit their legal memoranda on the same date.

1. Provide detailed information concerning the consumer website's usage and member traffic to the site.
2. What incentives are there, other than the Member Welcome Packet, for members to use the website?
3. Provide the status of negotiations with OneCare Vermont.
4. Has MVP shared any data re: its population with OneCare?
5. How is MVP working to help Vermont meet its scale targets in the All-Payer Model?
6. How much of MVP's Vermont business is fee-for-service, vs. fixed payment?
7. Provide information, in dollars and % of claims, regarding there Fraud, Waste and Abuse recoverables.
8. Provide a Vermont-specific, weighted calculation of PMPM administrative costs that reflects the increased membership in Vermont, versus the declining membership in New York State.
9. The filing refers to "provider incentives." Provide more detail about the incentives, and what quality measures they are linked to.
10. Provide any documents or testimony that MVP provided to the legislature regarding the delay of the individual mandate until 2020.

Sincerely,

Agatha Kessler  
Health Policy Director



cc: Kaili Kuiper, Esq.  
Eric Schultheis, Esq.  
Jay Angoff, Esq.  
Judy Henkin, Hearing Officer  
Sebastian Arduengo, Esq.





625 State Street, PO Box 2207  
Schenectady, NY 12301-2207  
[mvphealthcare.com](http://mvphealthcare.com)

July 30, 2018

Ms. Agatha Kessler  
Green Mountain Care Board  
144 State Street  
Montpelier, VT 05602

Re: 2019 Vermont Exchange Rate Filing  
Docket # GMCB 008-18rr

Dear Ms. Kessler:

This letter is in response to your correspondence received 07/25/18 regarding the above mentioned rate filing. The responses to your questions are provided below.

*1. Provide detailed information concerning the consumer website's usage and member traffic to the site.*

Response: Below are 2018 website analytics for **mvphealthcare.com**:

- Approximately 600,000 users and 2.1 million sessions
- 70.9% new visitors and 29.1% are returning visitors
- Page views for the following sections/features:
  - Members – 139,310
  - Find a Doctor – 126,422
  - Shop for a Plan: Individuals and Families (July 2017 – July 2018) – 122,286
    - Checked subsidy eligibility – 70,556
  - Prescription Benefits – 26,300
  - Health & Wellness – 25,836
  - Understanding Insurance – 14,575
  - Treatment Cost Calculator (available post login on Member portal) - 4,532 total views and 3,427 cost estimates generated
- 150,000+ members registered for an online account
- New dedicated VT landing page launched September 2017, [mvphealthcare.com/Vermont](http://mvphealthcare.com/Vermont), here are stats for the page from Sept. 1, 2017– Dec. 31, 2017:
  - 11,600 page views; 9,800 unique
  - 164 lead submissions and 900+ plan document downloads
- myMVP Mobile App:
  - Android – 5,200 users and 20,000 sessions
  - IOS – 4,600 users and 55,000 sessions



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- Overall top 3 popular features: Claims Search, View ID Cards, Find a Doctor

## 2. What incentives are there, other than the Member Welcome Packet, for members to use the website?

Response: **mvphealthcare.com** offers members a variety of information about their health care plans.

Pre-login content includes:

- Prescription Benefit information, including formularies, pharmacy search and links to our CVS Caremark (prescription drug) portal
- Links to our Find a Doctor tool to search for providers, facilities, and hospitals
- Health Management Programs, wellness classes, Healthwise health topic knowledgebase and MVP's LivingWell newsletter series
- A series of frequently asked questions surrounding prescription, network, using insurance, coverage and a Glossary of Terms
- Member forms
- Contact information for all lines of business

Once a member logs in, members can manage their health and MVP account, including:

- Accessing personal benefit information, including ability to view or print MVP Member ID cards
- Accessing claims status and history
- Tracking deductibles
- Access to health management tools such as the Treatment Cost Calculator. With our Treatment Cost Calculator, members can access cost estimates for hundreds of medical treatments and services, compare costs from different providers and types of facilities in their area, estimate out-of-pocket costs; members can also research and plan their health care expenses.
- Links to Pharmacy information and prescription management, including mail order (if applicable)
- Accessing the wellness portal and health rewards (if applicable)
- Managing account profiles and communications preferences

In addition, MVP has a dedicated Vermont landing page: **[mvphealthcare.com/vermont](http://mvphealthcare.com/vermont)**. The page appeals to prospective Vermont consumers and existing Vermont members. Since its launch in September 2017, the page has had 11,600 page views, 164 lead form submissions, and over 900 plan document downloads. MVP plans to continue to utilize the Vermont-specific landing page ahead of Open Enrollment 2019 to further amplify Vermont-specific messaging, educate on the new Reflective Silver Plans, and provide additional navigation to pertinent consumer pages housed at **[mvphealthcare.com](http://mvphealthcare.com)**.



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*3. Provide the status of negotiations with OneCare Vermont.*

Response: MVP has had 3 meetings with OneCare Vermont with respect to entering into an agreement for January 1, 2019, including sharing with OneCare a detailed proposal for such an agreement. MVP is currently engaged in discussions regarding the terms of the agreement.

OneCare is requesting \$3.25 PMPM in administrative fees to participate in the arrangement. The administrative load reflected in MVP's 2019 Exchange premium rates do not capture these fees.

*4. Has MVP shared any data re: its population with OneCare?*

Response: MVP has determined the members which would attribute to OneCare and is in the process of determining the total cost of care of the attributed membership for 2017 and Q1 2018.

*5. How is MVP working to help Vermont meet its scale targets in the All-Payer Model?*

Response: MVP is not yet participating in the all payer model with OneCare. MVP explored participation with OneCare in 2017 (for the 2018 plan year) but at that time did not have enough members to make an arrangement work. MVP is currently in negotiations with OneCare about participation for the 2019 plan year. If an agreement can be reached with OneCare, MVP intends to participate in 2019.

*6. How much of MVP's Vermont business is fee-for-service, vs. fixed payment?*

Response: 1.6% of 2017 VT Exchange claims were not processed under fee-for-service arrangements.

*7. Provide information, in dollars and % of claims, regarding the Fraud, Waste and Abuse recoverables.*

Response: MVP's Special Investigations Unit department recovered \$1,063,063 in claims for 2016 and \$973,373 for 2017. These amounts translate to less than 0.1% of claims across MVP's enterprise.

*8. Provide a Vermont-specific, weighted calculation of PMPM administrative costs that reflects the increased membership in Vermont, versus the declining membership in New York State.*

Response: MVP sought clarification to this question on July 25th, but we have not heard back from the Green Mountain Care Board and therefore do not have a response at this time. We will provide this analysis if clarity is brought to the question being asked.

*9. The filing refers to "provider incentives". Provide more detail about the incentives, and what quality measures they are linked to.*

Response: MVP makes provider incentive payments in Vermont through its participation in The Vermont Blueprint for Health program which is a nationally recognized initiative that designs community-led strategies for improving health and well-being. The Blueprint invests in and supports Patient Centered Medical Homes, Community Health Teams, Support and Services at Home (SASH), the Hub & Spoke program for opioid addiction treatment, the Women's Health Initiative, Self-Management and Healthier Living workshops, and a series of learning labs for providers and community teams. Insurers participating in the Blueprint program make quarterly PMPM payments to provider practices based on quality performance scores calculated by the program and distributed via rosters to each insurer.



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Quality scoring is based on performance in the following areas:

- Adolescent Well-Care Visits
- Developmental Screening in the First Three Years of Life
- Controlling High Blood Pressure
- Diabetes, Poor Control – HbA1c >9%

Community Health Team payments are also paid quarterly and are dictated by the program. These payments are based on market share, using claims-based patient attributions from insurers' statewide aggregate reports for Calendar Quarter 2018-Q1. The methodology used to calculate total payments due from insurers is described in the Blueprint Manual effective October 1, 2017.

*10. Provide any documents or testimony that MVP provided to the legislature regarding the delay of the individual mandate until 2020.*

Response: Susan Gretkowski testified in both the house and senate that MVP supported the individual mandate bill, and preferred it to go into effect in 2019, even without a penalty in place at that time. MVP did not give the legislature anything in writing about the effect in 2019 of not having a federal level penalty and not having the Vermont mandate go into effect until 2020. MVP evaluated and agreed with the GMCB's commissioned actuarial analysis done by Lewis and Ellis on this issue.

If you have any questions or require any additional information, please contact me at 518-386-7213 or Matt Lombardo at 518-388-2483.

Sincerely,

A handwritten signature in black ink, appearing to read "Eric Bachner".

Eric Bachner, ASA  
Leader, Actuarial, Commercial/Government Programs  
MVP Health Care