

STATE OF VERMONT
GREEN MOUNTAIN CARE BOARD

In re: MVP Health Plan, Inc.)
VT Health Connect 2021 Filing) GMCB-006-20rr
)

HCA ACTUARIAL QUESTIONS FOR MVP HEALTH PLAN, INC.

The Office of the Health Care Advocate (HCA) submits to the Green Mountain Care Board the below-listed actuarial questions for MVP Health Plan, Inc. (MVPHP) in the above-captioned matter.

1. Vermont Health Connect (VHC) has been responsible for billing consumers who purchased plans through VHC. The state had planned for carriers to take over billing these consumers starting in 2021. However, the planned switch was postponed. As in past years, VHC will bill these consumers in 2021.

Given the recent timing of the announcement that VHC will continue to be responsible for VHC enrollee billing in 2021, MVPHP may not have had time to update its assumptions before it submitted its VHC filing. Please specify whether your VHC filing assumed that MVPHP would take over billing for VHC in 2021 and list any changes to the filed rate that are now needed to reflect that VHC, and not MVPHP, will be responsible for billing VHC enrolled members in 2021.

2. Do cost sharing reduction plans take more administrative time than other QHPs and therefore represent a larger portion of administrative costs? If yes, does MVHPH silver stack these costs or spread it out among all plans?
3. Please provide an update of MVPH's PBM's actual to expected trend analysis for the last 4 years.
4. MVPHP has experienced large growth in its VHC population over the last few years, but we do not see any mention of this in the filing with the exception of the comment regarding medical trend data instability on page 6 of the actuarial memorandum. Please provide any assumptions built into your filing for the increase in membership or change in membership mix including the following:
 - a. Changes in pooling level, and
 - b. Impact from mix of individual or small group members.

5. Please confirm the accuracy of the below-provided table that lists proposed rates and rate components, allowed (ordered) rates and rate components, and actual rate components. If the cell is blank or you believe the value listed is incorrect, please provide the value that you believe is correct.

| Year Filed | | 2020 | 2019 | 2018 |
|---|----------|--------------|---------------|---------------|
| Docket # | | GMCB-006-20r | GMCB-005-19rr | GMCB-008-18rr |
| Members | | 36,980 | 30,887 | 25,223 |
| Average Rate Change | Proposed | 7.3% | 10.9% | 10.9% |
| | Allowed | NA | 10.1% | 6.6% |
| Allowed Medical Trend | Proposed | | 3.7% | 3.2% |
| | Allowed | NA | 4.7% | 3.4% |
| | Actual* | NA | NA | |
| Medical Unit Cost Trend | Proposed | | 3.7% | 3.2% |
| | Allowed | NA | 3.7% | 3.4% |
| | Actual* | NA | NA | |
| Medical Utilization | Proposed | 1% | 0% | 0% |
| | Allowed | NA | 1% | 0% |
| | Actual* | NA | NA | |
| Average Annual Allowed Rx Trend | Proposed | 7.3% | 8.2% | 13.3% |
| | Allowed | NA | 8.2% | 13.3% |
| | Actual* | NA | NA | |
| General Administrative Load (PMPM) | Proposed | \$43.75 | \$42.00 | \$39.80 |
| | Allowed | NA | \$42.00 | \$39.80 |
| | Actual* | NA | NA | |
| CTR | Proposed | 1.5% | 1.5% | 2% |
| | Allowed | NA | 1% | 1.5% |

* Actual is for the year that the rates are effective for. For instance, for the column "2018", the actual field should be populated with the experience of 2019 (the year the rates are effective for).

6. MVPHP is proposing an increase for pent-up demand from Covid-19. These are services which were expected to be performed in 2020. As such we would expect that the cost was built into the premium rates for 2020. Please demonstrate how this additional cost in 2021 premiums is not double charging members.
7. In your response to question 14 of Objection Letter 1, you state that your assumption of an 80% Covid-19 vaccine rate is "consistent with the paper published by Wakely." Please confirm that you are referring solely to the sentence in the last paragraph on page 11 of Wakely's March 30, 2020 Covid-19 Cost Scenario Modeling paper which begins, "For example..." If you believe the paper provides additional support for your assumption of an 80% vaccination rate beyond this sentence, please specify where this support is.
8. Vermont implemented a special enrollment period (SEP) in response to the Covid-19 crisis which is still open. Please provide the following to date:
 - a. the number of Vermonters who have enrolled in an MVPHP plan using this SEP, broken out by CSR plan and metal level, and
 - b. any impact this new member population had on age/demographic factors.

Dated at Montpelier, Vermont this 8th day of June, 2020.

s/ Kaili Kuiper
Kaili Kuiper, Esq.
Office of the Health Care Advocate
Vermont Legal Aid
56 College Street
Montpelier, VT 05602
Voice (802) 223-6377 ext. 329
kkuiper@vtlegalaid.org

s/ Eric Schultheis
Eric Schultheis, Ph.D., Esq.
Office of the Health Care Advocate
Vermont Legal Aid
56 College Street
Montpelier, VT 05602
Voice (802) 223-6377 ext. 325
eschultheis@vtlegalaid.org

CERTIFICATE OF SERVICE

I, Eric Schultheis, hereby certify that I have served the above Notice of Appearance on Michael Barber, Green Mountain Care Board General Counsel; Amerin Aborjaily, Green Mountain Care Board Staff Attorney; and Gary Karnedy, Ryan Long, and Michelle Bennett, representatives for MVP Health Plan, Inc., by electronic mail, return receipt requested, this 8th day of June, 2020.

s/ Eric Schultheis

Eric Schultheis, Ph.D., Esq.
Office of the Health Care Advocate
Vermont Legal Aid
56 College Street
Montpelier, VT 05602