Company Tracking #:

 State:
 VermontGMCB
 Filing Company:
 MVP Health Plan, Inc.

 TOI/Sub-TOI:
 HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.003B Large Group Only - POS

 Product Name:
 VT LG HMO 2021 POS Riders

 Project Name/Number:
 /

Filing at a Glance

Company:	MVP Health Plan, Inc.
Product Name:	VT LG HMO 2021 POS Riders
State:	VermontGMCB
TOI:	HOrg02G Group Health Organizations - Health Maintenance (HMO)
Sub-TOI:	HOrg02G.003B Large Group Only - POS
Filing Type:	GMCB Rate
Date Submitted:	02/12/2021
SERFF Tr Num:	MVPH-132718695
SERFF Status:	Pending State Action
State Tr Num:	
State Status:	
Co Tr Num:	
Effective	07/01/2021
Date Requested:	
Author(s):	Matt Lombardo, Christopher Pontiff, Julia Dorr
Reviewer(s):	Thomas Crompton (primary), David Dillon, Jacqueline Lee, Christina McLaughlin, Michael Barber, Laura Beliveau
Disposition Date:	
Disposition Status:	
Effective Date:	

State Filing Description:

Company Tracking #:

 State:
 VermontGMCB
 Filing Company:
 MVP Health Plan, Inc.

 TOI/Sub-TOI:
 HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.003B Large Group Only - POS

 Product Name:
 VT LG HMO 2021 POS Riders

 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: Employer	Overall Rate Impact: -3.4%
Filing Status Changed: 03/15/2021	
State Status Changed:	Deemer Date:
Created By: Christopher Pontiff	Submitted By: Christopher Pontiff
Corresponding Filing Tracking Number:	
PPACA: Non-Grandfathered Immed Mkt Reforms	

PPACA Notes: null Include Exchange Intentions:

No

Filing Description:

The proposed manual rates included within this filing are for employer groups with 100+ employees in the state of Vermont with coverage dates beginning between 7/1/2021 - 12/31/2021.

Company and Contact

Filing Contact Information

Matt Lombardo, 625 State Street Schenectady, NY 12305	mlombardo@mvphealthcare.com 518-388-2483 [Phone]	
Filing Company Information		
MVP Health Plan, Inc.	CoCode: 95521	State of Domicile: New York
625 State Street	Group Code: 1198	Company Type: Health
Schenectady, NY 12305	Group Name:	Maintenance Organization
(518) 388-2469 ext. [Phone]	FEIN Number: 14-1640868	State ID Number:

Company Tracking #:

 State:
 VermontGMCB
 Filing Company:
 MVP Health Plan, Inc.

 TOI/Sub-TOI:
 HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.003B Large Group Only - POS

 Product Name:
 VT LG HMO 2021 POS Riders

Project Name/Number: /

Filing Fees

State Fees

Fee Required?	No
Retaliatory?	No
Fee Explanation:	

SERFF Tracking #:	MVPH-132718695	State Tracking #:	C	Company Tracking #:	
State:	VermontGMCB		Filing Company:	MVP Health Plan, Inc.	
TOI/Sub-TOI:	HOrg02G Group H	lealth Organizations - Health Mainte	enance (HMO)/HOrg02G.003B Large Gi	roup Only - POS	
Product Name:	VT LG HMO 2021	VT LG HMO 2021 POS Riders			
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 Jacqueline Lee 03/11/2021 03/11/2021 Christopher Pontiff 03/15/2021 03/15/2021 Response Pending Response Jacqueline Lee Christopher Pontiff 02/26/2021 02/23/2021 02/23/2021 02/26/2021

Company Tracking #:

State:	VermontGMCB	Filing Company:	MVP Health Plan, Inc.
TOI/Sub-TOI:	HOrg02G Group Health Organizations - Hea - POS	alth Maintenance (HMO)/HOrg02	G.003B Large Group Only
Product Name:	VT LG HMO 2021 POS Riders		
Project Name/Number:	/		

Objection Letter

Objection Letter Status	Pending Response	
Objection Letter Date	03/11/2021	
Submitted Date	03/11/2021	
Respond By Date	03/17/2021	

Dear Matt Lombardo,

Introduction:

Please see the attached letter.

Conclusion:

Sincerely, Jacqueline Lee



Actuaries and Consultants

700 Central Expressway South Suite 550 Allen, TX 75013

972-850-0850 lewisellis.com



March 11, 2021

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

Re: MVP Health Plan, Inc. Company NAIC # 95521; FEIN # 14-1640868 2021 Large Group POS Rider Rate Filing SERFF Tracking # MVPH-132718695

Dear Mr. Lombardo:

Lewis & Ellis, Inc (L&E) has been retained by the Green Mountain Care Board ("GMCB") to review the above referenced Large Group product filing submitted on 02/12/2021. Upon review of the actuarial memorandum and related information submitted, the following additional information is needed:

- Regarding the response to question #2 of the previous objection letter this is not enough information to gauge the reasonableness of the rider premium loads provided. Please provide a quantitative summary of the base data used and a calculation of the premium loads including adjustments applied. Support should be in Excel format with working formulas.
- 2. Please provide the historically observed loss ratio for the riders in total for VT. We acknowledge that this block of business is not credible, however we are still requesting this data.
- 3. Please provide the historically observe loss ratio for the riders in total for NY, which was the basis for developing the VT rider premium loads. Additionally, please discuss any differences between the historically observed loss ratio of this block of business and the loss ratio targeted in the development of the rider premium loads.

Please respond as soon as possible, but no later than March 17, 2021.

Our review of filing will be placed in suspense pending your response. Contact me if you have any questions.

Sincerely,

Traci Hughes, ASA, MAAA

Traci Hughes, ASA, MAAA Consulting Actuary



LEWIS & ELLIS, INC. – ACTUARIES AND CONSULTANTS 700 South Central Expy, Ste 550, Allen, TX 75013 1-972-850-0850 <u>thughes@lewisellis.com</u>

Company Tracking #:

State:	VermontGMCB	Filing Company:	MVP Health Plan, Inc.
TOI/Sub-TOI:	HOrg02G Group Health Organizations - Hea - POS	alth Maintenance (HMO)/HOrg02	G.003B Large Group Only
Product Name:	VT LG HMO 2021 POS Riders		
Project Name/Number:	/		

Objection Letter

Objection Letter Status	Pending Response	
Objection Letter Date	02/23/2021	
Submitted Date	02/23/2021	
Respond By Date	03/02/2021	

Dear Matt Lombardo,

Introduction:

Please see the attached letter.

Conclusion:

Sincerely, Jacqueline Lee



Actuaries and Consultants

700 Central Expressway South Suite 550 Allen, TX 75013

972-850-0850 lewisellis.com



February 23, 2021

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

Re: MVP Health Plan, Inc. Company NAIC # 95521; FEIN # 14-1640868 2021 Large Group POS Rider Rate Filing SERFF Tracking # MVPH-132718695

Dear Mr. Lombardo:

Lewis & Ellis, Inc (L&E) has been retained by the Green Mountain Care Board ("GMCB") to review the above referenced Large Group product filing submitted on 02/12/2021. Upon review of the actuarial memorandum and related information submitted, the following additional information is needed:

- 1. Please provide quantitative support for the development of the average rate change of -3.4%. Support should be in Excel format with working formulas.
- 2. Please provide further quantitative and qualitative support for the development of the additional percentage of premium for the POS riders (i.e. what base data was used, what trend assumptions were used, what adjustments were made, etc.).

Please respond as soon as possible, but no later than March 2, 2021.

Our review of filing will be placed in suspense pending your response. Contact me if you have any questions.

Sincerely,

nni Hughe

Traci Hughes, ASA, MAAA Consulting Actuary



LEWIS & ELLIS, INC. – ACTUARIES AND CONSULTANTS 700 South Central Expy, Ste 550, Allen, TX 75013 1-972-850-0850 thughes@lewisellis.com

SERFF Tracking #:	MVPH-132718695	State Tracking #:	C	Company Tracking #:	
State:	VermontGMCB		Filing Company:	MVP Health Plan, Inc.	
TOI/Sub-TOI:	HOrg02G Group H	lealth Organizations - Health Mainte	enance (HMO)/HOrg02G.003B Large G	roup Only - POS	
Product Name:	VT LG HMO 2021	POS Riders			
Project Name/Number:	/				
Project Name/Number:	/				

Response Letter

Response Letter Status	Submitted to State
Response Letter Date	03/15/2021
Submitted Date	03/15/2021

Dear Thomas Crompton,

Introduction:

Response 1

Comments:

Please see the attached for the response to L&E Objection letter #2.

Changed Items:

Supporting Document Schedule Item Changes		
Satisfied - Item:	Objection 2	
Comments:		
Attachment(s):	Response to 2021 VT LG POS Objection #2.pdf Support for Objection 2 SERFF.xlsx	

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

Sincerely, Christopher Pontiff

SERFF Tracking #:	MVPH-132718695	State Tracking #:	(Company Tracking #:	
State:	VermontGMCB		Filing Company:	MVP Health Plan, Inc.	
TOI/Sub-TOI:	HOrg02G Group H	ealth Organizations - Health Mainte	enance (HMO)/HOrg02G.003B Large G	Group Only - POS	
Product Name:	VT LG HMO 2021	POS Riders			
Project Name/Number:	/				

Response Letter

Response Letter Status	Submitted to State
Response Letter Date	02/26/2021
Submitted Date	02/26/2021

Dear Thomas Crompton,

Introduction:

Response 1

Comments:

Please see the attached for the response to L&E Objection letter #1.

Changed Items:

Supporting Document Schedule Item Changes		
Satisfied - Item:	Objection 1	
Comments:		
Attachment(s):	Support for Objection 1.xlsx Response to 2021 VT LG POS Objection #1.pdf	

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

Sincerely, Christopher Pontiff

Company Tracking #:

 State:
 VermontGMCB
 Filing Company:
 MVP Health Plan, Inc.

 TOI/Sub-TOI:
 HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.003B Large Group Only - POS

 Product Name:
 VT LG HMO 2021 POS Riders

Project Name/Number: /

Post Submission Update Request Processed On 02/23/2021

Status:	Allowed
Created By:	Christopher Pontiff
Processed By:	Thomas Crompton
Comments:	This post submission update is allowed to change 6 group to 1 group, and 6 covered lives for the riders attached to the large group filing.

Company Rate Information:

Company Name: MVP Health Plan, Inc.

Field Name	Requested Change	Prior Value	
Number of Policy Holders Affected Program	I for this 1	6	
Product:	NEW		
Product Name	Preferred Suite HD POS		
Number of Covered Lives	6		
Product:	NEW		
Product Name	Preferred Suite POS		
Number of Covered Lives	1		

SERFF Tracking #:	MVPH-132718695	State Tracking #:	(Company Tracking #:	
State:	VermontGMCB		Filing Company:	MVP Health Plan, Inc.	
TOI/Sub-TOI:	HOrg02G Group I	Health Organizations - Health Main	tenance (HMO)/HOrg02G.003B Large G	Group Only - POS	
Product Name:	VT LG HMO 2021	1 POS Riders			
Project Name/Number:	/				
Rate Informat	ion				
Rate data applies	s to filing.				
Filing Method:			SERFF		
Rate Change Type	:		Decrease		
Overall Percentage	e of Last Rate Revi	ision:	0.000%		
Effective Date of L	ast Rate Revision:	:			
Filing Method of L	ast Filing:				
0-0	umber of Last Filir				

Company Rate Information								
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 Plan	, Inc. Decrease	-3.400%	-3.400%	\$-17	1	\$487	-3.400%	-3.400%

Company Tracking #:

 State:
 VermontGMCB
 Filing Company:
 MVP Health Plan, Inc.

 TOI/Sub-TOI:
 HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.003B Large Group Only - POS

 Product Name:
 VT LG HMO 2021 POS Riders

 Project Name/Number:
 /

Rate Review Detail

COMPANY:

Company Name:	MVP Health Plan, Inc.
HHS Issuer Id:	92082

PRODUCTS:

Product Name	HIOS Product ID	HIOS Submission ID	Number of Covered Lives	
Preferred Suite HD POS				6
Preferred Suite POS				1

Trend Factors:

FORMS:

New Policy Forms:	VT POS COC
Affected Forms:	
Other Affected Forms:	

REQUESTED RATE CHANGE INFORMATION:

Semi-annual
126
None
Min: -3.4 Max: -3.4 Avg: -3.4

PRIOR RATE:

Total Earned Premium:	503.57
Total Incurred Claims:	0.00
Annual \$:	Min: 13.99 Max: 13.99 Avg: 13.99

REQUESTED RATE:

Projected Earned Premium:	486.66
Projected Incurred Claims:	0.00
Annual \$:	Min: 13.52 Max: 13.52 Avg: 13.52

SERFF Tracking #:	MVPH-132718695State Tracking #:Company Tracking #:		Company Tracking #:		
State:	VermontGMCB		Filing Company:	MVP Health Plan, Inc.	
TOI/Sub-TOI:	HOrg02G Group H	HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.003B Large Group Only - POS			
Product Name:	VT LG HMO 2021 I	POS Riders			
Project Name/Number:	/				

Supporting Document Schedules

Satisfied - Item:	Actuarial Memorandum
Comments:	
Attachment(s):	2021 ACT MEMO HMO Large Group.pdf VT LG HMO POS 2021 Rate Filing SERFF.pdf VT LG HMO POS 2021 Rate Filing SERFF.xlsx
Item Status:	
Status Date:	
Bypassed - Item:	Actuarial Memorandum and Certifications
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	
Satisfied - Item:	Civil Union Rating Requirements
Comments:	MVP's forms satisfy 8 V.S.A. § 4724.
Attachment(s):	
Item Status:	
Status Date:	
Bypassed - Item:	Consumer Disclosure Form
Bypass Reason:	N/A
Attachment(s):	
Item Status:	
Status Date:	
Satisfied - Item:	Filing Compliance Certification
Comments:	
Attachment(s):	Certification of Compliance - VT.pdf
Item Status:	
Status Date:	
Bypassed - Item:	Third Party Filing Authorization
Bypass Reason:	N/A
Attachment(s):	

SERFF Tracking #:	MVPH-132718695	State Tracking #:	C	Company Tracking #:	
State: TOI/Sub-TOI: Product Name: Project Name/Number:	VermontGMCB HOrg02G Group H VT LG HMO 2021 /		<i>Filing Company:</i> tenance (HMO)/HOrg02G.003B Large G	MVP Health Plan, Inc. roup Only - POS	
-	,				
Item Status: Status Date:					
Bypassed - Item:	Un	ified Rate Review Template	9		
Bypass Reason:	N/#	4			
Attachment(s):					
Item Status:					
Status Date:					
Satisfied - Item:	Ob	jection 1			
Comments:					
Attachment(s):	Su Re	pport for Objection 1.xlsx sponse to 2021 VT LG POS	S Objection #1.pdf		
Item Status:		-			
Status Date:					
Satisfied - Item:	Ob	jection 2			
Comments:		•			
Attachment(s):	Re Su	sponse to 2021 VT LG POS pport for Objection 2 SERF	S Objection #2.pdf F.xlsx		
Item Status:					
Status Date:					

SERFF Tracking #:	MVPH-132718695	State Tracking #:	Company Tracking #:		
State:	VermontGMCB		Filing Company:	MVP Health Plan, Inc.	
TOI/Sub-TOI:	HOrg02G Group H	lealth Organizations - Health Main	tenance (HMO)/HOrg02G.003B Large Gi	roup Only - POS	
Product Name:	VT LG HMO 2021	POS Riders			
Project Name/Number:	/				

Attachment VT LG HMO POS 2021 Rate Filing SERFF.xlsx is not a PDF document and cannot be reproduced here.

Attachment Support for Objection 1.xlsx is not a PDF document and cannot be reproduced here.

Attachment Support for Objection 2 SERFF.xlsx is not a PDF document and cannot be reproduced here.



ACTUARIAL MEMORANDUM

2021 Large Group MVPHP Manual Rate Filing

Purpose of Filing

The purpose of this filing is to demonstrate the development of manual rates in support of MVP Health Plan's (MVPHP) Large Group POS rider portfolio and seek approval of the manual rates used to develop group specific premium rates. The premium rates included in this filing are for group effective dates between 7/1/2021 and 12/31/2021. The rates are effective for 6 months. This rate filing has been prepared to satisfy the requirements of 8 V.S.A § 5104 and is not intended to be used for other purposes.

MVP is proposing these point of service (POS) riders to provide out-of-network (OON) coverage as a supplement to the in-network (INN) coverage. The in-network plans can be found in SERFF filing number MVPH-132497714.

Scope of Filing

As of January 2021, there are 6 members enrolled in MVPHP's large group block of business with OON coverage (via combined HMO/HDHMO products).

All the riders in this filing are a percentage of the manual rate. MVP is not proposing to change any of the manual rates in this filing.

Actuarial Certification

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

(Im Part

Chris Pontiff, ASA Leader, Actuarial MVP Health Care

<u>02/12/2021</u> Date



MVP Health Care -- 2021 LG POS MVPHP Rate Filing

Large Group VT POS MVPHP Rate Filing For Effective Dates Beginning Between July 1, 2021 - December 31, 2021

Exhibit 1 -- Medical Rider Rates

Exhibit 1 -- Medical Riders

Large Group VT POS MVPHP Rate Filing For Effective Dates Beginning Between July 1, 2021 - December 31, 2021

HMO Rider	Description	Product Type	Net Required Revenue	Quarterly Change	Annual Manual Rate Change
SV3HMB101L	\$1,000 Deductible / 40% Coinsurance / \$6,650 OOP Max	POS	3.6%	0.0%	0.0%
SV3HMB102L	\$2,000 Deductible / 40% Coinsurance / \$6,650 OOP Max	POS	3.3%	0.0%	0.0%
SV3HDH102L	\$2,000 Deductible / 40% Coinsurance / \$6,650 OOP Max	POS	3.3%	0.0%	0.0%
SV3HMB103L	\$4,000 Deductible / 40% Coinsurance / \$8,000 OOP Max	POS	2.8%	0.0%	0.0%
SV3HDH103L	\$4,000 Deductible / 40% Coinsurance / \$8,000 OOP Max	POS	2.8%	0.0%	0.0%
SV3HMB104L	\$6,500 Deductible / 40% Coinsurance / \$13,000 OOP Max	POS	2.0%	0.0%	0.0%
SV3HDH104L	\$6,500 Deductible / 40% Coinsurance / \$13,000 OOP Max	POS	2.0%	0.0%	0.0%
SV3HMB105L	\$8,000 Deductible / 40% Coinsurance / \$16,000 OOP Max	POS	1.6%	0.0%	0.0%
SV3HDH105L	\$8,000 Deductible / 40% Coinsurance / \$16,000 OOP Max	POS	1.6%	0.0%	0.0%

Certification of Compliance

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

Print Name: Karla Austen Title: Chief Financial Officer & Executive Vice President

Signature: tu

Date: 02/12/2021



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

February 26, 2021

Ms. Traci Hughes, ASA, MAAA Lewis & Ellis, Inc. 700 Central Expressway South, Suite 550 Allen, TX 75013

Re: : MVP Health Plan, Inc. Company NAIC # 95521; FEIN # 14-1640868 2021 Large Group POS Rider Rate Filing SERFF Tracking # MVPH-132718695

Dear Ms. Hughes:

This letter is in response to your correspondence received 02/23/21 regarding the above-mentioned rate filing. The responses to your questions are provided below.

1. Please provide quantitative support for the development of the average rate change of-3.4%. Support should be in Excel format with working formulas.

Response: Please see the attached excel document that shows the development of the -3.4% rate change.

2. Please provide further quantitative and qualitative support for the development of the additional percentage of premium for the POS riders (i.e. what base data was used, what trend assumptions were used, what adjustments were made, etc.).

Response: MVP does not have a credible block in VT with OON benefits. As a result, MVP used its NY LG OON block of over 17,000 members to determine the average OON utilization as a percentage of INN utilization and compute the average OON load. MVP then used its benefit relativity model to determine the relativity of OON benefits to one another normalized back to the OON % utilization in the NY block.

If you have any questions or require any additional information, please contact me at cpontiff@mvphealthcare.com.

Sincerely,

(Im Part

Chris Pontiff, ASA Leader, Actuarial, Commercial MVP Health Care



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

March 15, 2021

Ms. Traci Hughes, ASA, MAAA Lewis & Ellis, Inc. 700 Central Expressway South, Suite 550 Allen, TX 75013

Re: MVP Health Plan, Inc. Company NAIC # 95521; FEIN # 14-1640868 2021 Large Group POS Rider Rate Filing SERFF Tracking # MVPH-132718695

Dear Ms. Hughes:

This letter is in response to your correspondence received 03/11/21 regarding the above-mentioned rate filing. The responses to your questions are provided below.

1. Regarding the response to question #2 of the previous objection letter – this is not enough information to gauge the reasonableness of the rider premium loads provided. Please provide a quantitative summary of the base data used and a calculation of the premium loads including adjustments applied. Support should be in Excel format with working formulas.

Response: Please see the attached excel document which shows the 2018 and 2019 MLRs of the rider premium loads for our New York PPO block which is the basis of the rider load derivation. MVP realized a 91.2% loss ratio is 2018 and a 71.6% loss ratio in 2019 for a two-year average loss ratio of 80.4%; the target loss ratio was 82.9% in 2018 and 83.9% in 2019. Based on an analysis from MVP's informatics team, out of network claims were 1.8 times more expensive than the same claim performed with an in-network provider.

Out of network claims are traditionally more severe and therefore create a wider range of potential outcomes. Due to the volatility in OON claims from year-to-year, MVP did not modify the rider loads being charged for 2021 based on the loss ratios observed in 2018/2019 relative to expectations.

2. Please provide the historically observed loss ratio for the riders in total for VT. We acknowledge that this block of business is not credible, however we are still requesting this data.

Response: MVP has had a loss ratio of 0% for these riders over the past 3 years. The annual premium MVP receives for these riders is ~\$1000 and one out of network claim incurred will likely create a loss ratio that is exceptionally high due to this block having 6 members as of the time of this filing.

3. Please provide the historically observed loss ratio for the riders in total for NY, which was the basis for developing the VT rider premium loads. Additionally, please discuss any differences between the historically observed loss ratio of this block of business and the loss ratio targeted in the development of the rider premium loads.

Response: Please see the response to Question #1.



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

If you have any questions or require any additional information, please contact me at cpontiff@mvphealthcare.com.

Sincerely,

Un Part

Chris Pontiff, ASA Leader, Actuarial, Commercial MVP Health Care