

wording of item 2 of the Request (asking for “information on how the proposed rate increases would impact Vermont households”) is ambiguous and, unlike items 1 and 3, could be read as a request for L&E to define affordability. The HCA therefore asks the Board issue to an order clarifying that it only seeks data and factual information and specifying precisely the information requested in item 2. *Id.* at 2-3.

Nowhere in the Request did the Board ask L&E to provide an opinion on the meaning of “affordability” as that term is used in 8 V.S.A. § 4062 or on whether the proposed rates are affordable. Further, as MVP correctly notes, L&E has consistently declined to opine on whether rates are affordable. MVP Motion at 3-4. It is therefore hard to understand the Parties’ anticipation that L&E might provide such opinions in response to the Request. Nevertheless, in recognition of some open-ended and vague language in the Request and the concerns expressed by the Parties, the Board has revised the Request to make it plain that the response should be comprised solely of data and factual information and should not include any opinion or legal conclusions regarding affordability. The revised Request is also significantly more detailed and should give the Parties clear notice of the types of data and information that will be produced by L&E so that they can, if they desire, prepare rebuttal evidence. The revised request is included as an attachment to this Order.

There is no reason to think the actuaries at L&E are not qualified to provide the information sought by the Board in the revised request or that MVP would need to retain an expert economist to rebut this information. The data being requested appears to involve relatively straightforward mathematical calculations using data that can be found in the rate filings or that are publicly available (e.g., federal poverty levels and applicable percentages used to calculate federal premium tax credits). Similar types of data have been provided by the Parties in prior filings. *See, e.g., In re MVP 2022 Individual and Small Group Rate Filings*, GMCB-007-21rr & GMCB-008-21rr, MVP Response to Post-Hearing Questions (July 27, 2021), 6 (presenting premium increases for different household income levels net of premium tax credits); *In re MVP 2023 Individual and Small Group Rate Filings*, GMCB-005-22rr & GMCB-006-22rr, HCA Post-Hearing Memo (July 28, 2022), 4 (graphing premium growth over time in relation wage and GDP growth and calculating premiums as a percentage of income for different household compositions at 401% of the federal poverty level). The requested data is also relevant to the Board’s review and may help the Board find the most appropriate balance among the competing rate review criteria. *See In re MVP 2023 Individual*

and Small Group Rate Filings, GMCB-005-22rr & GMCB-006-22rr, Decision and Order (August 4, 2022), 16 (“Neither our statute nor our rule specifies how much weight we should give to any one factor, and we seek to find the most appropriate balance we can amongst them based on the facts and circumstances before us.”)

By revising the request, the Board has effectively given MVP some of the relief it seeks; the revised request makes clear that L&E is not being asked to opine on the meaning of affordability under 8 V.S.A. § 4062 or whether the proposed rates are affordable. For reasons stated above, MVP’s Motion is denied to the extent that it seeks to strike L&E’s response to the revised request or to exclude L&E from testifying at the hearing about its response.

Dated this 15th day of June 2023.

/s/ Michael Barber
Michael Barber
General Counsel

DELIVERED ELECTRONICALLY

June 15, 2023

Traci Hughes
Vice President & Senior Consulting Actuary
Lewis & Ellis, Inc.

Dear Traci,

On May 22, 2023, I sent you a letter on behalf of the Green Mountain Care Board requesting that Lewis & Ellis, Inc. (L&E) provide the Board with certain information in MVP Health Plan's 2024 individual and small group rate filings (Docket Nos. GMCB-004-23rr & GMCB-005-23rr). I am writing today to revise this request.

The Board requests that L&E provide the following specific information:

- 1) Changes in the unsubsidized single and family premiums for the lowest cost plan offered by MVP at each metal level in the individual market from 2019 through 2024 (assuming MVP's premiums are approved as filed).
- 2) For an individual and a family of four with household incomes equal to 140%, 200%, 300%, 400%, and 500% of the federal poverty level, the percentage of household income required to purchase the lowest cost plan offered by MVP at each metal level in the individual market from 2019 through 2024 (assuming both carriers' filings are approved as submitted).
- 3) For an individual and a family of four with household incomes equal to 140%, 200%, 300%, 400%, and 500% of the federal poverty level, the sum of the net premium and medical deductible for the lowest cost plan offered by MVP at each metal level in the individual market from 2019 through 2024 (assuming both carriers' filings are approved as submitted).
- 4) Changes in the single and family premiums for the lowest cost plan offered by MVP at each metal level in the small group market from 2019 through 2024 (assuming MVP's premiums are approved as filed).

For items 2 and 3 above, the Board would also like to see median Vermont incomes if possible.

The Board is not requesting an opinion from L&E on the meaning of "affordability" or whether the rates proposed in the filings are affordable.

As stated previously, please provide the requested information no later than July 5, 2023.



Thank you.

Sincerely,

/s/ Michael Barber

General Counsel
Green Mountain Care Board

Cc: Gary Karnedy
Ryan Long
Eric Schultheis
Charles Becker
Jackie Lee
Laura Beliveau
Jennifer DaPolito
Geoffrey Battista

