

STATE OF VERMONT  
GREEN MOUNTAIN CARE BOARD

In re: MVP Health Plan, Inc. 2024 Individual Market Rate Filing	) ) ) ) )	GMCB-004-23rr  SERFF No. MVPH-133660955
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In re: MVP Health Plan, Inc. 2024 Small Group Market Rate Filing	) ) )	GMCB-005-23rr  SERFF No. MVPH-133660956

Dear Mr. Karnedy and Mr. Long,

The Green Mountain Care Board hereby requests that MVP Health Plan, Inc. (MVP) provide the following information to assist with the Board’s review of the above-referenced filings. Please provide responses to all questions by June 21, 2023.

1. In our decision last year, MVP was ordered to include “detailed information on the efforts it has taken to encourage enrollment through VHC and the effectiveness of these efforts” in its 2024 individual rate filing. Provide this information.
2. Provide MVP’s 2022 Supplemental Health Care Exhibit.
3. For the most recent year for which data are available (please specify), provide the dollar value of payments and the percentages of payments made by MVP under each alternative payment model category below across MVP’s individual and small group plans and identify the relevant program or payment arrangement(s).

(YEAR)			
HCP-LAN Category	Program or Payment Arrangement(s)	\$ value	% of total
Category 1: FFS-No link to Quality and Value			
1: FFS-No link to Quality & Value			
Category 2: FFS-Link to Quality and Value			
2A: Foundational payments for infrastructure & operations			
2B: Pay for reporting			
2C: Pay for performance			
Category 3: APMs Built on FFS Architecture			
3A: APMs with shared savings			

3B: APMs with shared savings and downside risk			
3N: Risk based payments NOT linked to quality			
Category 4: Population-Based Payment			
4A: Condition-specific population-based payment			
4B: Comprehensive population-based payment			
<i>4B with reconciliation to FFS and ultimate accountability for TCOC</i>			
<i>4B with NO reconciliation to FFS</i>			
4C: Integrated finance & delivery system			
4N: Capitated payments NOT linked to quality			

4. Explain whether MVP observed an increase in cancellations or shifts in enrollment by metal level due to the high premium increases in 2023.
5. Describe how MVP prospectively assesses its solvency and explain how the projected contribution to surplus from each filing and MVP’s prospective assessment of solvency would be impacted if the rates were reduced by 1%, 2%, 3%, 4%, and 5% (assuming no corresponding decrease in costs).
6. The Board is interested in better understanding how MVP reimburses non-hospital-affiliated providers in its service area and what MVP has assumed in the filings regarding reimbursement increases for these providers. To that end, please
  - a. Describe the mechanisms by which MVP reimburses non-hospital-affiliated providers. For example, does MVP use fee schedules? If so, how many fee schedules does MVP maintain and what types of services or providers does each apply to?
  - b. Describe the magnitude and timing of any reimbursement increases for non-hospital-affiliated providers expected between now and the end of 2024, identify where in the filing these increases are reflected, and explain whether the increases will be across-the-board or targeted to certain providers or codes.
  - c. How does MVP define each provider type and how does this definition relate to the “professional” premium category of the URRT?
7. Explain how, if at all, MVP assesses the equity and sufficiency of payments across care settings.
8. The Board is interested in understanding how charge increases allowed in the individual and small group filings compare to actual charge increases implemented by MVP. To that end, please provide, in a table format for each year since 2014:

- a. The charge increases for non-hospital-affiliated providers allowed in MVP's individual and small group filings and the actual increases implemented by MVP. Explain any variances.
- b. The charge increases for hospitals allowed in the rate filing and the actual increases implemented by MVP. Explain any variances.

Sincerely,

s/ Michael Barber

Michael Barber

General Counsel, Green Mountain Care Board

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