



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

July 3, 2024

Michael Barber  
General Counsel  
Green Mountain Care Board

Re: 2025 Vermont Exchange Rate Filing - Individual  
SERFF Tracking #: MVPH-134081032  
2025 Vermont Exchange Rate Filing – Small Group  
SERFF Tracking #: MVPH-134081005

Dear Mr. Barber:

This letter is in response to your correspondence received 06/25/24 regarding the above-mentioned rate filing. The responses to your questions are provided below.

*1. Please provide more information about the Well-Being Reimbursement program described on page 4 of the Actuarial Memorandum. What are the categories for which members can receive reimbursement? What method has MVP chosen to allow members to submit for reimbursement? Provide any evidence MVP possesses showing that the program is improving member health and lowering claims costs overall.*

Response: MVP's Well-Being Reimbursement program offers up to \$600 per Subscriber per year in reimbursements for items that will improve the health of our members in four different categories. The Social category includes things such as registration fees for walks/runs. The Surroundings category includes items such as ergonomic equipment to improve posture while working. The Physical category includes things such as healthy weight support programs, gym memberships and health monitoring devices. The Mind & Spirit category includes items such as stress-reduction classes and mindfulness apps. These show a commitment by MVP to improve the health of its members in all facets of their life.

Subscribers can submit for reimbursement by downloading and filling out the "Well-Being Reimbursement Request" form found in their member portal on <https://www.mvphealthcare.com/> and submitting the form and receipt(s) either by mail or email.

There are too many overlapping cost drivers that make it impossible to measure the claim cost impact of wellness. While there is no direct data to support the claim that the program is lowering claim cost overall, it is designed to incent behavioral changes that will improve the health of our members and reduce the morbidity of chronic conditions and reduce complications of those conditions.

*2. Please provide additional information about MVP's current claims edits and payment policies that will be removed or restricted as a result of Act No. 111 of 2024 (H.766) and describe in greater detail how MVP determined the impact of removing or restricting these claims edits and payment policies. For each edit or policy (or category thereof), provide the corresponding dollar amount, ensuring that the total equals the billed charges amount mentioned in MVP's response to Objection 1, Question 16.*



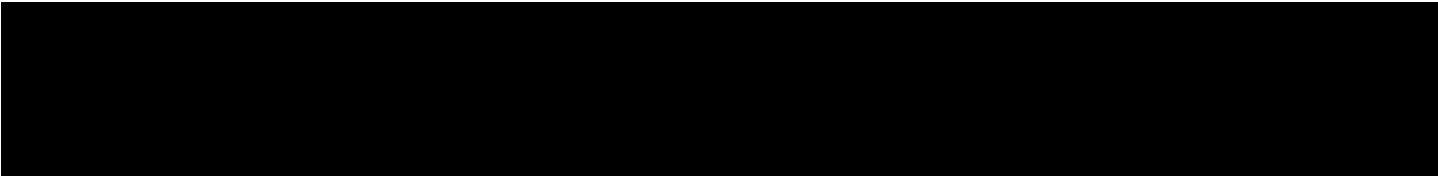
625 State Street, PO Box 2207  
Schenectady, NY 12301-2207  
[mvphhealthcare.com](http://mvphhealthcare.com)

Response: The passing and subsequent signing of H.890 delays implementation of some of the policies that were referred to in Objection #1, Question 16. For the most up-to-date information regarding the portions of H.766 that impact the 2025 rate filings, please see MVP's response to Objection #5.

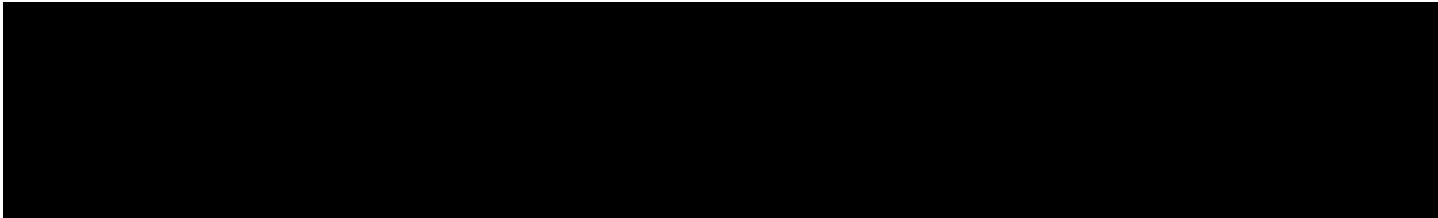
*3. Is the \$25,000,000 surplus note issued on 02/20/2024 to MVP HSC (2023 MVPHP Annual Statement at 26.6) included in MVPHP's "TOTAL Adjusted Capital" amount listed on line 14 of page 29?*

Response: Yes, the surplus is included.

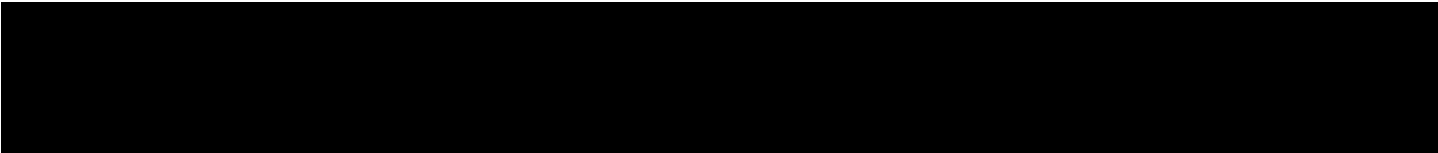
*4. Confirm that MVP has renewed its contract with CVS/Caremark for pharmacy benefit management (PBM) services and state when the new contract term ends. Did MVP negotiate with CVS/Caremark over the terms of the new contract? If so, please describe any contract enhancements that MVP received as a result of the negotiations and demonstrate the impact of those enhancements on the filed rates.*



*5. Prior to renewing the contract with CVS/Caremark, did MVP:*  
*a. audit CVS/Caremark's performance under the prior contract? If so, describe all aspects of the audit.*  
*b. perform any market comparison checks to evaluate whether MVP is receiving the best possible terms for PBM services? If so, thoroughly describe the process, including timelines, evaluation criteria, and benchmarks.*  
*c. solicit or receive bids or outreach from any PBM other than CVS/Caremark?*



*6. In general, what are the "known contract changes for 2024 and 2025" that are reflected in the Rx trend factors? What is your best estimate of how those contract changes impacted the Rx unit cost trends in the filings?*





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

7. Has MVP evaluated CVS Caremark's TrueCost program, which CVS describes as offering a deeper level of transparency" and "the same or better value," to determine whether the program would benefit MVP's members? If so, what were MVP's findings?

8. Does MVP acknowledge that some of its members are purchasing prescriptions "off benefit" through services such as GoodRx or Mark Cuban Cost Plus Drug Company, because, in many cases, those members are able to obtain lower prices "off benefit" than they receive through their benefit plan? Does MVP or its PBM have hard data on the amount of such "off benefit" spending by its Vermont QHP membership? If so, please provide the data. What does MVP see as the plusses and minuses of "off benefit" drug spending?

Response: We do not have data regarding "off benefit" drug spending by our Vermont QHP membership. We do not know how many members, if any, are purchasing prescriptions using these services, nor do we know of any impact to cost or health status related to this spending. Because of this, any discussion of the "plusses and minuses" of this spending would lead to speculation, and MVP does not have any comment.

If you have any questions or require any additional information, please contact me at [ebachner@mvphealthcare.com](mailto:ebachner@mvphealthcare.com).

Sincerely,

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

Eric Bachner, ASA  
Director, Commercial Market & Valuation Actuary  
MVP Health Care, Inc.