



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.

A handwritten signature in black ink, appearing to read "Chris Pontiff", with a stylized flourish at the end.

Chris Pontiff, ASA
Leader, Actuarial
MVP Health Care

02/12/2021
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%