

Exhibit #3 Narrative Summary

Company Name: MVP Health Plan, Inc.
NAIC Code: 95521
SERFF Tracking #: MVPH-127319567

MVP Health Plan offers HMO (limited network) Health Insurance products to both Large and Small employer groups and Sole Proprietors. MVP has filed with the NYS Insurance Department a request to change the current premium rates it charges to groups for policy effective dates between 1/1/2012 and 12/1/12. The requested increases for the Base Medical plan offerings can be summarized as follows:

Large Groups all Renewal dates in 2012

Products with primary care and specialty care office visit copayments \$20 or less

Rochester Rate Region: Rate Increase Range: 8.0%-13.8%

All other Rate Regions: Rate Increase Range: 3.6%-9.2%

Products with primary care and specialty care office visit copayments equal to \$25

Rochester Rate Region: Rate Increase Range: 15.6%-16.2%

All other Rate Regions: Rate Increase Range: 10.9%-11.4%

Products with primary care office visits copayments \$25 or greater and specialty care office visit copayments \$30 or greater

Rochester Rate Region: Rate Increase Range: 9.5%-13.7%

All other Rate Regions: Rate Increase Range: 5.1%-9.1%

Small Groups all renewal dates in 2012

All products

Rochester Rate Region: Rate Increase Range: 12.1%-16%

All other Rate Regions: Rate Increase Range: 6.4%-11.5%

The total number of covered members affected by this rate adjustment filing is approximately 106,852.

Premium rate increases in general are necessary due to increases in the total cost of medical services provided to MVP's insured members. The increasing cost of health care is the primary reason for MVP's proposed rate increases.

Several factors are responsible for these increased health care costs including, but not limited to, increases in the use of medical services, increases in provider (hospital and physician) charges for covered services, increased usage and cost of covered prescription drugs and increases in the cost of other covered medical services.

Increases in the use of care can be attributed to an aging population, a withdrawal of healthy individuals from the insurance marketplace, and an overall decline in the health status of the insured population.

The increases outlined above are intended to match as closely as possible MVP's expected cost by product with the premium received by product.

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Other factors contributing to the total cost of health insurance:

While not a component of our proposed rate increases, several other factors contribute to the total cost of health insurance. These include, state taxes, surcharges and assessments paid by health insurers, state coverage mandates and expansion of coverage and benefits due to the Federal health care reform law. A sustainable health insurance system requires health care cost containment, reform of the health care delivery system and recognition of the impact that benefit expansions and taxes have on the overall cost of health benefits.