

Exhibit 13 Part I – Narrative Summary

Company Name: MVP Health Plan, Inc.

NAIC Code: 56184

SERFF Tracking #: MVPH-129573000

Market Segment: Individuals On Exchange

Generally, once a year MVP Health Care files for a change to the current premium rates on file for their products based on a review of the adequacy of the rate level. Premiums need to be sufficient to cover all medical and pharmacy claims submitted from the covered members, as well as cover the cost of operations and New York state statutory reserve requirements. We are requesting rate increases due to various factors, including: rising prices for medical services and prescription drugs, rising usage of medical services and prescription drugs, advances in medical technology, new state and federal benefit coverage mandates and a generally aging insured population. In addition to these factors, proposed premium rate changes will reflect expected pricing corrections needed to current rates.

Some assumptions that MVP made in setting premium rates for 2014 need significant modification, including the cost of care in the NYC rate region, the value of certain benefit plans and the expected impact of the Federal Risk Transfer Program between carriers. Another much less significant driver of premium rate increases for 2015 is the new benefit mandates for Mental Health and Substance Abuse coverage.

EXHIBIT 13: NARRATIVE SUMMARY AND NUMERICAL SUMMARY

Company MVP Health Plan, Inc.
NAIC Code: 95521
SERFF Tracking #: MVPH-129573000
Market Segment: Individuals On Exchange

- 1) Please complete this Narrative Summary and Numerical Summary for each market segment for which you are submitted a rate filing.
- 2) The Narrative Summary must be in plain English and should clearly and simply explain the reasons for the requested rate adjustment.
- 3) The purpose of the Narrative Summary is to provide a written explanation to the company's policyholders to help them understand the reasons why a rate increase is needed.
- 4) The purpose of the Numerical Summary is to provide a clear and simple overview of the requested rate adjustment.
- 5) These Summaries will be public documents and will be posted on DFS's website and furnished by DFS to the public upon request.
- 6) The company should submit these Summaries to DFS ten (10) days before submitting a rate adjustment filing.
- 7) A draft of these Summaries and of the Initial Notice must be included in a "Prior Approval Prefiling" submitted to DFS via SERFF.
- 8) Once reviewed by DFS, these Summaries must be posted to a location on its website that is publicly available and accessible without the need for a user ID/password.
- 9) Links should be provided on key pages of the company's website so that the information may be easily located.
- 10) Any change(s) made to the Narrative Summary/Numerical Summary subsequent to the posting must be submitted to DFS with the specific change(s) identified.
- 11) This exhibit must be submitted as an Excel file and as a PDF file.

A. Average 2014 and 2015 Premium Rates:

- 1) Average Monthly Premium Rates for Individual Only on Individual Plans and First Quarter Rates for Employee Only on Small Group Plans.
- 2) Premium Rates are Average Arithmetic Premium Rates for All Plans Combined and for all Regions combined.
- 3) Premium Rates are with Through Age 29, with Domestic Partner and with Family Planning Coverage.
- 4) Premium Rates for 2015 should be Consistent with the Premium Rates reflected in Exhibit 23.
- 5) Premium Rates for 2014 should be on a Consistent Basis as the Premium Rates for 2015.

	Platinum	Gold	Silver	Bronze	Catastrophic ⁽¹⁾
2014 Premium Rates	\$603.85	\$479.86	\$403.54	\$321.96	166.99
2015 Premium Rates	\$647.08	\$523.73	\$446.07	\$362.58	183.55

EXHIBIT 13: NARRATIVE SUMMARY AND NUMERICAL SUMMARY

Company	MVP Health Plan, Inc.
NAIC Code:	95521
SERFF Tracking #:	MVPH-129573000
Market Segment:	Individuals On Exchange

B. Weighted Average Annual Percentage Requested Adjustments [Per Exhibit 14A for Individual Plans and Exhibit 14B for Small Group Plans]*:

	2014 to 2015
Requested Rate Adjustment	19.11%

C. Weighted Average Annual Percentage Requested Adjustments for each of the Past Three Years [Per Exhibits 4A-4D] [If Applicable]*:

	2011 to 2012	2012 to 2013	2013 to 2014
Average Rate Adjustment	N/A	N/A	N/A

D. Average Medical Loss Ratios [MLR] for All Policies Impacted [Ratios of Incurred Claims to Earned Premiums] [If Applicable]*:

	2011	2012	2013
MLR	N/A	N/A	N/A

E. Claim Trend Rates and Average Ratios to Earned Premiums [Per Exhibit 19 for 2014-15 and Comparable Exhibits for 2013] [If Applicable]*:

	2013	2014	2015
Annual Claim Trend Rates	N/A	6.53%	5.18%
Expense Ratios	N/A	15.82%	14.48%
Pre Tax Profit Ratios	N/A	2.00%	2.00%

* If product was not offered in a particular year, indicate "N/A" in the applicable box.

(1) Catastrophic Premium Rates are with Domestic Partner and with Family Planning Coverage; Dependent Through 29 is Not an Option. None of the premiums in section A reflect the optional unlimited skilled nursing facility benefit which is available only Off Exchange.