

State: New York **Filing Company:** MVP Health Plan, Inc.
TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.003C Large Group Only
- HMO
Product Name: 2015 NY Large HMO Rate Submission
Project Name/Number: /

Filing at a Glance

Company: MVP Health Plan, Inc.
Product Name: 2015 NY Large HMO Rate Submission
State: New York
TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)
Sub-TOI: HOrg02G.003C Large Group Only - HMO
Filing Type: Rate Adjustment pursuant to Section 4308(c)
Date Submitted: 07/21/2014
SERFF Tr Num: MVPH-129596770
SERFF Status: Assigned
State Tr Num: 2014070116
State Status:
Co Tr Num:

Implementation: 01/01/2015
Date Requested:
Author(s): 
Reviewer(s): 
Disposition Date:
Disposition Status:
Implementation Date:

State Filing Description:

State: New York **Filing Company:** MVP Health Plan, Inc.
TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.003C Large Group Only
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General Information

Project Name:	Status of Filing in Domicile:
Project Number:	Date Approved in Domicile:
Requested Filing Mode: Review & Approval	Domicile Status Comments:
Explanation for Combination/Other:	Market Type: Group
Submission Type: New Submission	Group Market Size: Large
Group Market Type: Employer	Overall Rate Impact:
Filing Status Changed: 07/22/2014	
State Status Changed:	Deemer Date:
Created By: [REDACTED]	Submitted By: [REDACTED]
Corresponding Filing Tracking Number:	

PPACA: Not PPACA-Related

PPACA Notes: null

Include Exchange Intentions: No

Filing Description:

This is the 2015 rate submission for large community rated employer groups

Company and Contact

Filing Contact Information

[REDACTED]	[REDACTED]

Filing Company Information

MVP Health Plan, Inc.	CoCode: 95521	State of Domicile: New York
625 State Street	Group Code: 1198	Company Type: Health
Schenectady, NY 12305	Group Name:	Maintenance Organization
[REDACTED]	FEIN Number: 14-1640868	State ID Number:

Filing Fees

Fee Required? No
 Retaliatory? No

Fee Explanation:

State Specific

1. Is a parallel product being submitted for another issuing entity of the same parent organization? Yes/No (If Yes, enter name of other entity, submission date, and SERFF Tracking Number of the parallel file.): No
2. Type of insurer? Article 43, HMO, Commercial, Municipal Coop, or Fraternal Benefit Society: HMO
3. Is this filing for Group Remittance, Statutory Individual HMO, Statutory Individual POS, Blanket, or Healthy New York? Yes/No (If Yes, enter which one.): Group Remittance
4. Type of filing? Enter Form and Rate, Form only, Rate only (Form only should be used ONLY when the filing only contains

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an application, advertisement, administrative form, or is a group prefilling notification, out-of-state, or a report filing. Form submissions with no proposed rate impact are considered form and rate filings and require an actuarial memorandum.): Rate Only

5. Is this a Rate only filing? Yes/No [If Yes, enter one: Commission/Fee Schedule, Prior Approval Rate Adjustment, DBL Loss Ratio Monitoring, Loss Ratio Experience Monitoring/Reporting, Medicare Supplement Annual Filing (other than rate adjustment), Medicare Supplement Refund Calculation Filing, Timothy's Law Subsidy Filing, Sole Proprietor Rating, 4308(h) Loss Ratio Report, 3231(e) Loss Ratio Report, Experience Rating Formula, or Other with brief explanation.): Prior Approval Rate Adjustment

6. Does this submission contain a form subject to Regulation 123? Yes/No (If Yes, provide a full explanation in the Filing Description field.: No

7. Did this insurer prefile group coverage for this group under Section 52.32 prior to this filing? Yes/No (If Yes, enter the state tracking number assigned and the effective date of coverage.): No

8. Does this submission contain any form which is subject to review by the Life Bureau, the Property Bureau or both? Yes/No (If Yes, identify the forms, the Bureau, the date submitted, and the SERFF file number.): No

9. Does this filing contain forms that replace any other previously approved forms? Yes/No (If Yes, identify the form numbers, the file number, and the date of approval of the forms being replaced in the Filing Description field.): No

10. If this is a rate adjustment filing pursuant to Section 3231(e)(1) or 4308(c), did this insurer submit a "Prior Approval Prefiling" containing a draft narrative summary, a draft initial notification letter, and a draft numerical summary associated with this filing? Yes/No (If Yes, enter the state tracking number and the SERFF tracking number of the prefile.): Yes. It was submitted on 7/7/2014. The SERFF tracking number is MVPH-129622467.

SERFF Tracking #:

MVPH-129596770

State Tracking #:

2014070116

Company Tracking #:

State:

New York

Filing Company:

MVP Health Plan, Inc.

TOI/Sub-TOI:

HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.003C Large Group Only - HMO

Product Name:

2015 NY Large HMO Rate Submission

Project Name/Number:

/

Rate Information

Rate data applies to filing.

Filing Method:

SERFF

Rate Change Type:

Increase

Overall Percentage of Last Rate Revision:

%

Effective Date of Last Rate Revision:

Filing Method of Last Filing:

SERFF

Company Rate Information

Company Name:	Company Rate Change:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
MVP Health Plan, Inc.	Increase	%	%				%	%

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Rate Review Detail

COMPANY:

Company Name: MVP Health Plan, Inc.
 HHS Issuer Id: 56184

PRODUCTS:

Product Name	HIOS Product ID	HIOS Submission ID	Number of Covered Lives
HMO			16735

Trend Factors:

FORMS:

New Policy Forms:
 Affected Forms: 44-CERT-HMO (7/05)
 Other Affected Forms: CERT-NYSHIP (09/03)

REQUESTED RATE CHANGE INFORMATION:

Change Period: Annual
 Member Months: 1,013,535
 Benefit Change: None
 Percent Change Requested: Min: 9.4 Max: 22.1 Avg: 9.7

PRIOR RATE:

Total Earned Premium: 109,154,286.00
 Total Incurred Claims: 90,838,197.00
 Annual \$: Min: 3,889.23 Max: 7,894.32 Avg: 6,522.51

REQUESTED RATE:

Projected Earned Premium: 119,788,591.00
 Projected Incurred Claims: 100,137,697.00
 Annual \$: Min: 4,255.40 Max: 9,429.05 Avg: 7,157.97

SERFF Tracking #:

MVPH-129596770

State Tracking #:

2014070116

Company Tracking #:

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Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		2015 HMO Large Rate Template v2 GF.pdf		New		2015 HMO Large Rate Template v2 GF.pdf,

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HMO Grandfathered Submission**

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MVP Health Plan, Inc.
Article 44
Jan 1, 2015
Plan Designs

Exhibit A.a
Version 7/18/2014

		In-Network Benefits											
		Physician Services		Inpatient	Outpatient				Other Benefits				
Plan Name	Group Size	Plan Type	PCP OV	SCP OV	M/S Stay	ER	Surg	DME	Amb	Ded	Coins.	OOP Max	Pharmacy
HMOCOC 2/20L	Large	HMO	\$2	\$20	\$0	\$35	\$20	50%	\$0	N/A	0%	N/A	Optional Rider
HMOCOC 10L	Large	HMO	\$10	\$10	\$240	\$35	\$75	50%	\$0	N/A	0%	N/A	Optional Rider
HMOCOC 10+L	Large	HMO	\$10	\$10	\$0	\$35	\$10	50%	\$0	N/A	0%	N/A	Optional Rider
HMOCOC 15L	Large	HMO	\$15	\$15	\$240	\$50	\$75	50%	\$0	N/A	0%	N/A	Optional Rider
HMOCOC 15+L	Large	HMO	\$15	\$15	\$0	\$50	\$15	50%	\$0	N/A	0%	N/A	Optional Rider
HMOCOC 20L	Large	HMO	\$20	\$20	\$500	\$50	\$75	50%	\$0	N/A	0%	N/A	Optional Rider
HMOCOC 20+L	Large	HMO	\$20	\$20	\$0	\$50	\$20	50%	\$0	N/A	0%	N/A	Optional Rider
HMOCOC 25L	Large	HMO	\$25	\$25	\$500	\$50	\$75	50%	\$100	N/A	0%	N/A	Optional Rider
HMOCOC 25/40L	Large	HMO	\$25	\$40	\$500	\$100	\$175	50%	\$100	N/A	0%	N/A	Optional Rider
HMOCOC 30/50L	Large	HMO	\$30	\$50	\$750	\$150	\$300	50%	\$100	N/A	0%	N/A	Optional Rider
HMOCOCBasixL	Large	HMO	\$25	\$40	\$500	\$100	\$175	100%	\$100	N/A	0%	N/A	Optional Rider
HMOCOC 25/40L-3	Large	HMO	\$25	\$40	\$250	\$100	\$175	50%	\$100	N/A	0%	N/A	Optional Rider
HMOCOC 25L-2 CA	Large	HMO	\$25	\$25	\$500	\$100	\$175	50%	\$100	N/A	0%	N/A	Optional Rider
HMOCOC 30/50L-2 CA	Large	HMO	\$30	\$50	\$1,000	\$150	\$300	50%	\$100	N/A	0%	N/A	Optional Rider

MVP Health Plan, Inc.
Article 44
Jan 1, 2015
Pharmacy Rider Designs

Exhibit A.b
Version 7/18/2014

Rider Name	Product Line	Available To	Copays			Coinsurance (Member Pays)				Deductible All	Deductible Brand	Out of Pocket Max	
			Tier 1	Tier 2	Tier 3	Tier 1	Tier 2	Tier 3	After Cap				
RX502L	HMO	Large Groups	\$5	\$20	\$40	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
RX504L	HMO	Large Groups	\$10	\$30	\$50	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
RX505L	HMO	Large Groups	N/A	N/A	N/A	50%	50%	50%	N/A	N/A	N/A	N/A	
RX506L	HMO	Large Groups	Open ended provider Rx coverage; sold with POS only										
RX507L on RX504L	HMO	Large Groups	Adds Deductible to Rx504L								\$100		
RX512L	HMO	Large Groups	\$10	N/A	N/A	N/A	100%	100%	N/A	N/A	N/A	N/A	
RX515L	HMO	Large Groups	90 Day Retail Supply										
RX550L	HMO	Large Groups	Removes MAC pricing										
RX551L	HMO	Large Groups	Changes mail order copay from 2.5x to 2.0x										
RX605L	HMO	Large Groups	\$5	\$45	\$90	N/A	N/A	N/A	N/A	N/A	\$250	N/A	

MVP Health Plan, Inc.

Article 44

Jan 1, 2015

Plans/Riders with Product Name Information

Exhibit
VersionB
7/18/2014

Plan/Rider Name	Coplan vs Rider	Plan Type	Policy Form#	Product Name	Product Street Name
HMOCOC 2/20L	Coplan	HMO	44-CERT-HMO (7/05)	HMO	HMO
HMOCOC 10L	Coplan	HMO	44-CERT-HMO (7/05)	HMO	HMO
HMOCOC 10+L	Coplan	HMO	44-CERT-HMO (7/05)	HMO	HMO
HMOCOC 15L	Coplan	HMO	44-CERT-HMO (7/05)	HMO	HMO
HMOCOC 15+L	Coplan	HMO	44-CERT-HMO (7/05)	HMO	HMO
HMOCOC 20L	Coplan	HMO	44-CERT-HMO (7/05)	HMO	HMO
HMOCOC 20+L	Coplan	HMO	44-CERT-HMO (7/05)	HMO	HMO
HMOCOC 25L	Coplan	HMO	44-CERT-HMO (7/05)	HMO	HMO
HMOCOC 25/40L	Coplan	HMO	44-CERT-HMO (7/05)	HMO	HMO
HMOCOC 30/50L	Coplan	HMO	44-CERT-HMO (7/05)	HMO	HMO
HMOCOCBasixL	Coplan	HMO	44-CERT-HMO (7/05)	HMO	HMO
HMOCOC 25/40L-3	Coplan	HMO	44-CERT-HMO (7/05)	HMO	HMO
HMOCOC 25L-2 CA	Coplan	HMO	44-CERT-HMO (7/05)	HMO	HMO
HMOCOC 30/50L-2 CA	Coplan	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED500L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED503L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED504L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED510L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED513L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED515L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED517L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED528L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED533	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED535L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED538L-a	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED538L-b	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED538L-c	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED538L-d	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED538L-e	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED538L-f	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED538L-g	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED538L-h	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED538L-j	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED538L-k	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED538L-m	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED538L-q	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED538L-s	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
MED538L-u	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
DP500L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
DP501L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
DP502L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
SD512L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
SD514L	Rider	HMO	CERT-NYSHIP(09/03)	HMO	HMO
SD518L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
07AM1L-A	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
07AM1L-B	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
07AM2L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
RX502L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
RX504L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
RX505L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO

MVP Health Plan, Inc.

Article 44

Jan 1, 2015

Plans/Riders with Product Name Information

Exhibit
VersionB
7/18/2014

Plan/Rider Name	Coplan vs Rider	Plan Type	Policy Form#	Product Name	Product Street Name
RX506L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
RX507L on RX504L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
RX512L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
RX515L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
RX550L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
RX551L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO
RX605L	Rider	HMO	44-CERT-HMO (7/05)	HMO	HMO

MVP Health Plan, Inc.
Article 44
Jan 1, 2015
Current Year Premiums

Exhibit C
Version 7/18/2014

Plan Name	Group Size	Plan Type	Rate Region	First Quarter Rates 2015					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 2/20L	Large	HMO	Central I	\$633.01	\$1,266.02	\$1,202.72	\$1,582.53	\$1,645.83	\$1,772.43
HMOCOC 10L	Large	HMO	Central I	\$633.14	\$1,266.28	\$1,202.97	\$1,582.85	\$1,646.16	\$1,772.79
HMOCOC 10+L	Large	HMO	Central I	\$640.18	\$1,280.36	\$1,216.34	\$1,600.45	\$1,664.47	\$1,792.50
HMOCOC 15L	Large	HMO	Central I	\$625.51	\$1,251.02	\$1,188.47	\$1,563.78	\$1,626.33	\$1,751.43
HMOCOC 15+L	Large	HMO	Central I	\$632.36	\$1,264.72	\$1,201.48	\$1,580.90	\$1,644.14	\$1,770.61
HMOCOC 20L	Large	HMO	Central I	\$612.89	\$1,225.78	\$1,164.49	\$1,532.23	\$1,593.51	\$1,716.09
HMOCOC 20+L	Large	HMO	Central I	\$625.26	\$1,250.52	\$1,187.99	\$1,563.15	\$1,625.68	\$1,750.73
HMOCOC 25L	Large	HMO	Central I	\$604.88	\$1,209.76	\$1,149.27	\$1,512.20	\$1,572.69	\$1,693.66
HMOCOC 25/40L	Large	HMO	Central I	\$566.59	\$1,133.18	\$1,076.52	\$1,416.48	\$1,473.13	\$1,586.45
HMOCOC 30/50L	Large	HMO	Central I	\$540.27	\$1,080.54	\$1,026.51	\$1,350.68	\$1,404.70	\$1,512.76
HMOCOCBasixL	Large	HMO	Central I	\$560.51	\$1,121.02	\$1,064.97	\$1,401.28	\$1,457.33	\$1,569.43
HMOCOC 25/40L-3	Large	HMO	Central I	\$572.07	\$1,144.14	\$1,086.93	\$1,430.18	\$1,487.38	\$1,601.80
HMOCOC 25L-2 CA	Large	HMO	Central I	\$601.98	\$1,203.96	\$1,143.76	\$1,504.95	\$1,565.15	\$1,685.54
HMOCOC 30/50L-2 CA	Large	HMO	Central I	\$534.83	\$1,069.66	\$1,016.18	\$1,337.08	\$1,390.56	\$1,497.52
HMOCOC 2/20L	Large	HMO	Central II	\$614.15	\$1,228.30	\$1,166.89	\$1,535.38	\$1,596.79	\$1,719.62
HMOCOC 10L	Large	HMO	Central II	\$614.28	\$1,228.56	\$1,167.13	\$1,535.70	\$1,597.13	\$1,719.98
HMOCOC 10+L	Large	HMO	Central II	\$621.08	\$1,242.16	\$1,180.05	\$1,552.70	\$1,614.81	\$1,739.02
HMOCOC 15L	Large	HMO	Central II	\$606.88	\$1,213.76	\$1,153.07	\$1,517.20	\$1,577.89	\$1,699.26
HMOCOC 15+L	Large	HMO	Central II	\$613.53	\$1,227.06	\$1,165.71	\$1,533.83	\$1,595.18	\$1,717.88
HMOCOC 20L	Large	HMO	Central II	\$594.62	\$1,189.24	\$1,129.78	\$1,486.55	\$1,546.01	\$1,664.94
HMOCOC 20+L	Large	HMO	Central II	\$606.61	\$1,213.22	\$1,152.56	\$1,516.53	\$1,577.19	\$1,698.51
HMOCOC 25L	Large	HMO	Central II	\$586.87	\$1,173.74	\$1,115.05	\$1,467.18	\$1,525.86	\$1,643.24
HMOCOC 25/40L	Large	HMO	Central II	\$549.71	\$1,099.42	\$1,044.45	\$1,374.28	\$1,429.25	\$1,539.19
HMOCOC 30/50L	Large	HMO	Central II	\$524.18	\$1,048.36	\$995.94	\$1,310.45	\$1,362.87	\$1,467.70
HMOCOCBasixL	Large	HMO	Central II	\$543.81	\$1,087.62	\$1,033.24	\$1,359.53	\$1,413.91	\$1,522.67
HMOCOC 25/40L-3	Large	HMO	Central II	\$555.02	\$1,110.04	\$1,054.54	\$1,387.55	\$1,443.05	\$1,554.06
HMOCOC 25L-2 CA	Large	HMO	Central II	\$584.03	\$1,168.06	\$1,109.66	\$1,460.08	\$1,518.48	\$1,635.28
HMOCOC 30/50L-2 CA	Large	HMO	Central II	\$518.89	\$1,037.78	\$985.89	\$1,297.23	\$1,349.11	\$1,452.89
HMOCOC 2/20L	Large	HMO	Central III	\$664.48	\$1,328.96	\$1,262.51	\$1,661.20	\$1,727.65	\$1,860.54
HMOCOC 10L	Large	HMO	Central III	\$664.61	\$1,329.22	\$1,262.76	\$1,661.53	\$1,727.99	\$1,860.91
HMOCOC 10+L	Large	HMO	Central III	\$671.99	\$1,343.98	\$1,276.78	\$1,679.98	\$1,747.17	\$1,881.57
HMOCOC 15L	Large	HMO	Central III	\$656.60	\$1,313.20	\$1,247.54	\$1,641.50	\$1,707.16	\$1,838.48
HMOCOC 15+L	Large	HMO	Central III	\$663.80	\$1,327.60	\$1,261.22	\$1,659.50	\$1,725.88	\$1,858.64
HMOCOC 20L	Large	HMO	Central III	\$643.36	\$1,286.72	\$1,222.38	\$1,608.40	\$1,672.74	\$1,801.41
HMOCOC 20+L	Large	HMO	Central III	\$656.31	\$1,312.62	\$1,246.99	\$1,640.78	\$1,706.41	\$1,837.67
HMOCOC 25L	Large	HMO	Central III	\$634.94	\$1,269.88	\$1,206.39	\$1,587.35	\$1,650.84	\$1,777.83
HMOCOC 25/40L	Large	HMO	Central III	\$594.73	\$1,189.46	\$1,129.99	\$1,486.83	\$1,546.30	\$1,665.24
HMOCOC 30/50L	Large	HMO	Central III	\$567.10	\$1,134.20	\$1,077.49	\$1,417.75	\$1,474.46	\$1,587.88
HMOCOCBasixL	Large	HMO	Central III	\$588.33	\$1,176.66	\$1,117.83	\$1,470.83	\$1,529.66	\$1,647.32
HMOCOC 25/40L-3	Large	HMO	Central III	\$600.48	\$1,200.96	\$1,140.91	\$1,501.20	\$1,561.25	\$1,681.34
HMOCOC 25L-2 CA	Large	HMO	Central III	\$631.89	\$1,263.78	\$1,200.59	\$1,579.73	\$1,642.91	\$1,769.29
HMOCOC 30/50L-2 CA	Large	HMO	Central III	\$561.37	\$1,122.74	\$1,066.60	\$1,403.43	\$1,459.56	\$1,571.84
HMOCOC 2/20L	Large	HMO	East I	\$587.16	\$1,174.32	\$1,115.60	\$1,467.90	\$1,526.62	\$1,644.05
HMOCOC 10L	Large	HMO	East I	\$587.31	\$1,174.62	\$1,115.89	\$1,468.28	\$1,527.01	\$1,644.47
HMOCOC 10+L	Large	HMO	East I	\$593.80	\$1,187.60	\$1,128.22	\$1,484.50	\$1,543.88	\$1,662.64
HMOCOC 15L	Large	HMO	East I	\$580.20	\$1,160.40	\$1,102.38	\$1,450.50	\$1,508.52	\$1,624.56
HMOCOC 15+L	Large	HMO	East I	\$586.56	\$1,173.12	\$1,114.46	\$1,466.40	\$1,525.06	\$1,642.37
HMOCOC 20L	Large	HMO	East I	\$568.51	\$1,137.02	\$1,080.17	\$1,421.28	\$1,478.13	\$1,591.83
HMOCOC 20+L	Large	HMO	East I	\$579.96	\$1,159.92	\$1,101.92	\$1,449.90	\$1,507.90	\$1,623.89
HMOCOC 25L	Large	HMO	East I	\$561.08	\$1,122.16	\$1,066.05	\$1,402.70	\$1,458.81	\$1,571.02
HMOCOC 25/40L	Large	HMO	East I	\$525.57	\$1,051.14	\$998.58	\$1,313.93	\$1,366.48	\$1,471.60
HMOCOC 30/50L	Large	HMO	East I	\$501.17	\$1,002.34	\$952.22	\$1,252.93	\$1,303.04	\$1,403.28
HMOCOCBasixL	Large	HMO	East I	\$519.91	\$1,039.82	\$987.83	\$1,299.78	\$1,351.77	\$1,455.75
HMOCOC 25/40L-3	Large	HMO	East I	\$530.64	\$1,061.28	\$1,008.22	\$1,326.60	\$1,379.66	\$1,485.79
HMOCOC 25L-2 CA	Large	HMO	East I	\$558.38	\$1,116.76	\$1,060.92	\$1,395.95	\$1,451.79	\$1,563.46
HMOCOC 30/50L-2 CA	Large	HMO	East I	\$496.11	\$992.22	\$942.61	\$1,240.28	\$1,289.89	\$1,389.11
HMOCOC 2/20L	Large	HMO	East II	\$628.80	\$1,257.60	\$1,194.72	\$1,572.00	\$1,634.88	\$1,760.64

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Plan Name	Group Size	Plan Type	Rate Region	First Quarter Rates 2015					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	East II	\$628.97	\$1,257.94	\$1,195.04	\$1,572.43	\$1,635.32	\$1,761.12
HMOCOC 10+L	Large	HMO	East II	\$635.93	\$1,271.86	\$1,208.27	\$1,589.83	\$1,653.42	\$1,780.60
HMOCOC 15L	Large	HMO	East II	\$621.37	\$1,242.74	\$1,180.60	\$1,553.43	\$1,615.56	\$1,739.84
HMOCOC 15+L	Large	HMO	East II	\$628.18	\$1,256.36	\$1,193.54	\$1,570.45	\$1,633.27	\$1,758.90
HMOCOC 20L	Large	HMO	East II	\$608.84	\$1,217.68	\$1,156.80	\$1,522.10	\$1,582.98	\$1,704.75
HMOCOC 20+L	Large	HMO	East II	\$621.13	\$1,242.26	\$1,180.15	\$1,552.83	\$1,614.94	\$1,739.16
HMOCOC 25L	Large	HMO	East II	\$600.88	\$1,201.76	\$1,141.67	\$1,502.20	\$1,562.29	\$1,682.46
HMOCOC 25/40L	Large	HMO	East II	\$562.85	\$1,125.70	\$1,069.42	\$1,407.13	\$1,463.41	\$1,575.98
HMOCOC 30/50L	Large	HMO	East II	\$536.71	\$1,073.42	\$1,019.75	\$1,341.78	\$1,395.45	\$1,502.79
HMOCOCBasixL	Large	HMO	East II	\$556.77	\$1,113.54	\$1,057.86	\$1,391.93	\$1,447.60	\$1,558.96
HMOCOC 25/40L-3	Large	HMO	East II	\$568.27	\$1,136.54	\$1,079.71	\$1,420.68	\$1,477.50	\$1,591.16
HMOCOC 25L-2 CA	Large	HMO	East II	\$598.00	\$1,196.00	\$1,136.20	\$1,495.00	\$1,554.80	\$1,674.40
HMOCOC 30/50L-2 CA	Large	HMO	East II	\$531.27	\$1,062.54	\$1,009.41	\$1,328.18	\$1,381.30	\$1,487.56
HMOCOC 2/20L	Large	HMO	Mid-Hudson East	\$671.01	\$1,342.02	\$1,274.92	\$1,677.53	\$1,744.63	\$1,878.83
HMOCOC 10L	Large	HMO	Mid-Hudson East	\$671.16	\$1,342.32	\$1,275.20	\$1,677.90	\$1,745.02	\$1,879.25
HMOCOC 10+L	Large	HMO	Mid-Hudson East	\$678.61	\$1,357.22	\$1,289.36	\$1,696.53	\$1,764.39	\$1,900.11
HMOCOC 15L	Large	HMO	Mid-Hudson East	\$663.07	\$1,326.14	\$1,259.83	\$1,657.68	\$1,723.98	\$1,856.60
HMOCOC 15+L	Large	HMO	Mid-Hudson East	\$670.33	\$1,340.66	\$1,273.63	\$1,675.83	\$1,742.86	\$1,876.92
HMOCOC 20L	Large	HMO	Mid-Hudson East	\$649.69	\$1,299.38	\$1,234.41	\$1,624.23	\$1,689.19	\$1,819.13
HMOCOC 20+L	Large	HMO	Mid-Hudson East	\$662.81	\$1,325.62	\$1,259.34	\$1,657.03	\$1,723.31	\$1,855.87
HMOCOC 25L	Large	HMO	Mid-Hudson East	\$641.21	\$1,282.42	\$1,218.30	\$1,603.03	\$1,667.15	\$1,795.39
HMOCOC 25/40L	Large	HMO	Mid-Hudson East	\$600.63	\$1,201.26	\$1,141.20	\$1,501.58	\$1,561.64	\$1,681.76
HMOCOC 30/50L	Large	HMO	Mid-Hudson East	\$572.68	\$1,145.36	\$1,088.09	\$1,431.70	\$1,488.97	\$1,603.50
HMOCOCBasixL	Large	HMO	Mid-Hudson East	\$594.10	\$1,188.20	\$1,128.79	\$1,485.25	\$1,544.66	\$1,663.48
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson East	\$606.38	\$1,212.76	\$1,152.12	\$1,515.95	\$1,576.59	\$1,697.86
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson East	\$638.10	\$1,276.20	\$1,212.39	\$1,595.25	\$1,659.06	\$1,786.68
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson East	\$566.89	\$1,133.78	\$1,077.09	\$1,417.23	\$1,473.91	\$1,587.29
HMOCOC 2/20L	Large	HMO	Mid-Hudson West	\$626.11	\$1,252.22	\$1,189.61	\$1,565.28	\$1,627.89	\$1,753.11
HMOCOC 10L	Large	HMO	Mid-Hudson West	\$626.25	\$1,252.50	\$1,189.88	\$1,565.63	\$1,628.25	\$1,753.50
HMOCOC 10+L	Large	HMO	Mid-Hudson West	\$633.21	\$1,266.42	\$1,203.10	\$1,583.03	\$1,646.35	\$1,772.99
HMOCOC 15L	Large	HMO	Mid-Hudson West	\$618.70	\$1,237.40	\$1,175.53	\$1,546.75	\$1,608.62	\$1,732.36
HMOCOC 15+L	Large	HMO	Mid-Hudson West	\$625.50	\$1,251.00	\$1,188.45	\$1,563.75	\$1,626.30	\$1,751.40
HMOCOC 20L	Large	HMO	Mid-Hudson West	\$606.21	\$1,212.42	\$1,151.80	\$1,515.53	\$1,576.15	\$1,697.39
HMOCOC 20+L	Large	HMO	Mid-Hudson West	\$618.45	\$1,236.90	\$1,175.06	\$1,546.13	\$1,607.97	\$1,731.66
HMOCOC 25L	Large	HMO	Mid-Hudson West	\$598.31	\$1,196.62	\$1,136.79	\$1,495.78	\$1,555.61	\$1,675.27
HMOCOC 25/40L	Large	HMO	Mid-Hudson West	\$560.45	\$1,120.90	\$1,064.86	\$1,401.13	\$1,457.17	\$1,569.26
HMOCOC 30/50L	Large	HMO	Mid-Hudson West	\$534.38	\$1,068.76	\$1,015.32	\$1,335.95	\$1,389.39	\$1,496.26
HMOCOCBasixL	Large	HMO	Mid-Hudson West	\$554.39	\$1,108.78	\$1,053.34	\$1,385.98	\$1,441.41	\$1,552.29
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson West	\$565.84	\$1,131.68	\$1,075.10	\$1,414.60	\$1,471.18	\$1,584.35
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson West	\$595.41	\$1,190.82	\$1,131.28	\$1,488.53	\$1,548.07	\$1,667.15
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson West	\$528.99	\$1,057.98	\$1,005.08	\$1,322.48	\$1,375.37	\$1,481.17
HMOCOC 2/20L	Large	HMO	NY Metro	\$749.18	\$1,498.36	\$1,423.44	\$1,872.95	\$1,947.87	\$2,097.70
HMOCOC 10L	Large	HMO	NY Metro	\$749.36	\$1,498.72	\$1,423.78	\$1,873.40	\$1,948.34	\$2,098.21
HMOCOC 10+L	Large	HMO	NY Metro	\$757.68	\$1,515.36	\$1,439.59	\$1,894.20	\$1,969.97	\$2,121.50
HMOCOC 15L	Large	HMO	NY Metro	\$740.32	\$1,480.64	\$1,406.61	\$1,850.80	\$1,924.83	\$2,072.90
HMOCOC 15+L	Large	HMO	NY Metro	\$748.45	\$1,496.90	\$1,422.06	\$1,871.13	\$1,945.97	\$2,095.66
HMOCOC 20L	Large	HMO	NY Metro	\$725.37	\$1,450.74	\$1,378.20	\$1,813.43	\$1,885.96	\$2,031.04
HMOCOC 20+L	Large	HMO	NY Metro	\$740.03	\$1,480.06	\$1,406.06	\$1,850.08	\$1,924.08	\$2,072.08
HMOCOC 25L	Large	HMO	NY Metro	\$715.91	\$1,431.82	\$1,360.23	\$1,789.78	\$1,861.37	\$2,004.55
HMOCOC 25/40L	Large	HMO	NY Metro	\$670.59	\$1,341.18	\$1,274.12	\$1,676.48	\$1,743.53	\$1,877.65
HMOCOC 30/50L	Large	HMO	NY Metro	\$639.40	\$1,278.80	\$1,214.86	\$1,598.50	\$1,662.44	\$1,790.32
HMOCOCBasixL	Large	HMO	NY Metro	\$663.35	\$1,326.70	\$1,260.37	\$1,658.38	\$1,724.71	\$1,857.38
HMOCOC 25/40L-3	Large	HMO	NY Metro	\$677.03	\$1,354.06	\$1,286.36	\$1,692.58	\$1,760.28	\$1,895.68
HMOCOC 25L-2 CA	Large	HMO	NY Metro	\$712.47	\$1,424.94	\$1,353.69	\$1,781.18	\$1,852.42	\$1,994.92
HMOCOC 30/50L-2 CA	Large	HMO	NY Metro	\$632.92	\$1,265.84	\$1,202.55	\$1,582.30	\$1,645.59	\$1,772.18
HMOCOC 2/20L	Large	HMO	North Country	\$682.37	\$1,364.74	\$1,296.50	\$1,705.93	\$1,774.16	\$1,910.64
HMOCOC 10L	Large	HMO	North Country	\$682.58	\$1,365.16	\$1,296.90	\$1,706.45	\$1,774.71	\$1,911.22

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Plan Name	Group Size	Plan Type	Rate Region	First Quarter Rates 2015					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10+L	Large	HMO	North Country	\$690.14	\$1,380.28	\$1,311.27	\$1,725.35	\$1,794.36	\$1,932.39
HMOCOC 15L	Large	HMO	North Country	\$674.30	\$1,348.60	\$1,281.17	\$1,685.75	\$1,753.18	\$1,888.04
HMOCOC 15+L	Large	HMO	North Country	\$681.71	\$1,363.42	\$1,295.25	\$1,704.28	\$1,772.45	\$1,908.79
HMOCOC 20L	Large	HMO	North Country	\$660.71	\$1,321.42	\$1,255.35	\$1,651.78	\$1,717.85	\$1,849.99
HMOCOC 20+L	Large	HMO	North Country	\$674.05	\$1,348.10	\$1,280.70	\$1,685.13	\$1,752.53	\$1,887.34
HMOCOC 25L	Large	HMO	North Country	\$652.08	\$1,304.16	\$1,238.95	\$1,630.20	\$1,695.41	\$1,825.82
HMOCOC 25/40L	Large	HMO	North Country	\$610.80	\$1,221.60	\$1,160.52	\$1,527.00	\$1,588.08	\$1,710.24
HMOCOC 30/50L	Large	HMO	North Country	\$582.39	\$1,164.78	\$1,106.54	\$1,455.98	\$1,514.21	\$1,630.69
HMOCOCBasixL	Large	HMO	North Country	\$604.19	\$1,208.38	\$1,147.96	\$1,510.48	\$1,570.89	\$1,691.73
HMOCOC 25/40L-3	Large	HMO	North Country	\$616.65	\$1,233.30	\$1,171.64	\$1,541.63	\$1,603.29	\$1,726.62
HMOCOC 25L-2 CA	Large	HMO	North Country	\$648.92	\$1,297.84	\$1,232.95	\$1,622.30	\$1,687.19	\$1,816.98
HMOCOC 30/50L-2 CA	Large	HMO	North Country	\$576.49	\$1,152.98	\$1,095.33	\$1,441.23	\$1,498.87	\$1,614.17
HMOCOC 2/20L	Large	HMO	Rochester	\$498.04	\$996.08	\$946.28	\$1,245.10	\$1,294.90	\$1,394.51
HMOCOC 10L	Large	HMO	Rochester	\$498.15	\$996.30	\$946.49	\$1,245.38	\$1,295.19	\$1,394.82
HMOCOC 10+L	Large	HMO	Rochester	\$503.67	\$1,007.34	\$956.97	\$1,259.18	\$1,309.54	\$1,410.28
HMOCOC 15L	Large	HMO	Rochester	\$492.16	\$984.32	\$935.10	\$1,230.40	\$1,279.62	\$1,378.05
HMOCOC 15+L	Large	HMO	Rochester	\$497.54	\$995.08	\$945.33	\$1,243.85	\$1,293.60	\$1,393.11
HMOCOC 20L	Large	HMO	Rochester	\$482.21	\$964.42	\$916.20	\$1,205.53	\$1,253.75	\$1,350.19
HMOCOC 20+L	Large	HMO	Rochester	\$491.95	\$983.90	\$934.71	\$1,229.88	\$1,279.07	\$1,377.46
HMOCOC 25L	Large	HMO	Rochester	\$475.97	\$951.94	\$904.34	\$1,189.93	\$1,237.52	\$1,332.72
HMOCOC 25/40L	Large	HMO	Rochester	\$445.88	\$891.76	\$847.17	\$1,114.70	\$1,159.29	\$1,248.46
HMOCOC 30/50L	Large	HMO	Rochester	\$425.20	\$850.40	\$807.88	\$1,063.00	\$1,105.52	\$1,190.56
HMOCOCBasixL	Large	HMO	Rochester	\$441.07	\$882.14	\$838.03	\$1,102.68	\$1,146.78	\$1,235.00
HMOCOC 25/40L-3	Large	HMO	Rochester	\$450.17	\$900.34	\$855.32	\$1,125.43	\$1,170.44	\$1,260.48
HMOCOC 25L-2 CA	Large	HMO	Rochester	\$473.66	\$947.32	\$899.95	\$1,184.15	\$1,231.52	\$1,326.25
HMOCOC 30/50L-2 CA	Large	HMO	Rochester	\$420.93	\$841.86	\$799.77	\$1,052.33	\$1,094.42	\$1,178.60

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Plan Name	Group Size	Plan Type	Rate Region	Second Quarter Rates 2015					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 2/20L	Large	HMO	Central I	\$642.51	\$1,285.02	\$1,220.77	\$1,606.28	\$1,670.53	\$1,799.03
HMOCOC 10L	Large	HMO	Central I	\$642.64	\$1,285.28	\$1,221.02	\$1,606.60	\$1,670.86	\$1,799.39
HMOCOC 10+L	Large	HMO	Central I	\$649.78	\$1,299.56	\$1,234.58	\$1,624.45	\$1,689.43	\$1,819.38
HMOCOC 15L	Large	HMO	Central I	\$634.89	\$1,269.78	\$1,206.29	\$1,587.23	\$1,650.71	\$1,777.69
HMOCOC 15+L	Large	HMO	Central I	\$641.85	\$1,283.70	\$1,219.52	\$1,604.63	\$1,668.81	\$1,797.18
HMOCOC 20L	Large	HMO	Central I	\$622.08	\$1,244.16	\$1,181.95	\$1,555.20	\$1,617.41	\$1,741.82
HMOCOC 20+L	Large	HMO	Central I	\$634.64	\$1,269.28	\$1,205.82	\$1,586.60	\$1,650.06	\$1,776.99
HMOCOC 25L	Large	HMO	Central I	\$613.95	\$1,227.90	\$1,166.51	\$1,534.88	\$1,596.27	\$1,719.06
HMOCOC 25/40L	Large	HMO	Central I	\$575.09	\$1,150.18	\$1,092.67	\$1,437.73	\$1,495.23	\$1,610.25
HMOCOC 30/50L	Large	HMO	Central I	\$548.37	\$1,096.74	\$1,041.90	\$1,370.93	\$1,425.76	\$1,535.44
HMOCOCBasixL	Large	HMO	Central I	\$568.92	\$1,137.84	\$1,080.95	\$1,422.30	\$1,479.19	\$1,592.98
HMOCOC 25/40L-3	Large	HMO	Central I	\$580.65	\$1,161.30	\$1,103.24	\$1,451.63	\$1,509.69	\$1,625.82
HMOCOC 25L-2 CA	Large	HMO	Central I	\$611.01	\$1,222.02	\$1,160.92	\$1,527.53	\$1,588.63	\$1,710.83
HMOCOC 30/50L-2 CA	Large	HMO	Central I	\$542.85	\$1,085.70	\$1,031.42	\$1,357.13	\$1,411.41	\$1,519.98
HMOCOC 2/20L	Large	HMO	Central II	\$623.36	\$1,246.72	\$1,184.38	\$1,558.40	\$1,620.74	\$1,745.41
HMOCOC 10L	Large	HMO	Central II	\$623.49	\$1,246.98	\$1,184.63	\$1,558.73	\$1,621.07	\$1,745.77
HMOCOC 10+L	Large	HMO	Central II	\$630.40	\$1,260.80	\$1,197.76	\$1,576.00	\$1,639.04	\$1,765.12
HMOCOC 15L	Large	HMO	Central II	\$615.98	\$1,231.96	\$1,170.36	\$1,539.95	\$1,601.55	\$1,724.74
HMOCOC 15+L	Large	HMO	Central II	\$622.73	\$1,245.46	\$1,183.19	\$1,556.83	\$1,619.10	\$1,743.64
HMOCOC 20L	Large	HMO	Central II	\$603.54	\$1,207.08	\$1,146.73	\$1,508.85	\$1,569.20	\$1,689.91
HMOCOC 20+L	Large	HMO	Central II	\$615.71	\$1,231.42	\$1,169.85	\$1,539.28	\$1,600.85	\$1,723.99
HMOCOC 25L	Large	HMO	Central II	\$595.67	\$1,191.34	\$1,131.77	\$1,489.18	\$1,548.74	\$1,667.88
HMOCOC 25/40L	Large	HMO	Central II	\$557.96	\$1,115.92	\$1,060.12	\$1,394.90	\$1,450.70	\$1,562.29
HMOCOC 30/50L	Large	HMO	Central II	\$532.04	\$1,064.08	\$1,010.88	\$1,330.10	\$1,383.30	\$1,489.71
HMOCOCBasixL	Large	HMO	Central II	\$551.97	\$1,103.94	\$1,048.74	\$1,379.93	\$1,435.12	\$1,545.52
HMOCOC 25/40L-3	Large	HMO	Central II	\$563.35	\$1,126.70	\$1,070.37	\$1,408.38	\$1,464.71	\$1,577.38
HMOCOC 25L-2 CA	Large	HMO	Central II	\$592.79	\$1,185.58	\$1,126.30	\$1,481.98	\$1,541.25	\$1,659.81
HMOCOC 30/50L-2 CA	Large	HMO	Central II	\$526.67	\$1,053.34	\$1,000.67	\$1,316.68	\$1,369.34	\$1,474.68
HMOCOC 2/20L	Large	HMO	Central III	\$674.45	\$1,348.90	\$1,281.46	\$1,686.13	\$1,753.57	\$1,888.46
HMOCOC 10L	Large	HMO	Central III	\$674.58	\$1,349.16	\$1,281.70	\$1,686.45	\$1,753.91	\$1,888.82
HMOCOC 10+L	Large	HMO	Central III	\$682.07	\$1,364.14	\$1,295.93	\$1,705.18	\$1,773.38	\$1,909.80
HMOCOC 15L	Large	HMO	Central III	\$666.45	\$1,332.90	\$1,266.26	\$1,666.13	\$1,732.77	\$1,866.06
HMOCOC 15+L	Large	HMO	Central III	\$673.76	\$1,347.52	\$1,280.14	\$1,684.40	\$1,751.78	\$1,886.53
HMOCOC 20L	Large	HMO	Central III	\$653.01	\$1,306.02	\$1,240.72	\$1,632.53	\$1,697.83	\$1,828.43
HMOCOC 20+L	Large	HMO	Central III	\$666.15	\$1,332.30	\$1,265.69	\$1,665.38	\$1,731.99	\$1,865.22
HMOCOC 25L	Large	HMO	Central III	\$644.46	\$1,288.92	\$1,224.47	\$1,611.15	\$1,675.60	\$1,804.49
HMOCOC 25/40L	Large	HMO	Central III	\$603.65	\$1,207.30	\$1,146.94	\$1,509.13	\$1,569.49	\$1,690.22
HMOCOC 30/50L	Large	HMO	Central III	\$575.61	\$1,151.22	\$1,093.66	\$1,439.03	\$1,496.59	\$1,611.71
HMOCOCBasixL	Large	HMO	Central III	\$597.15	\$1,194.30	\$1,134.59	\$1,492.88	\$1,552.59	\$1,672.02
HMOCOC 25/40L-3	Large	HMO	Central III	\$609.49	\$1,218.98	\$1,158.03	\$1,523.73	\$1,584.67	\$1,706.57
HMOCOC 25L-2 CA	Large	HMO	Central III	\$641.37	\$1,282.74	\$1,218.60	\$1,603.43	\$1,667.56	\$1,795.84
HMOCOC 30/50L-2 CA	Large	HMO	Central III	\$569.79	\$1,139.58	\$1,082.60	\$1,424.48	\$1,481.45	\$1,595.41
HMOCOC 2/20L	Large	HMO	East I	\$595.97	\$1,191.94	\$1,132.34	\$1,489.93	\$1,549.52	\$1,668.72
HMOCOC 10L	Large	HMO	East I	\$596.12	\$1,192.24	\$1,132.63	\$1,490.30	\$1,549.91	\$1,669.14
HMOCOC 10+L	Large	HMO	East I	\$602.71	\$1,205.42	\$1,145.15	\$1,506.78	\$1,567.05	\$1,687.59
HMOCOC 15L	Large	HMO	East I	\$588.90	\$1,177.80	\$1,118.91	\$1,472.25	\$1,531.14	\$1,648.92
HMOCOC 15+L	Large	HMO	East I	\$595.36	\$1,190.72	\$1,131.18	\$1,488.40	\$1,547.94	\$1,667.01
HMOCOC 20L	Large	HMO	East I	\$577.04	\$1,154.08	\$1,096.38	\$1,442.60	\$1,500.30	\$1,615.71
HMOCOC 20+L	Large	HMO	East I	\$588.66	\$1,177.32	\$1,118.45	\$1,471.65	\$1,530.52	\$1,648.25
HMOCOC 25L	Large	HMO	East I	\$569.50	\$1,139.00	\$1,082.05	\$1,423.75	\$1,480.70	\$1,594.60
HMOCOC 25/40L	Large	HMO	East I	\$533.45	\$1,066.90	\$1,013.56	\$1,333.63	\$1,386.97	\$1,493.66
HMOCOC 30/50L	Large	HMO	East I	\$508.69	\$1,017.38	\$966.51	\$1,271.73	\$1,322.59	\$1,424.33
HMOCOCBasixL	Large	HMO	East I	\$527.71	\$1,055.42	\$1,002.65	\$1,319.28	\$1,372.05	\$1,477.59
HMOCOC 25/40L-3	Large	HMO	East I	\$538.60	\$1,077.20	\$1,023.34	\$1,346.50	\$1,400.36	\$1,508.08
HMOCOC 25L-2 CA	Large	HMO	East I	\$566.76	\$1,133.52	\$1,076.84	\$1,416.90	\$1,473.58	\$1,586.93
HMOCOC 30/50L-2 CA	Large	HMO	East I	\$503.55	\$1,007.10	\$956.75	\$1,258.88	\$1,309.23	\$1,409.94
HMOCOC 2/20L	Large	HMO	East II	\$638.23	\$1,276.46	\$1,212.64	\$1,595.58	\$1,659.40	\$1,787.04

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Plan Name	Group Size	Plan Type	Rate Region	Second Quarter Rates 2015					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	East II	\$638.40	\$1,276.80	\$1,212.96	\$1,596.00	\$1,659.84	\$1,787.52
HMOCOC 10+L	Large	HMO	East II	\$645.47	\$1,290.94	\$1,226.39	\$1,613.68	\$1,678.22	\$1,807.32
HMOCOC 15L	Large	HMO	East II	\$630.69	\$1,261.38	\$1,198.31	\$1,576.73	\$1,639.79	\$1,765.93
HMOCOC 15+L	Large	HMO	East II	\$637.60	\$1,275.20	\$1,211.44	\$1,594.00	\$1,657.76	\$1,785.28
HMOCOC 20L	Large	HMO	East II	\$617.97	\$1,235.94	\$1,174.14	\$1,544.93	\$1,606.72	\$1,730.32
HMOCOC 20+L	Large	HMO	East II	\$630.45	\$1,260.90	\$1,197.86	\$1,576.13	\$1,639.17	\$1,765.26
HMOCOC 25L	Large	HMO	East II	\$609.89	\$1,219.78	\$1,158.79	\$1,524.73	\$1,585.71	\$1,707.69
HMOCOC 25/40L	Large	HMO	East II	\$571.29	\$1,142.58	\$1,085.45	\$1,428.23	\$1,485.35	\$1,599.61
HMOCOC 30/50L	Large	HMO	East II	\$544.76	\$1,089.52	\$1,035.04	\$1,361.90	\$1,416.38	\$1,525.33
HMOCOCBasixL	Large	HMO	East II	\$565.12	\$1,130.24	\$1,073.73	\$1,412.80	\$1,469.31	\$1,582.34
HMOCOC 25/40L-3	Large	HMO	East II	\$576.79	\$1,153.58	\$1,095.90	\$1,441.98	\$1,499.65	\$1,615.01
HMOCOC 25L-2 CA	Large	HMO	East II	\$606.97	\$1,213.94	\$1,153.24	\$1,517.43	\$1,578.12	\$1,699.52
HMOCOC 30/50L-2 CA	Large	HMO	East II	\$539.24	\$1,078.48	\$1,024.56	\$1,348.10	\$1,402.02	\$1,509.87
HMOCOC 2/20L	Large	HMO	Mid-Hudson East	\$681.08	\$1,362.16	\$1,294.05	\$1,702.70	\$1,770.81	\$1,907.02
HMOCOC 10L	Large	HMO	Mid-Hudson East	\$681.23	\$1,362.46	\$1,294.34	\$1,703.08	\$1,771.20	\$1,907.44
HMOCOC 10+L	Large	HMO	Mid-Hudson East	\$688.79	\$1,377.58	\$1,308.70	\$1,721.98	\$1,790.85	\$1,928.61
HMOCOC 15L	Large	HMO	Mid-Hudson East	\$673.02	\$1,346.04	\$1,278.74	\$1,682.55	\$1,749.85	\$1,884.46
HMOCOC 15+L	Large	HMO	Mid-Hudson East	\$680.38	\$1,360.76	\$1,292.72	\$1,700.95	\$1,768.99	\$1,905.06
HMOCOC 20L	Large	HMO	Mid-Hudson East	\$659.44	\$1,318.88	\$1,252.94	\$1,648.60	\$1,714.54	\$1,846.43
HMOCOC 20+L	Large	HMO	Mid-Hudson East	\$672.75	\$1,345.50	\$1,278.23	\$1,681.88	\$1,749.15	\$1,883.70
HMOCOC 25L	Large	HMO	Mid-Hudson East	\$650.83	\$1,301.66	\$1,236.58	\$1,627.08	\$1,692.16	\$1,822.32
HMOCOC 25/40L	Large	HMO	Mid-Hudson East	\$609.64	\$1,219.28	\$1,158.32	\$1,524.10	\$1,585.06	\$1,706.99
HMOCOC 30/50L	Large	HMO	Mid-Hudson East	\$581.27	\$1,162.54	\$1,104.41	\$1,453.18	\$1,511.30	\$1,627.56
HMOCOCBasixL	Large	HMO	Mid-Hudson East	\$603.01	\$1,206.02	\$1,145.72	\$1,507.53	\$1,567.83	\$1,688.43
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson East	\$615.48	\$1,230.96	\$1,169.41	\$1,538.70	\$1,600.25	\$1,723.34
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson East	\$647.67	\$1,295.34	\$1,230.57	\$1,619.18	\$1,683.94	\$1,813.48
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson East	\$575.39	\$1,150.78	\$1,093.24	\$1,438.48	\$1,496.01	\$1,611.09
HMOCOC 2/20L	Large	HMO	Mid-Hudson West	\$635.50	\$1,271.00	\$1,207.45	\$1,588.75	\$1,652.30	\$1,779.40
HMOCOC 10L	Large	HMO	Mid-Hudson West	\$635.64	\$1,271.28	\$1,207.72	\$1,589.10	\$1,652.66	\$1,779.79
HMOCOC 10+L	Large	HMO	Mid-Hudson West	\$642.71	\$1,285.42	\$1,221.15	\$1,606.78	\$1,671.05	\$1,799.59
HMOCOC 15L	Large	HMO	Mid-Hudson West	\$627.98	\$1,255.96	\$1,193.16	\$1,569.95	\$1,632.75	\$1,758.34
HMOCOC 15+L	Large	HMO	Mid-Hudson West	\$634.88	\$1,269.76	\$1,206.27	\$1,587.20	\$1,650.69	\$1,777.66
HMOCOC 20L	Large	HMO	Mid-Hudson West	\$615.30	\$1,230.60	\$1,169.07	\$1,538.25	\$1,599.78	\$1,722.84
HMOCOC 20+L	Large	HMO	Mid-Hudson West	\$627.73	\$1,255.46	\$1,192.69	\$1,569.33	\$1,632.10	\$1,757.64
HMOCOC 25L	Large	HMO	Mid-Hudson West	\$607.28	\$1,214.56	\$1,153.83	\$1,518.20	\$1,578.93	\$1,700.38
HMOCOC 25/40L	Large	HMO	Mid-Hudson West	\$568.86	\$1,137.72	\$1,080.83	\$1,422.15	\$1,479.04	\$1,592.81
HMOCOC 30/50L	Large	HMO	Mid-Hudson West	\$542.40	\$1,084.80	\$1,030.56	\$1,356.00	\$1,410.24	\$1,518.72
HMOCOCBasixL	Large	HMO	Mid-Hudson West	\$562.71	\$1,125.42	\$1,069.15	\$1,406.78	\$1,463.05	\$1,575.59
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson West	\$574.33	\$1,148.66	\$1,091.23	\$1,435.83	\$1,493.26	\$1,608.12
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson West	\$604.34	\$1,208.68	\$1,148.25	\$1,510.85	\$1,571.28	\$1,692.15
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson West	\$536.92	\$1,073.84	\$1,020.15	\$1,342.30	\$1,395.99	\$1,503.38
HMOCOC 2/20L	Large	HMO	NY Metro	\$760.42	\$1,520.84	\$1,444.80	\$1,901.05	\$1,977.09	\$2,129.18
HMOCOC 10L	Large	HMO	NY Metro	\$760.60	\$1,521.20	\$1,445.14	\$1,901.50	\$1,977.56	\$2,129.68
HMOCOC 10+L	Large	HMO	NY Metro	\$769.05	\$1,538.10	\$1,461.20	\$1,922.63	\$1,999.53	\$2,153.34
HMOCOC 15L	Large	HMO	NY Metro	\$751.42	\$1,502.84	\$1,427.70	\$1,878.55	\$1,953.69	\$2,103.98
HMOCOC 15+L	Large	HMO	NY Metro	\$759.68	\$1,519.36	\$1,443.39	\$1,899.20	\$1,975.17	\$2,127.10
HMOCOC 20L	Large	HMO	NY Metro	\$736.25	\$1,472.50	\$1,398.88	\$1,840.63	\$1,914.25	\$2,061.50
HMOCOC 20+L	Large	HMO	NY Metro	\$751.13	\$1,502.26	\$1,427.15	\$1,877.83	\$1,952.94	\$2,103.16
HMOCOC 25L	Large	HMO	NY Metro	\$726.65	\$1,453.30	\$1,380.64	\$1,816.63	\$1,889.29	\$2,034.62
HMOCOC 25/40L	Large	HMO	NY Metro	\$680.65	\$1,361.30	\$1,293.24	\$1,701.63	\$1,769.69	\$1,905.82
HMOCOC 30/50L	Large	HMO	NY Metro	\$648.99	\$1,297.98	\$1,233.08	\$1,622.48	\$1,687.37	\$1,817.17
HMOCOCBasixL	Large	HMO	NY Metro	\$673.30	\$1,346.60	\$1,279.27	\$1,683.25	\$1,750.58	\$1,885.24
HMOCOC 25/40L-3	Large	HMO	NY Metro	\$687.19	\$1,374.38	\$1,305.66	\$1,717.98	\$1,786.69	\$1,924.13
HMOCOC 25L-2 CA	Large	HMO	NY Metro	\$723.16	\$1,446.32	\$1,374.00	\$1,807.90	\$1,880.22	\$2,024.85
HMOCOC 30/50L-2 CA	Large	HMO	NY Metro	\$642.41	\$1,284.82	\$1,220.58	\$1,606.03	\$1,670.27	\$1,798.75
HMOCOC 2/20L	Large	HMO	North Country	\$692.61	\$1,385.22	\$1,315.96	\$1,731.53	\$1,800.79	\$1,939.31
HMOCOC 10L	Large	HMO	North Country	\$692.82	\$1,385.64	\$1,316.36	\$1,732.05	\$1,801.33	\$1,939.90

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Plan Name	Group Size	Plan Type	Rate Region	Second Quarter Rates 2015					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10+L	Large	HMO	North Country	\$700.49	\$1,400.98	\$1,330.93	\$1,751.23	\$1,821.27	\$1,961.37
HMOCOC 15L	Large	HMO	North Country	\$684.41	\$1,368.82	\$1,300.38	\$1,711.03	\$1,779.47	\$1,916.35
HMOCOC 15+L	Large	HMO	North Country	\$691.94	\$1,383.88	\$1,314.69	\$1,729.85	\$1,799.04	\$1,937.43
HMOCOC 20L	Large	HMO	North Country	\$670.62	\$1,341.24	\$1,274.18	\$1,676.55	\$1,743.61	\$1,877.74
HMOCOC 20+L	Large	HMO	North Country	\$684.16	\$1,368.32	\$1,299.90	\$1,710.40	\$1,778.82	\$1,915.65
HMOCOC 25L	Large	HMO	North Country	\$661.86	\$1,323.72	\$1,257.53	\$1,654.65	\$1,720.84	\$1,853.21
HMOCOC 25/40L	Large	HMO	North Country	\$619.96	\$1,239.92	\$1,177.92	\$1,549.90	\$1,611.90	\$1,735.89
HMOCOC 30/50L	Large	HMO	North Country	\$591.13	\$1,182.26	\$1,123.15	\$1,477.83	\$1,536.94	\$1,655.16
HMOCOCBasixL	Large	HMO	North Country	\$613.25	\$1,226.50	\$1,165.18	\$1,533.13	\$1,594.45	\$1,717.10
HMOCOC 25/40L-3	Large	HMO	North Country	\$625.90	\$1,251.80	\$1,189.21	\$1,564.75	\$1,627.34	\$1,752.52
HMOCOC 25L-2 CA	Large	HMO	North Country	\$658.65	\$1,317.30	\$1,251.44	\$1,646.63	\$1,712.49	\$1,844.22
HMOCOC 30/50L-2 CA	Large	HMO	North Country	\$585.14	\$1,170.28	\$1,111.77	\$1,462.85	\$1,521.36	\$1,638.39
HMOCOC 2/20L	Large	HMO	Rochester	\$505.51	\$1,011.02	\$960.47	\$1,263.78	\$1,314.33	\$1,415.43
HMOCOC 10L	Large	HMO	Rochester	\$505.62	\$1,011.24	\$960.68	\$1,264.05	\$1,314.61	\$1,415.74
HMOCOC 10+L	Large	HMO	Rochester	\$511.23	\$1,022.46	\$971.34	\$1,278.08	\$1,329.20	\$1,431.44
HMOCOC 15L	Large	HMO	Rochester	\$499.54	\$999.08	\$949.13	\$1,248.85	\$1,298.80	\$1,398.71
HMOCOC 15+L	Large	HMO	Rochester	\$505.00	\$1,010.00	\$959.50	\$1,262.50	\$1,313.00	\$1,414.00
HMOCOC 20L	Large	HMO	Rochester	\$489.44	\$978.88	\$929.94	\$1,223.60	\$1,272.54	\$1,370.43
HMOCOC 20+L	Large	HMO	Rochester	\$499.33	\$998.66	\$948.73	\$1,248.33	\$1,298.26	\$1,398.12
HMOCOC 25L	Large	HMO	Rochester	\$483.11	\$966.22	\$917.91	\$1,207.78	\$1,256.09	\$1,352.71
HMOCOC 25/40L	Large	HMO	Rochester	\$452.57	\$905.14	\$859.88	\$1,131.43	\$1,176.68	\$1,267.20
HMOCOC 30/50L	Large	HMO	Rochester	\$431.58	\$863.16	\$820.00	\$1,078.95	\$1,122.11	\$1,208.42
HMOCOCBasixL	Large	HMO	Rochester	\$447.69	\$895.38	\$850.61	\$1,119.23	\$1,163.99	\$1,253.53
HMOCOC 25/40L-3	Large	HMO	Rochester	\$456.92	\$913.84	\$868.15	\$1,142.30	\$1,187.99	\$1,279.38
HMOCOC 25L-2 CA	Large	HMO	Rochester	\$480.76	\$961.52	\$913.44	\$1,201.90	\$1,249.98	\$1,346.13
HMOCOC 30/50L-2 CA	Large	HMO	Rochester	\$427.24	\$854.48	\$811.76	\$1,068.10	\$1,110.82	\$1,196.27

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Plan Name	Group Size	Plan Type	Rate Region	Third Quarter Rates 2015					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 2/20L	Large	HMO	Central I	\$652.15	\$1,304.30	\$1,239.09	\$1,630.38	\$1,695.59	\$1,826.02
HMOCOC 10L	Large	HMO	Central I	\$652.28	\$1,304.56	\$1,239.33	\$1,630.70	\$1,695.93	\$1,826.38
HMOCOC 10+L	Large	HMO	Central I	\$659.53	\$1,319.06	\$1,253.11	\$1,648.83	\$1,714.78	\$1,846.68
HMOCOC 15L	Large	HMO	Central I	\$644.41	\$1,288.82	\$1,224.38	\$1,611.03	\$1,675.47	\$1,804.35
HMOCOC 15+L	Large	HMO	Central I	\$651.48	\$1,302.96	\$1,237.81	\$1,628.70	\$1,693.85	\$1,824.14
HMOCOC 20L	Large	HMO	Central I	\$631.41	\$1,262.82	\$1,199.68	\$1,578.53	\$1,641.67	\$1,767.95
HMOCOC 20+L	Large	HMO	Central I	\$644.16	\$1,288.32	\$1,223.90	\$1,610.40	\$1,674.82	\$1,803.65
HMOCOC 25L	Large	HMO	Central I	\$623.16	\$1,246.32	\$1,184.00	\$1,557.90	\$1,620.22	\$1,744.85
HMOCOC 25/40L	Large	HMO	Central I	\$583.72	\$1,167.44	\$1,109.07	\$1,459.30	\$1,517.67	\$1,634.42
HMOCOC 30/50L	Large	HMO	Central I	\$556.60	\$1,113.20	\$1,057.54	\$1,391.50	\$1,447.16	\$1,558.48
HMOCOCBasixL	Large	HMO	Central I	\$577.45	\$1,154.90	\$1,097.16	\$1,443.63	\$1,501.37	\$1,616.86
HMOCOC 25/40L-3	Large	HMO	Central I	\$589.36	\$1,178.72	\$1,119.78	\$1,473.40	\$1,532.34	\$1,650.21
HMOCOC 25L-2 CA	Large	HMO	Central I	\$620.18	\$1,240.36	\$1,178.34	\$1,550.45	\$1,612.47	\$1,736.50
HMOCOC 30/50L-2 CA	Large	HMO	Central I	\$550.99	\$1,101.98	\$1,046.88	\$1,377.48	\$1,432.57	\$1,542.77
HMOCOC 2/20L	Large	HMO	Central II	\$632.71	\$1,265.42	\$1,202.15	\$1,581.78	\$1,645.05	\$1,771.59
HMOCOC 10L	Large	HMO	Central II	\$632.84	\$1,265.68	\$1,202.40	\$1,582.10	\$1,645.38	\$1,771.95
HMOCOC 10+L	Large	HMO	Central II	\$639.86	\$1,279.72	\$1,215.73	\$1,599.65	\$1,663.64	\$1,791.61
HMOCOC 15L	Large	HMO	Central II	\$625.22	\$1,250.44	\$1,187.92	\$1,563.05	\$1,625.57	\$1,750.62
HMOCOC 15+L	Large	HMO	Central II	\$632.07	\$1,264.14	\$1,200.93	\$1,580.18	\$1,643.38	\$1,769.80
HMOCOC 20L	Large	HMO	Central II	\$612.59	\$1,225.18	\$1,163.92	\$1,531.48	\$1,592.73	\$1,715.25
HMOCOC 20+L	Large	HMO	Central II	\$624.95	\$1,249.90	\$1,187.41	\$1,562.38	\$1,624.87	\$1,749.86
HMOCOC 25L	Large	HMO	Central II	\$604.61	\$1,209.22	\$1,148.76	\$1,511.53	\$1,571.99	\$1,692.91
HMOCOC 25/40L	Large	HMO	Central II	\$566.33	\$1,132.66	\$1,076.03	\$1,415.83	\$1,472.46	\$1,585.72
HMOCOC 30/50L	Large	HMO	Central II	\$540.02	\$1,080.04	\$1,026.04	\$1,350.05	\$1,404.05	\$1,512.06
HMOCOCBasixL	Large	HMO	Central II	\$560.25	\$1,120.50	\$1,064.48	\$1,400.63	\$1,456.65	\$1,568.70
HMOCOC 25/40L-3	Large	HMO	Central II	\$571.80	\$1,143.60	\$1,086.42	\$1,429.50	\$1,486.68	\$1,601.04
HMOCOC 25L-2 CA	Large	HMO	Central II	\$601.68	\$1,203.36	\$1,143.19	\$1,504.20	\$1,564.37	\$1,684.70
HMOCOC 30/50L-2 CA	Large	HMO	Central II	\$534.57	\$1,069.14	\$1,015.68	\$1,336.43	\$1,389.88	\$1,496.80
HMOCOC 2/20L	Large	HMO	Central III	\$684.57	\$1,369.14	\$1,300.68	\$1,711.43	\$1,779.88	\$1,916.80
HMOCOC 10L	Large	HMO	Central III	\$684.70	\$1,369.40	\$1,300.93	\$1,711.75	\$1,780.22	\$1,917.16
HMOCOC 10+L	Large	HMO	Central III	\$692.30	\$1,384.60	\$1,315.37	\$1,730.75	\$1,799.98	\$1,938.44
HMOCOC 15L	Large	HMO	Central III	\$676.45	\$1,352.90	\$1,285.26	\$1,691.13	\$1,758.77	\$1,894.06
HMOCOC 15+L	Large	HMO	Central III	\$683.87	\$1,367.74	\$1,299.35	\$1,709.68	\$1,778.06	\$1,914.84
HMOCOC 20L	Large	HMO	Central III	\$662.81	\$1,325.62	\$1,259.34	\$1,657.03	\$1,723.31	\$1,855.87
HMOCOC 20+L	Large	HMO	Central III	\$676.14	\$1,352.28	\$1,284.67	\$1,690.35	\$1,757.96	\$1,893.19
HMOCOC 25L	Large	HMO	Central III	\$654.13	\$1,308.26	\$1,242.85	\$1,635.33	\$1,700.74	\$1,831.56
HMOCOC 25/40L	Large	HMO	Central III	\$612.70	\$1,225.40	\$1,164.13	\$1,531.75	\$1,593.02	\$1,715.56
HMOCOC 30/50L	Large	HMO	Central III	\$584.24	\$1,168.48	\$1,110.06	\$1,460.60	\$1,519.02	\$1,635.87
HMOCOCBasixL	Large	HMO	Central III	\$606.11	\$1,212.22	\$1,151.61	\$1,515.28	\$1,575.89	\$1,697.11
HMOCOC 25/40L-3	Large	HMO	Central III	\$618.63	\$1,237.26	\$1,175.40	\$1,546.58	\$1,608.44	\$1,732.16
HMOCOC 25L-2 CA	Large	HMO	Central III	\$650.99	\$1,301.98	\$1,236.88	\$1,627.48	\$1,692.57	\$1,822.77
HMOCOC 30/50L-2 CA	Large	HMO	Central III	\$578.34	\$1,156.68	\$1,098.85	\$1,445.85	\$1,503.68	\$1,619.35
HMOCOC 2/20L	Large	HMO	East I	\$604.91	\$1,209.82	\$1,149.33	\$1,512.28	\$1,572.77	\$1,693.75
HMOCOC 10L	Large	HMO	East I	\$605.06	\$1,210.12	\$1,149.61	\$1,512.65	\$1,573.16	\$1,694.17
HMOCOC 10+L	Large	HMO	East I	\$611.75	\$1,223.50	\$1,162.33	\$1,529.38	\$1,590.55	\$1,712.90
HMOCOC 15L	Large	HMO	East I	\$597.73	\$1,195.46	\$1,135.69	\$1,494.33	\$1,554.10	\$1,673.64
HMOCOC 15+L	Large	HMO	East I	\$604.29	\$1,208.58	\$1,148.15	\$1,510.73	\$1,571.15	\$1,692.01
HMOCOC 20L	Large	HMO	East I	\$585.70	\$1,171.40	\$1,112.83	\$1,464.25	\$1,522.82	\$1,639.96
HMOCOC 20+L	Large	HMO	East I	\$597.49	\$1,194.98	\$1,135.23	\$1,493.73	\$1,553.47	\$1,672.97
HMOCOC 25L	Large	HMO	East I	\$578.04	\$1,156.08	\$1,098.28	\$1,445.10	\$1,502.90	\$1,618.51
HMOCOC 25/40L	Large	HMO	East I	\$541.45	\$1,082.90	\$1,028.76	\$1,353.63	\$1,407.77	\$1,516.06
HMOCOC 30/50L	Large	HMO	East I	\$516.32	\$1,032.64	\$981.01	\$1,290.80	\$1,342.43	\$1,445.70
HMOCOCBasixL	Large	HMO	East I	\$535.63	\$1,071.26	\$1,017.70	\$1,339.08	\$1,392.64	\$1,499.76
HMOCOC 25/40L-3	Large	HMO	East I	\$546.68	\$1,093.36	\$1,038.69	\$1,366.70	\$1,421.37	\$1,530.70
HMOCOC 25L-2 CA	Large	HMO	East I	\$575.26	\$1,150.52	\$1,092.99	\$1,438.15	\$1,495.68	\$1,610.73
HMOCOC 30/50L-2 CA	Large	HMO	East I	\$511.10	\$1,022.20	\$971.09	\$1,277.75	\$1,328.86	\$1,431.08
HMOCOC 2/20L	Large	HMO	East II	\$647.80	\$1,295.60	\$1,230.82	\$1,619.50	\$1,684.28	\$1,813.84

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Plan Name	Group Size	Plan Type	Rate Region	Third Quarter Rates 2015					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	East II	\$647.98	\$1,295.96	\$1,231.16	\$1,619.95	\$1,684.75	\$1,814.34
HMOCOC 10+L	Large	HMO	East II	\$655.15	\$1,310.30	\$1,244.79	\$1,637.88	\$1,703.39	\$1,834.42
HMOCOC 15L	Large	HMO	East II	\$640.15	\$1,280.30	\$1,216.29	\$1,600.38	\$1,664.39	\$1,792.42
HMOCOC 15+L	Large	HMO	East II	\$647.16	\$1,294.32	\$1,229.60	\$1,617.90	\$1,682.62	\$1,812.05
HMOCOC 20L	Large	HMO	East II	\$627.24	\$1,254.48	\$1,191.76	\$1,568.10	\$1,630.82	\$1,756.27
HMOCOC 20+L	Large	HMO	East II	\$639.91	\$1,279.82	\$1,215.83	\$1,599.78	\$1,663.77	\$1,791.75
HMOCOC 25L	Large	HMO	East II	\$619.04	\$1,238.08	\$1,176.18	\$1,547.60	\$1,609.50	\$1,733.31
HMOCOC 25/40L	Large	HMO	East II	\$579.86	\$1,159.72	\$1,101.73	\$1,449.65	\$1,507.64	\$1,623.61
HMOCOC 30/50L	Large	HMO	East II	\$552.93	\$1,105.86	\$1,050.57	\$1,382.33	\$1,437.62	\$1,548.20
HMOCOCBasixL	Large	HMO	East II	\$573.60	\$1,147.20	\$1,089.84	\$1,434.00	\$1,491.36	\$1,606.08
HMOCOC 25/40L-3	Large	HMO	East II	\$585.44	\$1,170.88	\$1,112.34	\$1,463.60	\$1,522.14	\$1,639.23
HMOCOC 25L-2 CA	Large	HMO	East II	\$616.07	\$1,232.14	\$1,170.53	\$1,540.18	\$1,601.78	\$1,725.00
HMOCOC 30/50L-2 CA	Large	HMO	East II	\$547.33	\$1,094.66	\$1,039.93	\$1,368.33	\$1,423.06	\$1,532.52
HMOCOC 2/20L	Large	HMO	Mid-Hudson East	\$691.30	\$1,382.60	\$1,313.47	\$1,728.25	\$1,797.38	\$1,935.64
HMOCOC 10L	Large	HMO	Mid-Hudson East	\$691.45	\$1,382.90	\$1,313.76	\$1,728.63	\$1,797.77	\$1,936.06
HMOCOC 10+L	Large	HMO	Mid-Hudson East	\$699.12	\$1,398.24	\$1,328.33	\$1,747.80	\$1,817.71	\$1,957.54
HMOCOC 15L	Large	HMO	Mid-Hudson East	\$683.12	\$1,366.24	\$1,297.93	\$1,707.80	\$1,776.11	\$1,912.74
HMOCOC 15+L	Large	HMO	Mid-Hudson East	\$690.59	\$1,381.18	\$1,312.12	\$1,726.48	\$1,795.53	\$1,933.65
HMOCOC 20L	Large	HMO	Mid-Hudson East	\$669.33	\$1,338.66	\$1,271.73	\$1,673.33	\$1,740.26	\$1,874.12
HMOCOC 20+L	Large	HMO	Mid-Hudson East	\$682.84	\$1,365.68	\$1,297.40	\$1,707.10	\$1,775.38	\$1,911.95
HMOCOC 25L	Large	HMO	Mid-Hudson East	\$660.59	\$1,321.18	\$1,255.12	\$1,651.48	\$1,717.53	\$1,849.65
HMOCOC 25/40L	Large	HMO	Mid-Hudson East	\$618.78	\$1,237.56	\$1,175.68	\$1,546.95	\$1,608.83	\$1,732.58
HMOCOC 30/50L	Large	HMO	Mid-Hudson East	\$589.99	\$1,179.98	\$1,120.98	\$1,474.98	\$1,533.97	\$1,651.97
HMOCOCBasixL	Large	HMO	Mid-Hudson East	\$612.06	\$1,224.12	\$1,162.91	\$1,530.15	\$1,591.36	\$1,713.77
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson East	\$624.71	\$1,249.42	\$1,186.95	\$1,561.78	\$1,624.25	\$1,749.19
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson East	\$657.39	\$1,314.78	\$1,249.04	\$1,643.48	\$1,709.21	\$1,840.69
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson East	\$584.02	\$1,168.04	\$1,109.64	\$1,460.05	\$1,518.45	\$1,635.26
HMOCOC 2/20L	Large	HMO	Mid-Hudson West	\$645.03	\$1,290.06	\$1,225.56	\$1,612.58	\$1,677.08	\$1,806.08
HMOCOC 10L	Large	HMO	Mid-Hudson West	\$645.17	\$1,290.34	\$1,225.82	\$1,612.93	\$1,677.44	\$1,806.48
HMOCOC 10+L	Large	HMO	Mid-Hudson West	\$652.35	\$1,304.70	\$1,239.47	\$1,630.88	\$1,696.11	\$1,826.58
HMOCOC 15L	Large	HMO	Mid-Hudson West	\$637.40	\$1,274.80	\$1,211.06	\$1,593.50	\$1,657.24	\$1,784.72
HMOCOC 15+L	Large	HMO	Mid-Hudson West	\$644.40	\$1,288.80	\$1,224.36	\$1,611.00	\$1,675.44	\$1,804.32
HMOCOC 20L	Large	HMO	Mid-Hudson West	\$624.53	\$1,249.06	\$1,186.61	\$1,561.33	\$1,623.78	\$1,748.68
HMOCOC 20+L	Large	HMO	Mid-Hudson West	\$637.15	\$1,274.30	\$1,210.59	\$1,592.88	\$1,656.59	\$1,784.02
HMOCOC 25L	Large	HMO	Mid-Hudson West	\$616.39	\$1,232.78	\$1,171.14	\$1,540.98	\$1,602.61	\$1,725.89
HMOCOC 25/40L	Large	HMO	Mid-Hudson West	\$577.39	\$1,154.78	\$1,097.04	\$1,443.48	\$1,501.21	\$1,616.69
HMOCOC 30/50L	Large	HMO	Mid-Hudson West	\$550.54	\$1,101.08	\$1,046.03	\$1,376.35	\$1,431.40	\$1,541.51
HMOCOCBasixL	Large	HMO	Mid-Hudson West	\$571.15	\$1,142.30	\$1,085.19	\$1,427.88	\$1,484.99	\$1,599.22
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson West	\$582.94	\$1,165.88	\$1,107.59	\$1,457.35	\$1,515.64	\$1,632.23
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson West	\$613.41	\$1,226.82	\$1,165.48	\$1,533.53	\$1,594.87	\$1,717.55
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson West	\$544.97	\$1,089.94	\$1,035.44	\$1,362.43	\$1,416.92	\$1,525.92
HMOCOC 2/20L	Large	HMO	NY Metro	\$771.83	\$1,543.66	\$1,466.48	\$1,929.58	\$2,006.76	\$2,161.12
HMOCOC 10L	Large	HMO	NY Metro	\$772.01	\$1,544.02	\$1,466.82	\$1,930.03	\$2,007.23	\$2,161.63
HMOCOC 10+L	Large	HMO	NY Metro	\$780.59	\$1,561.18	\$1,483.12	\$1,951.48	\$2,029.53	\$2,185.65
HMOCOC 15L	Large	HMO	NY Metro	\$762.69	\$1,525.38	\$1,449.11	\$1,906.73	\$1,982.99	\$2,135.53
HMOCOC 15+L	Large	HMO	NY Metro	\$771.08	\$1,542.16	\$1,465.05	\$1,927.70	\$2,004.81	\$2,159.02
HMOCOC 20L	Large	HMO	NY Metro	\$747.29	\$1,494.58	\$1,419.85	\$1,868.23	\$1,942.95	\$2,092.41
HMOCOC 20+L	Large	HMO	NY Metro	\$762.40	\$1,524.80	\$1,448.56	\$1,906.00	\$1,982.24	\$2,134.72
HMOCOC 25L	Large	HMO	NY Metro	\$737.55	\$1,475.10	\$1,401.35	\$1,843.88	\$1,917.63	\$2,065.14
HMOCOC 25/40L	Large	HMO	NY Metro	\$690.86	\$1,381.72	\$1,312.63	\$1,727.15	\$1,796.24	\$1,934.41
HMOCOC 30/50L	Large	HMO	NY Metro	\$658.72	\$1,317.44	\$1,251.57	\$1,646.80	\$1,712.67	\$1,844.42
HMOCOCBasixL	Large	HMO	NY Metro	\$683.40	\$1,366.80	\$1,298.46	\$1,708.50	\$1,776.84	\$1,913.52
HMOCOC 25/40L-3	Large	HMO	NY Metro	\$697.50	\$1,395.00	\$1,325.25	\$1,743.75	\$1,813.50	\$1,953.00
HMOCOC 25L-2 CA	Large	HMO	NY Metro	\$734.01	\$1,468.02	\$1,394.62	\$1,835.03	\$1,908.43	\$2,055.23
HMOCOC 30/50L-2 CA	Large	HMO	NY Metro	\$652.05	\$1,304.10	\$1,238.90	\$1,630.13	\$1,695.33	\$1,825.74
HMOCOC 2/20L	Large	HMO	North Country	\$703.00	\$1,406.00	\$1,335.70	\$1,757.50	\$1,827.80	\$1,968.40
HMOCOC 10L	Large	HMO	North Country	\$703.21	\$1,406.42	\$1,336.10	\$1,758.03	\$1,828.35	\$1,968.99

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Plan Name	Group Size	Plan Type	Rate Region	Third Quarter Rates 2015					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10+L	Large	HMO	North Country	\$711.00	\$1,422.00	\$1,350.90	\$1,777.50	\$1,848.60	\$1,990.80
HMOCOC 15L	Large	HMO	North Country	\$694.68	\$1,389.36	\$1,319.89	\$1,736.70	\$1,806.17	\$1,945.10
HMOCOC 15+L	Large	HMO	North Country	\$702.32	\$1,404.64	\$1,334.41	\$1,755.80	\$1,826.03	\$1,966.50
HMOCOC 20L	Large	HMO	North Country	\$680.68	\$1,361.36	\$1,293.29	\$1,701.70	\$1,769.77	\$1,905.90
HMOCOC 20+L	Large	HMO	North Country	\$694.42	\$1,388.84	\$1,319.40	\$1,736.05	\$1,805.49	\$1,944.38
HMOCOC 25L	Large	HMO	North Country	\$671.79	\$1,343.58	\$1,276.40	\$1,679.48	\$1,746.65	\$1,881.01
HMOCOC 25/40L	Large	HMO	North Country	\$629.26	\$1,258.52	\$1,195.59	\$1,573.15	\$1,636.08	\$1,761.93
HMOCOC 30/50L	Large	HMO	North Country	\$600.00	\$1,200.00	\$1,140.00	\$1,500.00	\$1,560.00	\$1,680.00
HMOCOCBasixL	Large	HMO	North Country	\$622.45	\$1,244.90	\$1,182.66	\$1,556.13	\$1,618.37	\$1,742.86
HMOCOC 25/40L-3	Large	HMO	North Country	\$635.29	\$1,270.58	\$1,207.05	\$1,588.23	\$1,651.75	\$1,778.81
HMOCOC 25L-2 CA	Large	HMO	North Country	\$668.53	\$1,337.06	\$1,270.21	\$1,671.33	\$1,738.18	\$1,871.88
HMOCOC 30/50L-2 CA	Large	HMO	North Country	\$593.92	\$1,187.84	\$1,128.45	\$1,484.80	\$1,544.19	\$1,662.98
HMOCOC 2/20L	Large	HMO	Rochester	\$513.09	\$1,026.18	\$974.87	\$1,282.73	\$1,334.03	\$1,436.65
HMOCOC 10L	Large	HMO	Rochester	\$513.20	\$1,026.40	\$975.08	\$1,283.00	\$1,334.32	\$1,436.96
HMOCOC 10+L	Large	HMO	Rochester	\$518.90	\$1,037.80	\$985.91	\$1,297.25	\$1,349.14	\$1,452.92
HMOCOC 15L	Large	HMO	Rochester	\$507.03	\$1,014.06	\$963.36	\$1,267.58	\$1,318.28	\$1,419.68
HMOCOC 15+L	Large	HMO	Rochester	\$512.58	\$1,025.16	\$973.90	\$1,281.45	\$1,332.71	\$1,435.22
HMOCOC 20L	Large	HMO	Rochester	\$496.78	\$993.56	\$943.88	\$1,241.95	\$1,291.63	\$1,390.98
HMOCOC 20+L	Large	HMO	Rochester	\$506.82	\$1,013.64	\$962.96	\$1,267.05	\$1,317.73	\$1,419.10
HMOCOC 25L	Large	HMO	Rochester	\$490.36	\$980.72	\$931.68	\$1,225.90	\$1,274.94	\$1,373.01
HMOCOC 25/40L	Large	HMO	Rochester	\$459.36	\$918.72	\$872.78	\$1,148.40	\$1,194.34	\$1,286.21
HMOCOC 30/50L	Large	HMO	Rochester	\$438.05	\$876.10	\$832.30	\$1,095.13	\$1,138.93	\$1,226.54
HMOCOCBasixL	Large	HMO	Rochester	\$454.41	\$908.82	\$863.38	\$1,136.03	\$1,181.47	\$1,272.35
HMOCOC 25/40L-3	Large	HMO	Rochester	\$463.77	\$927.54	\$881.16	\$1,159.43	\$1,205.80	\$1,298.56
HMOCOC 25L-2 CA	Large	HMO	Rochester	\$487.97	\$975.94	\$927.14	\$1,219.93	\$1,268.72	\$1,366.32
HMOCOC 30/50L-2 CA	Large	HMO	Rochester	\$433.65	\$867.30	\$823.94	\$1,084.13	\$1,127.49	\$1,214.22

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Plan Name	Group Size	Plan Type	Rate Region	Fourth Quarter Rates 2015					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 2/20L	Large	HMO	Central I	\$661.93	\$1,323.86	\$1,257.67	\$1,654.83	\$1,721.02	\$1,853.40
HMOCOC 10L	Large	HMO	Central I	\$662.06	\$1,324.12	\$1,257.91	\$1,655.15	\$1,721.36	\$1,853.77
HMOCOC 10+L	Large	HMO	Central I	\$669.42	\$1,338.84	\$1,271.90	\$1,673.55	\$1,740.49	\$1,874.38
HMOCOC 15L	Large	HMO	Central I	\$654.08	\$1,308.16	\$1,242.75	\$1,635.20	\$1,700.61	\$1,831.42
HMOCOC 15+L	Large	HMO	Central I	\$661.25	\$1,322.50	\$1,256.38	\$1,653.13	\$1,719.25	\$1,851.50
HMOCOC 20L	Large	HMO	Central I	\$640.88	\$1,281.76	\$1,217.67	\$1,602.20	\$1,666.29	\$1,794.46
HMOCOC 20+L	Large	HMO	Central I	\$653.82	\$1,307.64	\$1,242.26	\$1,634.55	\$1,699.93	\$1,830.70
HMOCOC 25L	Large	HMO	Central I	\$632.51	\$1,265.02	\$1,201.77	\$1,581.28	\$1,644.53	\$1,771.03
HMOCOC 25/40L	Large	HMO	Central I	\$592.48	\$1,184.96	\$1,125.71	\$1,481.20	\$1,540.45	\$1,658.94
HMOCOC 30/50L	Large	HMO	Central I	\$564.95	\$1,129.90	\$1,073.41	\$1,412.38	\$1,468.87	\$1,581.86
HMOCOCBasixL	Large	HMO	Central I	\$586.11	\$1,172.22	\$1,113.61	\$1,465.28	\$1,523.89	\$1,641.11
HMOCOC 25/40L-3	Large	HMO	Central I	\$598.20	\$1,196.40	\$1,136.58	\$1,495.50	\$1,555.32	\$1,674.96
HMOCOC 25L-2 CA	Large	HMO	Central I	\$629.48	\$1,258.96	\$1,196.01	\$1,573.70	\$1,636.65	\$1,762.54
HMOCOC 30/50L-2 CA	Large	HMO	Central I	\$559.25	\$1,118.50	\$1,062.58	\$1,398.13	\$1,454.05	\$1,565.90
HMOCOC 2/20L	Large	HMO	Central II	\$642.20	\$1,284.40	\$1,220.18	\$1,605.50	\$1,669.72	\$1,798.16
HMOCOC 10L	Large	HMO	Central II	\$642.33	\$1,284.66	\$1,220.43	\$1,605.83	\$1,670.06	\$1,798.52
HMOCOC 10+L	Large	HMO	Central II	\$649.46	\$1,298.92	\$1,233.97	\$1,623.65	\$1,688.60	\$1,818.49
HMOCOC 15L	Large	HMO	Central II	\$634.60	\$1,269.20	\$1,205.74	\$1,586.50	\$1,649.96	\$1,776.88
HMOCOC 15+L	Large	HMO	Central II	\$641.55	\$1,283.10	\$1,218.95	\$1,603.88	\$1,668.03	\$1,796.34
HMOCOC 20L	Large	HMO	Central II	\$621.78	\$1,243.56	\$1,181.38	\$1,554.45	\$1,616.63	\$1,740.98
HMOCOC 20+L	Large	HMO	Central II	\$634.32	\$1,268.64	\$1,205.21	\$1,585.80	\$1,649.23	\$1,776.10
HMOCOC 25L	Large	HMO	Central II	\$613.68	\$1,227.36	\$1,165.99	\$1,534.20	\$1,595.57	\$1,718.30
HMOCOC 25/40L	Large	HMO	Central II	\$574.82	\$1,149.64	\$1,092.16	\$1,437.05	\$1,494.53	\$1,609.50
HMOCOC 30/50L	Large	HMO	Central II	\$548.12	\$1,096.24	\$1,041.43	\$1,370.30	\$1,425.11	\$1,534.74
HMOCOCBasixL	Large	HMO	Central II	\$568.65	\$1,137.30	\$1,080.44	\$1,421.63	\$1,478.49	\$1,592.22
HMOCOC 25/40L-3	Large	HMO	Central II	\$580.38	\$1,160.76	\$1,102.72	\$1,450.95	\$1,508.99	\$1,625.06
HMOCOC 25L-2 CA	Large	HMO	Central II	\$610.71	\$1,221.42	\$1,160.35	\$1,526.78	\$1,587.85	\$1,709.99
HMOCOC 30/50L-2 CA	Large	HMO	Central II	\$542.59	\$1,085.18	\$1,030.92	\$1,356.48	\$1,410.73	\$1,519.25
HMOCOC 2/20L	Large	HMO	Central III	\$694.84	\$1,389.68	\$1,320.20	\$1,737.10	\$1,806.58	\$1,945.55
HMOCOC 10L	Large	HMO	Central III	\$694.97	\$1,389.94	\$1,320.44	\$1,737.43	\$1,806.92	\$1,945.92
HMOCOC 10+L	Large	HMO	Central III	\$702.68	\$1,405.36	\$1,335.09	\$1,756.70	\$1,826.97	\$1,967.50
HMOCOC 15L	Large	HMO	Central III	\$686.60	\$1,373.20	\$1,304.54	\$1,716.50	\$1,785.16	\$1,922.48
HMOCOC 15+L	Large	HMO	Central III	\$694.13	\$1,388.26	\$1,318.85	\$1,735.33	\$1,804.74	\$1,943.56
HMOCOC 20L	Large	HMO	Central III	\$672.75	\$1,345.50	\$1,278.23	\$1,681.88	\$1,749.15	\$1,883.70
HMOCOC 20+L	Large	HMO	Central III	\$686.28	\$1,372.56	\$1,303.93	\$1,715.70	\$1,784.33	\$1,921.58
HMOCOC 25L	Large	HMO	Central III	\$663.94	\$1,327.88	\$1,261.49	\$1,659.85	\$1,726.24	\$1,859.03
HMOCOC 25/40L	Large	HMO	Central III	\$621.89	\$1,243.78	\$1,181.59	\$1,554.73	\$1,616.91	\$1,741.29
HMOCOC 30/50L	Large	HMO	Central III	\$593.00	\$1,186.00	\$1,126.70	\$1,482.50	\$1,541.80	\$1,660.40
HMOCOCBasixL	Large	HMO	Central III	\$615.20	\$1,230.40	\$1,168.88	\$1,538.00	\$1,599.52	\$1,722.56
HMOCOC 25/40L-3	Large	HMO	Central III	\$627.91	\$1,255.82	\$1,193.03	\$1,569.78	\$1,632.57	\$1,758.15
HMOCOC 25L-2 CA	Large	HMO	Central III	\$660.75	\$1,321.50	\$1,255.43	\$1,651.88	\$1,717.95	\$1,850.10
HMOCOC 30/50L-2 CA	Large	HMO	Central III	\$587.02	\$1,174.04	\$1,115.34	\$1,467.55	\$1,526.25	\$1,643.66
HMOCOC 2/20L	Large	HMO	East I	\$613.98	\$1,227.96	\$1,166.56	\$1,534.95	\$1,596.35	\$1,719.14
HMOCOC 10L	Large	HMO	East I	\$614.14	\$1,228.28	\$1,166.87	\$1,535.35	\$1,596.76	\$1,719.59
HMOCOC 10+L	Large	HMO	East I	\$620.93	\$1,241.86	\$1,179.77	\$1,552.33	\$1,614.42	\$1,738.60
HMOCOC 15L	Large	HMO	East I	\$606.70	\$1,213.40	\$1,152.73	\$1,516.75	\$1,577.42	\$1,698.76
HMOCOC 15+L	Large	HMO	East I	\$613.35	\$1,226.70	\$1,165.37	\$1,533.38	\$1,594.71	\$1,717.38
HMOCOC 20L	Large	HMO	East I	\$594.49	\$1,188.98	\$1,129.53	\$1,486.23	\$1,545.67	\$1,664.57
HMOCOC 20+L	Large	HMO	East I	\$606.45	\$1,212.90	\$1,152.26	\$1,516.13	\$1,576.77	\$1,698.06
HMOCOC 25L	Large	HMO	East I	\$586.71	\$1,173.42	\$1,114.75	\$1,466.78	\$1,525.45	\$1,642.79
HMOCOC 25/40L	Large	HMO	East I	\$549.57	\$1,099.14	\$1,044.18	\$1,373.93	\$1,428.88	\$1,538.80
HMOCOC 30/50L	Large	HMO	East I	\$524.06	\$1,048.12	\$995.71	\$1,310.15	\$1,362.56	\$1,467.37
HMOCOCBasixL	Large	HMO	East I	\$543.66	\$1,087.32	\$1,032.95	\$1,359.15	\$1,413.52	\$1,522.25
HMOCOC 25/40L-3	Large	HMO	East I	\$554.88	\$1,109.76	\$1,054.27	\$1,387.20	\$1,442.69	\$1,553.66
HMOCOC 25L-2 CA	Large	HMO	East I	\$583.89	\$1,167.78	\$1,109.39	\$1,459.73	\$1,518.11	\$1,634.89
HMOCOC 30/50L-2 CA	Large	HMO	East I	\$518.77	\$1,037.54	\$985.66	\$1,296.93	\$1,348.80	\$1,452.56
HMOCOC 2/20L	Large	HMO	East II	\$657.52	\$1,315.04	\$1,249.29	\$1,643.80	\$1,709.55	\$1,841.06

MVP Health Plan, Inc.
Article 44
Jan 1, 2015
Current Year Premiums

Exhibit C
Version 7/18/2014

Plan Name	Group Size	Plan Type	Rate Region	Fourth Quarter Rates 2015					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	East II	\$657.70	\$1,315.40	\$1,249.63	\$1,644.25	\$1,710.02	\$1,841.56
HMOCOC 10+L	Large	HMO	East II	\$664.98	\$1,329.96	\$1,263.46	\$1,662.45	\$1,728.95	\$1,861.94
HMOCOC 15L	Large	HMO	East II	\$649.75	\$1,299.50	\$1,234.53	\$1,624.38	\$1,689.35	\$1,819.30
HMOCOC 15+L	Large	HMO	East II	\$656.87	\$1,313.74	\$1,248.05	\$1,642.18	\$1,707.86	\$1,839.24
HMOCOC 20L	Large	HMO	East II	\$636.65	\$1,273.30	\$1,209.64	\$1,591.63	\$1,655.29	\$1,782.62
HMOCOC 20+L	Large	HMO	East II	\$649.51	\$1,299.02	\$1,234.07	\$1,623.78	\$1,688.73	\$1,818.63
HMOCOC 25L	Large	HMO	East II	\$628.33	\$1,256.66	\$1,193.83	\$1,570.83	\$1,633.66	\$1,759.32
HMOCOC 25/40L	Large	HMO	East II	\$588.56	\$1,177.12	\$1,118.26	\$1,471.40	\$1,530.26	\$1,647.97
HMOCOC 30/50L	Large	HMO	East II	\$561.22	\$1,122.44	\$1,066.32	\$1,403.05	\$1,459.17	\$1,571.42
HMOCOCBasixL	Large	HMO	East II	\$582.20	\$1,164.40	\$1,106.18	\$1,455.50	\$1,513.72	\$1,630.16
HMOCOC 25/40L-3	Large	HMO	East II	\$594.22	\$1,188.44	\$1,129.02	\$1,485.55	\$1,544.97	\$1,663.82
HMOCOC 25L-2 CA	Large	HMO	East II	\$625.31	\$1,250.62	\$1,188.09	\$1,563.28	\$1,625.81	\$1,750.87
HMOCOC 30/50L-2 CA	Large	HMO	East II	\$555.54	\$1,111.08	\$1,055.53	\$1,388.85	\$1,444.40	\$1,555.51
HMOCOC 2/20L	Large	HMO	Mid-Hudson East	\$701.67	\$1,403.34	\$1,333.17	\$1,754.18	\$1,824.34	\$1,964.68
HMOCOC 10L	Large	HMO	Mid-Hudson East	\$701.82	\$1,403.64	\$1,333.46	\$1,754.55	\$1,824.73	\$1,965.10
HMOCOC 10+L	Large	HMO	Mid-Hudson East	\$709.61	\$1,419.22	\$1,348.26	\$1,774.03	\$1,844.99	\$1,986.91
HMOCOC 15L	Large	HMO	Mid-Hudson East	\$693.37	\$1,386.74	\$1,317.40	\$1,733.43	\$1,802.76	\$1,941.44
HMOCOC 15+L	Large	HMO	Mid-Hudson East	\$700.95	\$1,401.90	\$1,331.81	\$1,752.38	\$1,822.47	\$1,962.66
HMOCOC 20L	Large	HMO	Mid-Hudson East	\$679.37	\$1,358.74	\$1,290.80	\$1,698.43	\$1,766.36	\$1,902.24
HMOCOC 20+L	Large	HMO	Mid-Hudson East	\$693.08	\$1,386.16	\$1,316.85	\$1,732.70	\$1,802.01	\$1,940.62
HMOCOC 25L	Large	HMO	Mid-Hudson East	\$670.50	\$1,341.00	\$1,273.95	\$1,676.25	\$1,743.30	\$1,877.40
HMOCOC 25/40L	Large	HMO	Mid-Hudson East	\$628.06	\$1,256.12	\$1,193.31	\$1,570.15	\$1,632.96	\$1,758.57
HMOCOC 30/50L	Large	HMO	Mid-Hudson East	\$598.84	\$1,197.68	\$1,137.80	\$1,497.10	\$1,556.98	\$1,676.75
HMOCOCBasixL	Large	HMO	Mid-Hudson East	\$621.24	\$1,242.48	\$1,180.36	\$1,553.10	\$1,615.22	\$1,739.47
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson East	\$634.08	\$1,268.16	\$1,204.75	\$1,585.20	\$1,648.61	\$1,775.42
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson East	\$667.25	\$1,334.50	\$1,267.78	\$1,668.13	\$1,734.85	\$1,868.30
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson East	\$592.78	\$1,185.56	\$1,126.28	\$1,481.95	\$1,541.23	\$1,659.78
HMOCOC 2/20L	Large	HMO	Mid-Hudson West	\$654.71	\$1,309.42	\$1,243.95	\$1,636.78	\$1,702.25	\$1,833.19
HMOCOC 10L	Large	HMO	Mid-Hudson West	\$654.85	\$1,309.70	\$1,244.22	\$1,637.13	\$1,702.61	\$1,833.58
HMOCOC 10+L	Large	HMO	Mid-Hudson West	\$662.14	\$1,324.28	\$1,258.07	\$1,655.35	\$1,721.56	\$1,853.99
HMOCOC 15L	Large	HMO	Mid-Hudson West	\$646.96	\$1,293.92	\$1,229.22	\$1,617.40	\$1,682.10	\$1,811.49
HMOCOC 15+L	Large	HMO	Mid-Hudson West	\$654.07	\$1,308.14	\$1,242.73	\$1,635.18	\$1,700.58	\$1,831.40
HMOCOC 20L	Large	HMO	Mid-Hudson West	\$633.90	\$1,267.80	\$1,204.41	\$1,584.75	\$1,648.14	\$1,774.92
HMOCOC 20+L	Large	HMO	Mid-Hudson West	\$646.71	\$1,293.42	\$1,228.75	\$1,616.78	\$1,681.45	\$1,810.79
HMOCOC 25L	Large	HMO	Mid-Hudson West	\$625.64	\$1,251.28	\$1,188.72	\$1,564.10	\$1,626.66	\$1,751.79
HMOCOC 25/40L	Large	HMO	Mid-Hudson West	\$586.05	\$1,172.10	\$1,113.50	\$1,465.13	\$1,523.73	\$1,640.94
HMOCOC 30/50L	Large	HMO	Mid-Hudson West	\$558.80	\$1,117.60	\$1,061.72	\$1,397.00	\$1,452.88	\$1,564.64
HMOCOCBasixL	Large	HMO	Mid-Hudson West	\$579.72	\$1,159.44	\$1,101.47	\$1,449.30	\$1,507.27	\$1,623.22
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson West	\$591.68	\$1,183.36	\$1,124.19	\$1,479.20	\$1,538.37	\$1,656.70
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson West	\$622.61	\$1,245.22	\$1,182.96	\$1,556.53	\$1,618.79	\$1,743.31
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson West	\$553.14	\$1,106.28	\$1,050.97	\$1,382.85	\$1,438.16	\$1,548.79
HMOCOC 2/20L	Large	HMO	NY Metro	\$783.41	\$1,566.82	\$1,488.48	\$1,958.53	\$2,036.87	\$2,193.55
HMOCOC 10L	Large	HMO	NY Metro	\$783.59	\$1,567.18	\$1,488.82	\$1,958.98	\$2,037.33	\$2,194.05
HMOCOC 10+L	Large	HMO	NY Metro	\$792.30	\$1,584.60	\$1,505.37	\$1,980.75	\$2,059.98	\$2,218.44
HMOCOC 15L	Large	HMO	NY Metro	\$774.13	\$1,548.26	\$1,470.85	\$1,935.33	\$2,012.74	\$2,167.56
HMOCOC 15+L	Large	HMO	NY Metro	\$782.65	\$1,565.30	\$1,487.04	\$1,956.63	\$2,034.89	\$2,191.42
HMOCOC 20L	Large	HMO	NY Metro	\$758.50	\$1,517.00	\$1,441.15	\$1,896.25	\$1,972.10	\$2,123.80
HMOCOC 20+L	Large	HMO	NY Metro	\$773.84	\$1,547.68	\$1,470.30	\$1,934.60	\$2,011.98	\$2,166.75
HMOCOC 25L	Large	HMO	NY Metro	\$748.61	\$1,497.22	\$1,422.36	\$1,871.53	\$1,946.39	\$2,096.11
HMOCOC 25/40L	Large	HMO	NY Metro	\$701.22	\$1,402.44	\$1,332.32	\$1,753.05	\$1,823.17	\$1,963.42
HMOCOC 30/50L	Large	HMO	NY Metro	\$668.60	\$1,337.20	\$1,270.34	\$1,671.50	\$1,738.36	\$1,872.08
HMOCOCBasixL	Large	HMO	NY Metro	\$693.65	\$1,387.30	\$1,317.94	\$1,734.13	\$1,803.49	\$1,942.22
HMOCOC 25/40L-3	Large	HMO	NY Metro	\$707.96	\$1,415.92	\$1,345.12	\$1,769.90	\$1,840.70	\$1,982.29
HMOCOC 25L-2 CA	Large	HMO	NY Metro	\$745.02	\$1,490.04	\$1,415.54	\$1,862.55	\$1,937.05	\$2,086.06
HMOCOC 30/50L-2 CA	Large	HMO	NY Metro	\$661.83	\$1,323.66	\$1,257.48	\$1,654.58	\$1,720.76	\$1,853.12
HMOCOC 2/20L	Large	HMO	North Country	\$713.55	\$1,427.10	\$1,355.75	\$1,783.88	\$1,855.23	\$1,997.94
HMOCOC 10L	Large	HMO	North Country	\$713.76	\$1,427.52	\$1,356.14	\$1,784.40	\$1,855.78	\$1,998.53

MVP Health Plan, Inc.

Article 44

Jan 1, 2015

Current Year Premiums

Exhibit
VersionC
7/18/2014

Plan Name	Group Size	Plan Type	Rate Region	Fourth Quarter Rates 2015					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10+L	Large	HMO	North Country	\$721.67	\$1,443.34	\$1,371.17	\$1,804.18	\$1,876.34	\$2,020.68
HMOCOC 15L	Large	HMO	North Country	\$705.10	\$1,410.20	\$1,339.69	\$1,762.75	\$1,833.26	\$1,974.28
HMOCOC 15+L	Large	HMO	North Country	\$712.85	\$1,425.70	\$1,354.42	\$1,782.13	\$1,853.41	\$1,995.98
HMOCOC 20L	Large	HMO	North Country	\$690.89	\$1,381.78	\$1,312.69	\$1,727.23	\$1,796.31	\$1,934.49
HMOCOC 20+L	Large	HMO	North Country	\$704.84	\$1,409.68	\$1,339.20	\$1,762.10	\$1,832.58	\$1,973.55
HMOCOC 25L	Large	HMO	North Country	\$681.87	\$1,363.74	\$1,295.55	\$1,704.68	\$1,772.86	\$1,909.24
HMOCOC 25/40L	Large	HMO	North Country	\$638.70	\$1,277.40	\$1,213.53	\$1,596.75	\$1,660.62	\$1,788.36
HMOCOC 30/50L	Large	HMO	North Country	\$609.00	\$1,218.00	\$1,157.10	\$1,522.50	\$1,583.40	\$1,705.20
HMOCOCBasixL	Large	HMO	North Country	\$631.79	\$1,263.58	\$1,200.40	\$1,579.48	\$1,642.65	\$1,769.01
HMOCOC 25/40L-3	Large	HMO	North Country	\$644.82	\$1,289.64	\$1,225.16	\$1,612.05	\$1,676.53	\$1,805.50
HMOCOC 25L-2 CA	Large	HMO	North Country	\$678.56	\$1,357.12	\$1,289.26	\$1,696.40	\$1,764.26	\$1,899.97
HMOCOC 30/50L-2 CA	Large	HMO	North Country	\$602.83	\$1,205.66	\$1,145.38	\$1,507.08	\$1,567.36	\$1,687.92
HMOCOC 2/20L	Large	HMO	Rochester	\$520.79	\$1,041.58	\$989.50	\$1,301.98	\$1,354.05	\$1,458.21
HMOCOC 10L	Large	HMO	Rochester	\$520.90	\$1,041.80	\$989.71	\$1,302.25	\$1,354.34	\$1,458.52
HMOCOC 10+L	Large	HMO	Rochester	\$526.68	\$1,053.36	\$1,000.69	\$1,316.70	\$1,369.37	\$1,474.70
HMOCOC 15L	Large	HMO	Rochester	\$514.64	\$1,029.28	\$977.82	\$1,286.60	\$1,338.06	\$1,440.99
HMOCOC 15+L	Large	HMO	Rochester	\$520.27	\$1,040.54	\$988.51	\$1,300.68	\$1,352.70	\$1,456.76
HMOCOC 20L	Large	HMO	Rochester	\$504.23	\$1,008.46	\$958.04	\$1,260.58	\$1,311.00	\$1,411.84
HMOCOC 20+L	Large	HMO	Rochester	\$514.42	\$1,028.84	\$977.40	\$1,286.05	\$1,337.49	\$1,440.38
HMOCOC 25L	Large	HMO	Rochester	\$497.72	\$995.44	\$945.67	\$1,244.30	\$1,294.07	\$1,393.62
HMOCOC 25/40L	Large	HMO	Rochester	\$466.25	\$932.50	\$885.88	\$1,165.63	\$1,212.25	\$1,305.50
HMOCOC 30/50L	Large	HMO	Rochester	\$444.62	\$889.24	\$844.78	\$1,111.55	\$1,156.01	\$1,244.94
HMOCOCBasixL	Large	HMO	Rochester	\$461.23	\$922.46	\$876.34	\$1,153.08	\$1,199.20	\$1,291.44
HMOCOC 25/40L-3	Large	HMO	Rochester	\$470.73	\$941.46	\$894.39	\$1,176.83	\$1,223.90	\$1,318.04
HMOCOC 25L-2 CA	Large	HMO	Rochester	\$495.29	\$990.58	\$941.05	\$1,238.23	\$1,287.75	\$1,386.81
HMOCOC 30/50L-2 CA	Large	HMO	Rochester	\$440.15	\$880.30	\$836.29	\$1,100.38	\$1,144.39	\$1,232.42

MVP Health Plan, Inc.
Article 44
Jan 1, 2015
Prior Year Premiums

Exhibit D
Version 7/18/2014

Plan Name	Group Size	Plan Type	Rate Region	First Quarter Rates 2014					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 2/20L	Large	HMO	Central I	\$578.54	\$1,157.08	\$1,099.23	\$1,446.35	\$1,504.20	\$1,619.91
HMOCOC 10L	Large	HMO	Central I	\$578.67	\$1,157.34	\$1,099.47	\$1,446.68	\$1,504.54	\$1,620.28
HMOCOC 10+L	Large	HMO	Central I	\$585.10	\$1,170.20	\$1,111.69	\$1,462.75	\$1,521.26	\$1,638.28
HMOCOC 15L	Large	HMO	Central I	\$571.69	\$1,143.38	\$1,086.21	\$1,429.23	\$1,486.39	\$1,600.73
HMOCOC 15+L	Large	HMO	Central I	\$577.95	\$1,155.90	\$1,098.11	\$1,444.88	\$1,502.67	\$1,618.26
HMOCOC 20L	Large	HMO	Central I	\$560.17	\$1,120.34	\$1,064.32	\$1,400.43	\$1,456.44	\$1,568.48
HMOCOC 20+L	Large	HMO	Central I	\$571.46	\$1,142.92	\$1,085.77	\$1,428.65	\$1,485.80	\$1,600.09
HMOCOC 25L	Large	HMO	Central I	\$552.85	\$1,105.70	\$1,050.42	\$1,382.13	\$1,437.41	\$1,547.98
HMOCOC 25/40L	Large	HMO	Central I	\$517.85	\$1,035.70	\$983.92	\$1,294.63	\$1,346.41	\$1,449.98
HMOCOC 30/50L	Large	HMO	Central I	\$493.78	\$987.56	\$938.18	\$1,234.45	\$1,283.83	\$1,382.58
HMOCOCBasixL	Large	HMO	Central I	\$512.28	\$1,024.56	\$973.33	\$1,280.70	\$1,331.93	\$1,434.38
HMOCOC 25/40L-3	Large	HMO	Central I	\$522.85	\$1,045.70	\$993.42	\$1,307.13	\$1,359.41	\$1,463.98
HMOCOC 25L-2 CA	Large	HMO	Central I	\$550.19	\$1,100.38	\$1,045.36	\$1,375.48	\$1,430.49	\$1,540.53
HMOCOC 30/50L-2 CA	Large	HMO	Central I	\$488.80	\$977.60	\$928.72	\$1,222.00	\$1,270.88	\$1,368.64
HMOCOC 2/20L	Large	HMO	Central II	\$561.30	\$1,122.60	\$1,066.47	\$1,403.25	\$1,459.38	\$1,571.64
HMOCOC 10L	Large	HMO	Central II	\$561.42	\$1,122.84	\$1,066.70	\$1,403.55	\$1,459.69	\$1,571.98
HMOCOC 10+L	Large	HMO	Central II	\$567.64	\$1,135.28	\$1,078.52	\$1,419.10	\$1,475.86	\$1,589.39
HMOCOC 15L	Large	HMO	Central II	\$554.65	\$1,109.30	\$1,053.84	\$1,386.63	\$1,442.09	\$1,553.02
HMOCOC 15+L	Large	HMO	Central II	\$560.74	\$1,121.48	\$1,065.41	\$1,401.85	\$1,457.92	\$1,570.07
HMOCOC 20L	Large	HMO	Central II	\$543.46	\$1,086.92	\$1,032.57	\$1,358.65	\$1,413.00	\$1,521.69
HMOCOC 20+L	Large	HMO	Central II	\$554.43	\$1,108.86	\$1,053.42	\$1,386.08	\$1,441.52	\$1,552.40
HMOCOC 25L	Large	HMO	Central II	\$536.38	\$1,072.76	\$1,019.12	\$1,340.95	\$1,394.59	\$1,501.86
HMOCOC 25/40L	Large	HMO	Central II	\$502.42	\$1,004.84	\$954.60	\$1,256.05	\$1,306.29	\$1,406.78
HMOCOC 30/50L	Large	HMO	Central II	\$479.07	\$958.14	\$910.23	\$1,197.68	\$1,245.58	\$1,341.40
HMOCOCBasixL	Large	HMO	Central II	\$497.02	\$994.04	\$944.34	\$1,242.55	\$1,292.25	\$1,391.66
HMOCOC 25/40L-3	Large	HMO	Central II	\$507.27	\$1,014.54	\$963.81	\$1,268.18	\$1,318.90	\$1,420.36
HMOCOC 25L-2 CA	Large	HMO	Central II	\$533.78	\$1,067.56	\$1,014.18	\$1,334.45	\$1,387.83	\$1,494.58
HMOCOC 30/50L-2 CA	Large	HMO	Central II	\$474.24	\$948.48	\$901.06	\$1,185.60	\$1,233.02	\$1,327.87
HMOCOC 2/20L	Large	HMO	Central III	\$607.30	\$1,214.60	\$1,153.87	\$1,518.25	\$1,578.98	\$1,700.44
HMOCOC 10L	Large	HMO	Central III	\$607.42	\$1,214.84	\$1,154.10	\$1,518.55	\$1,579.29	\$1,700.78
HMOCOC 10+L	Large	HMO	Central III	\$614.17	\$1,228.34	\$1,166.92	\$1,535.43	\$1,596.84	\$1,719.68
HMOCOC 15L	Large	HMO	Central III	\$600.10	\$1,200.20	\$1,140.19	\$1,500.25	\$1,560.26	\$1,680.28
HMOCOC 15+L	Large	HMO	Central III	\$606.68	\$1,213.36	\$1,152.69	\$1,516.70	\$1,577.37	\$1,698.70
HMOCOC 20L	Large	HMO	Central III	\$588.00	\$1,176.00	\$1,117.20	\$1,470.00	\$1,528.80	\$1,646.40
HMOCOC 20+L	Large	HMO	Central III	\$599.85	\$1,199.70	\$1,139.72	\$1,499.63	\$1,559.61	\$1,679.58
HMOCOC 25L	Large	HMO	Central III	\$580.31	\$1,160.62	\$1,102.59	\$1,450.78	\$1,508.81	\$1,624.87
HMOCOC 25/40L	Large	HMO	Central III	\$543.56	\$1,087.12	\$1,032.76	\$1,358.90	\$1,413.26	\$1,521.97
HMOCOC 30/50L	Large	HMO	Central III	\$518.31	\$1,036.62	\$984.79	\$1,295.78	\$1,347.61	\$1,451.27
HMOCOCBasixL	Large	HMO	Central III	\$537.71	\$1,075.42	\$1,021.65	\$1,344.28	\$1,398.05	\$1,505.59
HMOCOC 25/40L-3	Large	HMO	Central III	\$548.82	\$1,097.64	\$1,042.76	\$1,372.05	\$1,426.93	\$1,536.70
HMOCOC 25L-2 CA	Large	HMO	Central III	\$577.52	\$1,155.04	\$1,097.29	\$1,443.80	\$1,501.55	\$1,617.06
HMOCOC 30/50L-2 CA	Large	HMO	Central III	\$513.06	\$1,026.12	\$974.81	\$1,282.65	\$1,333.96	\$1,436.57
HMOCOC 2/20L	Large	HMO	East I	\$536.63	\$1,073.26	\$1,019.60	\$1,341.58	\$1,395.24	\$1,502.56
HMOCOC 10L	Large	HMO	East I	\$536.77	\$1,073.54	\$1,019.86	\$1,341.93	\$1,395.60	\$1,502.96
HMOCOC 10+L	Large	HMO	East I	\$542.71	\$1,085.42	\$1,031.15	\$1,356.78	\$1,411.05	\$1,519.59
HMOCOC 15L	Large	HMO	East I	\$530.28	\$1,060.56	\$1,007.53	\$1,325.70	\$1,378.73	\$1,484.78
HMOCOC 15+L	Large	HMO	East I	\$536.09	\$1,072.18	\$1,018.57	\$1,340.23	\$1,393.83	\$1,501.05
HMOCOC 20L	Large	HMO	East I	\$519.59	\$1,039.18	\$987.22	\$1,298.98	\$1,350.93	\$1,454.85
HMOCOC 20+L	Large	HMO	East I	\$530.06	\$1,060.12	\$1,007.11	\$1,325.15	\$1,378.16	\$1,484.17
HMOCOC 25L	Large	HMO	East I	\$512.81	\$1,025.62	\$974.34	\$1,282.03	\$1,333.31	\$1,435.87
HMOCOC 25/40L	Large	HMO	East I	\$480.36	\$960.72	\$912.68	\$1,200.90	\$1,248.94	\$1,345.01
HMOCOC 30/50L	Large	HMO	East I	\$458.05	\$916.10	\$870.30	\$1,145.13	\$1,190.93	\$1,282.54
HMOCOCBasixL	Large	HMO	East I	\$475.18	\$950.36	\$902.84	\$1,187.95	\$1,235.47	\$1,330.50
HMOCOC 25/40L-3	Large	HMO	East I	\$484.98	\$969.96	\$921.46	\$1,212.45	\$1,260.95	\$1,357.94
HMOCOC 25L-2 CA	Large	HMO	East I	\$510.34	\$1,020.68	\$969.65	\$1,275.85	\$1,326.88	\$1,428.95
HMOCOC 30/50L-2 CA	Large	HMO	East I	\$453.42	\$906.84	\$861.50	\$1,133.55	\$1,178.89	\$1,269.58
HMOCOC 2/20L	Large	HMO	East II	\$574.70	\$1,149.40	\$1,091.93	\$1,436.75	\$1,494.22	\$1,609.16

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Plan Name	Group Size	Plan Type	Rate Region	First Quarter Rates 2014					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	East II	\$574.86	\$1,149.72	\$1,092.23	\$1,437.15	\$1,494.64	\$1,609.61
HMOCOC 10+L	Large	HMO	East II	\$581.22	\$1,162.44	\$1,104.32	\$1,453.05	\$1,511.17	\$1,627.42
HMOCOC 15L	Large	HMO	East II	\$567.91	\$1,135.82	\$1,079.03	\$1,419.78	\$1,476.57	\$1,590.15
HMOCOC 15+L	Large	HMO	East II	\$574.13	\$1,148.26	\$1,090.85	\$1,435.33	\$1,492.74	\$1,607.56
HMOCOC 20L	Large	HMO	East II	\$556.45	\$1,112.90	\$1,057.26	\$1,391.13	\$1,446.77	\$1,558.06
HMOCOC 20+L	Large	HMO	East II	\$567.69	\$1,135.38	\$1,078.61	\$1,419.23	\$1,475.99	\$1,589.53
HMOCOC 25L	Large	HMO	East II	\$549.18	\$1,098.36	\$1,043.44	\$1,372.95	\$1,427.87	\$1,537.70
HMOCOC 25/40L	Large	HMO	East II	\$514.42	\$1,028.84	\$977.40	\$1,286.05	\$1,337.49	\$1,440.38
HMOCOC 30/50L	Large	HMO	East II	\$490.52	\$981.04	\$931.99	\$1,226.30	\$1,275.35	\$1,373.46
HMOCOCBasixL	Large	HMO	East II	\$508.87	\$1,017.74	\$966.85	\$1,272.18	\$1,323.06	\$1,424.84
HMOCOC 25/40L-3	Large	HMO	East II	\$519.38	\$1,038.76	\$986.82	\$1,298.45	\$1,350.39	\$1,454.26
HMOCOC 25L-2 CA	Large	HMO	East II	\$546.54	\$1,093.08	\$1,038.43	\$1,366.35	\$1,421.00	\$1,530.31
HMOCOC 30/50L-2 CA	Large	HMO	East II	\$485.55	\$971.10	\$922.55	\$1,213.88	\$1,262.43	\$1,359.54
HMOCOC 2/20L	Large	HMO	Mid-Hudson East	\$613.27	\$1,226.54	\$1,165.21	\$1,533.18	\$1,594.50	\$1,717.16
HMOCOC 10L	Large	HMO	Mid-Hudson East	\$613.41	\$1,226.82	\$1,165.48	\$1,533.53	\$1,594.87	\$1,717.55
HMOCOC 10+L	Large	HMO	Mid-Hudson East	\$620.23	\$1,240.46	\$1,178.44	\$1,550.58	\$1,612.60	\$1,736.64
HMOCOC 15L	Large	HMO	Mid-Hudson East	\$606.02	\$1,212.04	\$1,151.44	\$1,515.05	\$1,575.65	\$1,696.86
HMOCOC 15+L	Large	HMO	Mid-Hudson East	\$612.66	\$1,225.32	\$1,164.05	\$1,531.65	\$1,592.92	\$1,715.45
HMOCOC 20L	Large	HMO	Mid-Hudson East	\$593.78	\$1,187.56	\$1,128.18	\$1,484.45	\$1,543.83	\$1,662.58
HMOCOC 20+L	Large	HMO	Mid-Hudson East	\$605.78	\$1,211.56	\$1,150.98	\$1,514.45	\$1,575.03	\$1,696.18
HMOCOC 25L	Large	HMO	Mid-Hudson East	\$586.04	\$1,172.08	\$1,113.48	\$1,465.10	\$1,523.70	\$1,640.91
HMOCOC 25/40L	Large	HMO	Mid-Hudson East	\$548.94	\$1,097.88	\$1,042.99	\$1,372.35	\$1,427.24	\$1,537.03
HMOCOC 30/50L	Large	HMO	Mid-Hudson East	\$523.41	\$1,046.82	\$994.48	\$1,308.53	\$1,360.87	\$1,465.55
HMOCOCBasixL	Large	HMO	Mid-Hudson East	\$542.99	\$1,085.98	\$1,031.68	\$1,357.48	\$1,411.77	\$1,520.37
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson East	\$554.21	\$1,108.42	\$1,053.00	\$1,385.53	\$1,440.95	\$1,551.79
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson East	\$583.20	\$1,166.40	\$1,108.08	\$1,458.00	\$1,516.32	\$1,632.96
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson East	\$518.11	\$1,036.22	\$984.41	\$1,295.28	\$1,347.09	\$1,450.71
HMOCOC 2/20L	Large	HMO	Mid-Hudson West	\$572.24	\$1,144.48	\$1,087.26	\$1,430.60	\$1,487.82	\$1,602.27
HMOCOC 10L	Large	HMO	Mid-Hudson West	\$572.37	\$1,144.74	\$1,087.50	\$1,430.93	\$1,488.16	\$1,602.64
HMOCOC 10+L	Large	HMO	Mid-Hudson West	\$578.73	\$1,157.46	\$1,099.59	\$1,446.83	\$1,504.70	\$1,620.44
HMOCOC 15L	Large	HMO	Mid-Hudson West	\$565.46	\$1,130.92	\$1,074.37	\$1,413.65	\$1,470.20	\$1,583.29
HMOCOC 15+L	Large	HMO	Mid-Hudson West	\$571.68	\$1,143.36	\$1,086.19	\$1,429.20	\$1,486.37	\$1,600.70
HMOCOC 20L	Large	HMO	Mid-Hudson West	\$554.05	\$1,108.10	\$1,052.70	\$1,385.13	\$1,440.53	\$1,551.34
HMOCOC 20+L	Large	HMO	Mid-Hudson West	\$565.24	\$1,130.48	\$1,073.96	\$1,413.10	\$1,469.62	\$1,582.67
HMOCOC 25L	Large	HMO	Mid-Hudson West	\$546.83	\$1,093.66	\$1,038.98	\$1,367.08	\$1,421.76	\$1,531.12
HMOCOC 25/40L	Large	HMO	Mid-Hudson West	\$512.22	\$1,024.44	\$973.22	\$1,280.55	\$1,331.77	\$1,434.22
HMOCOC 30/50L	Large	HMO	Mid-Hudson West	\$488.41	\$976.82	\$927.98	\$1,221.03	\$1,269.87	\$1,367.55
HMOCOCBasixL	Large	HMO	Mid-Hudson West	\$506.69	\$1,013.38	\$962.71	\$1,266.73	\$1,317.39	\$1,418.73
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson West	\$517.15	\$1,034.30	\$982.59	\$1,292.88	\$1,344.59	\$1,448.02
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson West	\$544.18	\$1,088.36	\$1,033.94	\$1,360.45	\$1,414.87	\$1,523.70
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson West	\$483.48	\$966.96	\$918.61	\$1,208.70	\$1,257.05	\$1,353.74
HMOCOC 2/20L	Large	HMO	NY Metro	\$619.13	\$1,238.26	\$1,176.35	\$1,547.83	\$1,609.74	\$1,733.56
HMOCOC 10L	Large	HMO	NY Metro	\$619.28	\$1,238.56	\$1,176.63	\$1,548.20	\$1,610.13	\$1,733.98
HMOCOC 10+L	Large	HMO	NY Metro	\$626.16	\$1,252.32	\$1,189.70	\$1,565.40	\$1,628.02	\$1,753.25
HMOCOC 15L	Large	HMO	NY Metro	\$611.81	\$1,223.62	\$1,162.44	\$1,529.53	\$1,590.71	\$1,713.07
HMOCOC 15+L	Large	HMO	NY Metro	\$618.53	\$1,237.06	\$1,175.21	\$1,546.33	\$1,608.18	\$1,731.88
HMOCOC 20L	Large	HMO	NY Metro	\$599.45	\$1,198.90	\$1,138.96	\$1,498.63	\$1,558.57	\$1,678.46
HMOCOC 20+L	Large	HMO	NY Metro	\$611.56	\$1,223.12	\$1,161.96	\$1,528.90	\$1,590.06	\$1,712.37
HMOCOC 25L	Large	HMO	NY Metro	\$591.64	\$1,183.28	\$1,124.12	\$1,479.10	\$1,538.26	\$1,656.59
HMOCOC 25/40L	Large	HMO	NY Metro	\$554.18	\$1,108.36	\$1,052.94	\$1,385.45	\$1,440.87	\$1,551.70
HMOCOC 30/50L	Large	HMO	NY Metro	\$528.41	\$1,056.82	\$1,003.98	\$1,321.03	\$1,373.87	\$1,479.55
HMOCOCBasixL	Large	HMO	NY Metro	\$548.19	\$1,096.38	\$1,041.56	\$1,370.48	\$1,425.29	\$1,534.93
HMOCOC 25/40L-3	Large	HMO	NY Metro	\$559.51	\$1,119.02	\$1,063.07	\$1,398.78	\$1,454.73	\$1,566.63
HMOCOC 25L-2 CA	Large	HMO	NY Metro	\$588.78	\$1,177.56	\$1,118.68	\$1,471.95	\$1,530.83	\$1,648.58
HMOCOC 30/50L-2 CA	Large	HMO	NY Metro	\$523.05	\$1,046.10	\$993.80	\$1,307.63	\$1,359.93	\$1,464.54
HMOCOC 2/20L	Large	HMO	North Country	\$623.67	\$1,247.34	\$1,184.97	\$1,559.18	\$1,621.54	\$1,746.28
HMOCOC 10L	Large	HMO	North Country	\$623.84	\$1,247.68	\$1,185.30	\$1,559.60	\$1,621.98	\$1,746.75

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Plan Name	Group Size	Plan Type	Rate Region	First Quarter Rates 2014					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10+L	Large	HMO	North Country	\$630.76	\$1,261.52	\$1,198.44	\$1,576.90	\$1,639.98	\$1,766.13
HMOCOC 15L	Large	HMO	North Country	\$616.29	\$1,232.58	\$1,170.95	\$1,540.73	\$1,602.35	\$1,725.61
HMOCOC 15+L	Large	HMO	North Country	\$623.05	\$1,246.10	\$1,183.80	\$1,557.63	\$1,619.93	\$1,744.54
HMOCOC 20L	Large	HMO	North Country	\$603.86	\$1,207.72	\$1,147.33	\$1,509.65	\$1,570.04	\$1,690.81
HMOCOC 20+L	Large	HMO	North Country	\$616.06	\$1,232.12	\$1,170.51	\$1,540.15	\$1,601.76	\$1,724.97
HMOCOC 25L	Large	HMO	North Country	\$595.98	\$1,191.96	\$1,132.36	\$1,489.95	\$1,549.55	\$1,668.74
HMOCOC 25/40L	Large	HMO	North Country	\$558.25	\$1,116.50	\$1,060.68	\$1,395.63	\$1,451.45	\$1,563.10
HMOCOC 30/50L	Large	HMO	North Country	\$532.28	\$1,064.56	\$1,011.33	\$1,330.70	\$1,383.93	\$1,490.38
HMOCOCBasixL	Large	HMO	North Country	\$552.19	\$1,104.38	\$1,049.16	\$1,380.48	\$1,435.69	\$1,546.13
HMOCOC 25/40L-3	Large	HMO	North Country	\$563.60	\$1,127.20	\$1,070.84	\$1,409.00	\$1,465.36	\$1,578.08
HMOCOC 25L-2 CA	Large	HMO	North Country	\$593.09	\$1,186.18	\$1,126.87	\$1,482.73	\$1,542.03	\$1,660.65
HMOCOC 30/50L-2 CA	Large	HMO	North Country	\$526.89	\$1,053.78	\$1,001.09	\$1,317.23	\$1,369.91	\$1,475.29
HMOCOC 2/20L	Large	HMO	Rochester	\$455.19	\$910.38	\$864.86	\$1,137.98	\$1,183.49	\$1,274.53
HMOCOC 10L	Large	HMO	Rochester	\$455.29	\$910.58	\$865.05	\$1,138.23	\$1,183.75	\$1,274.81
HMOCOC 10+L	Large	HMO	Rochester	\$460.34	\$920.68	\$874.65	\$1,150.85	\$1,196.88	\$1,288.95
HMOCOC 15L	Large	HMO	Rochester	\$449.81	\$899.62	\$854.64	\$1,124.53	\$1,169.51	\$1,259.47
HMOCOC 15+L	Large	HMO	Rochester	\$454.73	\$909.46	\$863.99	\$1,136.83	\$1,182.30	\$1,273.24
HMOCOC 20L	Large	HMO	Rochester	\$440.72	\$881.44	\$837.37	\$1,101.80	\$1,145.87	\$1,234.02
HMOCOC 20+L	Large	HMO	Rochester	\$449.61	\$899.22	\$854.26	\$1,124.03	\$1,168.99	\$1,258.91
HMOCOC 25L	Large	HMO	Rochester	\$435.02	\$870.04	\$826.54	\$1,087.55	\$1,131.05	\$1,218.06
HMOCOC 25/40L	Large	HMO	Rochester	\$407.51	\$815.02	\$774.27	\$1,018.78	\$1,059.53	\$1,141.03
HMOCOC 30/50L	Large	HMO	Rochester	\$388.61	\$777.22	\$738.36	\$971.53	\$1,010.39	\$1,088.11
HMOCOCBasixL	Large	HMO	Rochester	\$403.12	\$806.24	\$765.93	\$1,007.80	\$1,048.11	\$1,128.74
HMOCOC 25/40L-3	Large	HMO	Rochester	\$411.43	\$822.86	\$781.72	\$1,028.58	\$1,069.72	\$1,152.00
HMOCOC 25L-2 CA	Large	HMO	Rochester	\$432.91	\$865.82	\$822.53	\$1,082.28	\$1,125.57	\$1,212.15
HMOCOC 30/50L-2 CA	Large	HMO	Rochester	\$384.71	\$769.42	\$730.95	\$961.78	\$1,000.25	\$1,077.19

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Plan Name	Group Size	Plan Type	Rate Region	Second Quarter Rates 2014					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 2/20L	Large	HMO	Central I	\$585.48	\$1,170.96	\$1,112.41	\$1,463.70	\$1,522.25	\$1,639.34
HMOCOC 10L	Large	HMO	Central I	\$585.61	\$1,171.22	\$1,112.66	\$1,464.03	\$1,522.59	\$1,639.71
HMOCOC 10+L	Large	HMO	Central I	\$592.12	\$1,184.24	\$1,125.03	\$1,480.30	\$1,539.51	\$1,657.94
HMOCOC 15L	Large	HMO	Central I	\$578.55	\$1,157.10	\$1,099.25	\$1,446.38	\$1,504.23	\$1,619.94
HMOCOC 15+L	Large	HMO	Central I	\$584.89	\$1,169.78	\$1,111.29	\$1,462.23	\$1,520.71	\$1,637.69
HMOCOC 20L	Large	HMO	Central I	\$566.89	\$1,133.78	\$1,077.09	\$1,417.23	\$1,473.91	\$1,587.29
HMOCOC 20+L	Large	HMO	Central I	\$578.32	\$1,156.64	\$1,098.81	\$1,445.80	\$1,503.63	\$1,619.30
HMOCOC 25L	Large	HMO	Central I	\$559.48	\$1,118.96	\$1,063.01	\$1,398.70	\$1,454.65	\$1,566.54
HMOCOC 25/40L	Large	HMO	Central I	\$524.06	\$1,048.12	\$995.71	\$1,310.15	\$1,362.56	\$1,467.37
HMOCOC 30/50L	Large	HMO	Central I	\$499.71	\$999.42	\$949.45	\$1,249.28	\$1,299.25	\$1,399.19
HMOCOCBasixL	Large	HMO	Central I	\$518.43	\$1,036.86	\$985.02	\$1,296.08	\$1,347.92	\$1,451.60
HMOCOC 25/40L-3	Large	HMO	Central I	\$529.12	\$1,058.24	\$1,005.33	\$1,322.80	\$1,375.71	\$1,481.54
HMOCOC 25L-2 CA	Large	HMO	Central I	\$556.79	\$1,113.58	\$1,057.90	\$1,391.98	\$1,447.65	\$1,559.01
HMOCOC 30/50L-2 CA	Large	HMO	Central I	\$494.67	\$989.34	\$939.87	\$1,236.68	\$1,286.14	\$1,385.08
HMOCOC 2/20L	Large	HMO	Central II	\$568.04	\$1,136.08	\$1,079.28	\$1,420.10	\$1,476.90	\$1,590.51
HMOCOC 10L	Large	HMO	Central II	\$568.16	\$1,136.32	\$1,079.50	\$1,420.40	\$1,477.22	\$1,590.85
HMOCOC 10+L	Large	HMO	Central II	\$574.45	\$1,148.90	\$1,091.46	\$1,436.13	\$1,493.57	\$1,608.46
HMOCOC 15L	Large	HMO	Central II	\$561.31	\$1,122.62	\$1,066.49	\$1,403.28	\$1,459.41	\$1,571.67
HMOCOC 15+L	Large	HMO	Central II	\$567.47	\$1,134.94	\$1,078.19	\$1,418.68	\$1,475.42	\$1,588.92
HMOCOC 20L	Large	HMO	Central II	\$549.98	\$1,099.96	\$1,044.96	\$1,374.95	\$1,429.95	\$1,539.94
HMOCOC 20+L	Large	HMO	Central II	\$561.08	\$1,122.16	\$1,066.05	\$1,402.70	\$1,458.81	\$1,571.02
HMOCOC 25L	Large	HMO	Central II	\$542.82	\$1,085.64	\$1,031.36	\$1,357.05	\$1,411.33	\$1,519.90
HMOCOC 25/40L	Large	HMO	Central II	\$508.45	\$1,016.90	\$966.06	\$1,271.13	\$1,321.97	\$1,423.66
HMOCOC 30/50L	Large	HMO	Central II	\$484.82	\$969.64	\$921.16	\$1,212.05	\$1,260.53	\$1,357.50
HMOCOCBasixL	Large	HMO	Central II	\$502.98	\$1,005.96	\$955.66	\$1,257.45	\$1,307.75	\$1,408.34
HMOCOC 25/40L-3	Large	HMO	Central II	\$513.36	\$1,026.72	\$975.38	\$1,283.40	\$1,334.74	\$1,437.41
HMOCOC 25L-2 CA	Large	HMO	Central II	\$540.19	\$1,080.38	\$1,026.36	\$1,350.48	\$1,404.49	\$1,512.53
HMOCOC 30/50L-2 CA	Large	HMO	Central II	\$479.93	\$959.86	\$911.87	\$1,199.83	\$1,247.82	\$1,343.80
HMOCOC 2/20L	Large	HMO	Central III	\$614.59	\$1,229.18	\$1,167.72	\$1,536.48	\$1,597.93	\$1,720.85
HMOCOC 10L	Large	HMO	Central III	\$614.71	\$1,229.42	\$1,167.95	\$1,536.78	\$1,598.25	\$1,721.19
HMOCOC 10+L	Large	HMO	Central III	\$621.54	\$1,243.08	\$1,180.93	\$1,553.85	\$1,616.00	\$1,740.31
HMOCOC 15L	Large	HMO	Central III	\$607.30	\$1,214.60	\$1,153.87	\$1,518.25	\$1,578.98	\$1,700.44
HMOCOC 15+L	Large	HMO	Central III	\$613.96	\$1,227.92	\$1,166.52	\$1,534.90	\$1,596.30	\$1,719.09
HMOCOC 20L	Large	HMO	Central III	\$595.06	\$1,190.12	\$1,130.61	\$1,487.65	\$1,547.16	\$1,666.17
HMOCOC 20+L	Large	HMO	Central III	\$607.05	\$1,214.10	\$1,153.40	\$1,517.63	\$1,578.33	\$1,699.74
HMOCOC 25L	Large	HMO	Central III	\$587.27	\$1,174.54	\$1,115.81	\$1,468.18	\$1,526.90	\$1,644.36
HMOCOC 25/40L	Large	HMO	Central III	\$550.08	\$1,100.16	\$1,045.15	\$1,375.20	\$1,430.21	\$1,540.22
HMOCOC 30/50L	Large	HMO	Central III	\$524.53	\$1,049.06	\$996.61	\$1,311.33	\$1,363.78	\$1,468.68
HMOCOCBasixL	Large	HMO	Central III	\$544.16	\$1,088.32	\$1,033.90	\$1,360.40	\$1,414.82	\$1,523.65
HMOCOC 25/40L-3	Large	HMO	Central III	\$555.41	\$1,110.82	\$1,055.28	\$1,388.53	\$1,444.07	\$1,555.15
HMOCOC 25L-2 CA	Large	HMO	Central III	\$584.45	\$1,168.90	\$1,110.46	\$1,461.13	\$1,519.57	\$1,636.46
HMOCOC 30/50L-2 CA	Large	HMO	Central III	\$519.22	\$1,038.44	\$986.52	\$1,298.05	\$1,349.97	\$1,453.82
HMOCOC 2/20L	Large	HMO	East I	\$543.07	\$1,086.14	\$1,031.83	\$1,357.68	\$1,411.98	\$1,520.60
HMOCOC 10L	Large	HMO	East I	\$543.21	\$1,086.42	\$1,032.10	\$1,358.03	\$1,412.35	\$1,520.99
HMOCOC 10+L	Large	HMO	East I	\$549.22	\$1,098.44	\$1,043.52	\$1,373.05	\$1,427.97	\$1,537.82
HMOCOC 15L	Large	HMO	East I	\$536.64	\$1,073.28	\$1,019.62	\$1,341.60	\$1,395.26	\$1,502.59
HMOCOC 15+L	Large	HMO	East I	\$542.52	\$1,085.04	\$1,030.79	\$1,356.30	\$1,410.55	\$1,519.06
HMOCOC 20L	Large	HMO	East I	\$525.83	\$1,051.66	\$999.08	\$1,314.58	\$1,367.16	\$1,472.32
HMOCOC 20+L	Large	HMO	East I	\$536.42	\$1,072.84	\$1,019.20	\$1,341.05	\$1,394.69	\$1,501.98
HMOCOC 25L	Large	HMO	East I	\$518.96	\$1,037.92	\$986.02	\$1,297.40	\$1,349.30	\$1,453.09
HMOCOC 25/40L	Large	HMO	East I	\$486.12	\$972.24	\$923.63	\$1,215.30	\$1,263.91	\$1,361.14
HMOCOC 30/50L	Large	HMO	East I	\$463.55	\$927.10	\$880.75	\$1,158.88	\$1,205.23	\$1,297.94
HMOCOCBasixL	Large	HMO	East I	\$480.88	\$961.76	\$913.67	\$1,202.20	\$1,250.29	\$1,346.46
HMOCOC 25/40L-3	Large	HMO	East I	\$490.80	\$981.60	\$932.52	\$1,227.00	\$1,276.08	\$1,374.24
HMOCOC 25L-2 CA	Large	HMO	East I	\$516.46	\$1,032.92	\$981.27	\$1,291.15	\$1,342.80	\$1,446.09
HMOCOC 30/50L-2 CA	Large	HMO	East I	\$458.86	\$917.72	\$871.83	\$1,147.15	\$1,193.04	\$1,284.81
HMOCOC 2/20L	Large	HMO	East II	\$581.60	\$1,163.20	\$1,105.04	\$1,454.00	\$1,512.16	\$1,628.48

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Plan Name	Group Size	Plan Type	Rate Region	Second Quarter Rates 2014					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	East II	\$581.76	\$1,163.52	\$1,105.34	\$1,454.40	\$1,512.58	\$1,628.93
HMOCOC 10+L	Large	HMO	East II	\$588.19	\$1,176.38	\$1,117.56	\$1,470.48	\$1,529.29	\$1,646.93
HMOCOC 15L	Large	HMO	East II	\$574.72	\$1,149.44	\$1,091.97	\$1,436.80	\$1,494.27	\$1,609.22
HMOCOC 15+L	Large	HMO	East II	\$581.02	\$1,162.04	\$1,103.94	\$1,452.55	\$1,510.65	\$1,626.86
HMOCOC 20L	Large	HMO	East II	\$563.13	\$1,126.26	\$1,069.95	\$1,407.83	\$1,464.14	\$1,576.76
HMOCOC 20+L	Large	HMO	East II	\$574.50	\$1,149.00	\$1,091.55	\$1,436.25	\$1,493.70	\$1,608.60
HMOCOC 25L	Large	HMO	East II	\$555.77	\$1,111.54	\$1,055.96	\$1,389.43	\$1,445.00	\$1,556.16
HMOCOC 25/40L	Large	HMO	East II	\$520.59	\$1,041.18	\$989.12	\$1,301.48	\$1,353.53	\$1,457.65
HMOCOC 30/50L	Large	HMO	East II	\$496.41	\$992.82	\$943.18	\$1,241.03	\$1,290.67	\$1,389.95
HMOCOCBasixL	Large	HMO	East II	\$514.98	\$1,029.96	\$978.46	\$1,287.45	\$1,338.95	\$1,441.94
HMOCOC 25/40L-3	Large	HMO	East II	\$525.61	\$1,051.22	\$998.66	\$1,314.03	\$1,366.59	\$1,471.71
HMOCOC 25L-2 CA	Large	HMO	East II	\$553.10	\$1,106.20	\$1,050.89	\$1,382.75	\$1,438.06	\$1,548.68
HMOCOC 30/50L-2 CA	Large	HMO	East II	\$491.38	\$982.76	\$933.62	\$1,228.45	\$1,277.59	\$1,375.86
HMOCOC 2/20L	Large	HMO	Mid-Hudson East	\$620.63	\$1,241.26	\$1,179.20	\$1,551.58	\$1,613.64	\$1,737.76
HMOCOC 10L	Large	HMO	Mid-Hudson East	\$620.77	\$1,241.54	\$1,179.46	\$1,551.93	\$1,614.00	\$1,738.16
HMOCOC 10+L	Large	HMO	Mid-Hudson East	\$627.67	\$1,255.34	\$1,192.57	\$1,569.18	\$1,631.94	\$1,757.48
HMOCOC 15L	Large	HMO	Mid-Hudson East	\$613.29	\$1,226.58	\$1,165.25	\$1,533.23	\$1,594.55	\$1,717.21
HMOCOC 15+L	Large	HMO	Mid-Hudson East	\$620.01	\$1,240.02	\$1,178.02	\$1,550.03	\$1,612.03	\$1,736.03
HMOCOC 20L	Large	HMO	Mid-Hudson East	\$600.91	\$1,201.82	\$1,141.73	\$1,502.28	\$1,562.37	\$1,682.55
HMOCOC 20+L	Large	HMO	Mid-Hudson East	\$613.05	\$1,226.10	\$1,164.80	\$1,532.63	\$1,593.93	\$1,716.54
HMOCOC 25L	Large	HMO	Mid-Hudson East	\$593.07	\$1,186.14	\$1,126.83	\$1,482.68	\$1,541.98	\$1,660.60
HMOCOC 25/40L	Large	HMO	Mid-Hudson East	\$555.53	\$1,111.06	\$1,055.51	\$1,388.83	\$1,444.38	\$1,555.48
HMOCOC 30/50L	Large	HMO	Mid-Hudson East	\$529.69	\$1,059.38	\$1,006.41	\$1,324.23	\$1,377.19	\$1,483.13
HMOCOCBasixL	Large	HMO	Mid-Hudson East	\$549.51	\$1,099.02	\$1,044.07	\$1,373.78	\$1,428.73	\$1,538.63
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson East	\$560.86	\$1,121.72	\$1,065.63	\$1,402.15	\$1,458.24	\$1,570.41
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson East	\$590.20	\$1,180.40	\$1,121.38	\$1,475.50	\$1,534.52	\$1,652.56
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson East	\$524.33	\$1,048.66	\$996.23	\$1,310.83	\$1,363.26	\$1,468.12
HMOCOC 2/20L	Large	HMO	Mid-Hudson West	\$579.11	\$1,158.22	\$1,100.31	\$1,447.78	\$1,505.69	\$1,621.51
HMOCOC 10L	Large	HMO	Mid-Hudson West	\$579.24	\$1,158.48	\$1,100.56	\$1,448.10	\$1,506.02	\$1,621.87
HMOCOC 10+L	Large	HMO	Mid-Hudson West	\$585.67	\$1,171.34	\$1,112.77	\$1,464.18	\$1,522.74	\$1,639.88
HMOCOC 15L	Large	HMO	Mid-Hudson West	\$572.25	\$1,144.50	\$1,087.28	\$1,430.63	\$1,487.85	\$1,602.30
HMOCOC 15+L	Large	HMO	Mid-Hudson West	\$578.54	\$1,157.08	\$1,099.23	\$1,446.35	\$1,504.20	\$1,619.91
HMOCOC 20L	Large	HMO	Mid-Hudson West	\$560.70	\$1,121.40	\$1,065.33	\$1,401.75	\$1,457.82	\$1,569.96
HMOCOC 20+L	Large	HMO	Mid-Hudson West	\$572.02	\$1,144.04	\$1,086.84	\$1,430.05	\$1,487.25	\$1,601.66
HMOCOC 25L	Large	HMO	Mid-Hudson West	\$553.39	\$1,106.78	\$1,051.44	\$1,383.48	\$1,438.81	\$1,549.49
HMOCOC 25/40L	Large	HMO	Mid-Hudson West	\$518.37	\$1,036.74	\$984.90	\$1,295.93	\$1,347.76	\$1,451.44
HMOCOC 30/50L	Large	HMO	Mid-Hudson West	\$494.27	\$988.54	\$939.11	\$1,235.68	\$1,285.10	\$1,383.96
HMOCOCBasixL	Large	HMO	Mid-Hudson West	\$512.77	\$1,025.54	\$974.26	\$1,281.93	\$1,333.20	\$1,435.76
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson West	\$523.36	\$1,046.72	\$994.38	\$1,308.40	\$1,360.74	\$1,465.41
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson West	\$550.71	\$1,101.42	\$1,046.35	\$1,376.78	\$1,431.85	\$1,541.99
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson West	\$489.28	\$978.56	\$929.63	\$1,223.20	\$1,272.13	\$1,369.98
HMOCOC 2/20L	Large	HMO	NY Metro	\$626.56	\$1,253.12	\$1,190.46	\$1,566.40	\$1,629.06	\$1,754.37
HMOCOC 10L	Large	HMO	NY Metro	\$626.71	\$1,253.42	\$1,190.75	\$1,566.78	\$1,629.45	\$1,754.79
HMOCOC 10+L	Large	HMO	NY Metro	\$633.67	\$1,267.34	\$1,203.97	\$1,584.18	\$1,647.54	\$1,774.28
HMOCOC 15L	Large	HMO	NY Metro	\$619.15	\$1,238.30	\$1,176.39	\$1,547.88	\$1,609.79	\$1,733.62
HMOCOC 15+L	Large	HMO	NY Metro	\$625.95	\$1,251.90	\$1,189.31	\$1,564.88	\$1,627.47	\$1,752.66
HMOCOC 20L	Large	HMO	NY Metro	\$606.64	\$1,213.28	\$1,152.62	\$1,516.60	\$1,577.26	\$1,698.59
HMOCOC 20+L	Large	HMO	NY Metro	\$618.90	\$1,237.80	\$1,175.91	\$1,547.25	\$1,609.14	\$1,732.92
HMOCOC 25L	Large	HMO	NY Metro	\$598.74	\$1,197.48	\$1,137.61	\$1,496.85	\$1,556.72	\$1,676.47
HMOCOC 25/40L	Large	HMO	NY Metro	\$560.83	\$1,121.66	\$1,065.58	\$1,402.08	\$1,458.16	\$1,570.32
HMOCOC 30/50L	Large	HMO	NY Metro	\$534.75	\$1,069.50	\$1,016.03	\$1,336.88	\$1,390.35	\$1,497.30
HMOCOCBasixL	Large	HMO	NY Metro	\$554.77	\$1,109.54	\$1,054.06	\$1,386.93	\$1,442.40	\$1,553.36
HMOCOC 25/40L-3	Large	HMO	NY Metro	\$566.22	\$1,132.44	\$1,075.82	\$1,415.55	\$1,472.17	\$1,585.42
HMOCOC 25L-2 CA	Large	HMO	NY Metro	\$595.85	\$1,191.70	\$1,132.12	\$1,489.63	\$1,549.21	\$1,668.38
HMOCOC 30/50L-2 CA	Large	HMO	NY Metro	\$529.33	\$1,058.66	\$1,005.73	\$1,323.33	\$1,376.26	\$1,482.12
HMOCOC 2/20L	Large	HMO	North Country	\$631.15	\$1,262.30	\$1,199.19	\$1,577.88	\$1,640.99	\$1,767.22
HMOCOC 10L	Large	HMO	North Country	\$631.33	\$1,262.66	\$1,199.53	\$1,578.33	\$1,641.46	\$1,767.72

MVP Health Plan, Inc.
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Exhibit D
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Plan Name	Group Size	Plan Type	Rate Region	Second Quarter Rates 2014					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10+L	Large	HMO	North Country	\$638.33	\$1,276.66	\$1,212.83	\$1,595.83	\$1,659.66	\$1,787.32
HMOCOC 15L	Large	HMO	North Country	\$623.69	\$1,247.38	\$1,185.01	\$1,559.23	\$1,621.59	\$1,746.33
HMOCOC 15+L	Large	HMO	North Country	\$630.53	\$1,261.06	\$1,198.01	\$1,576.33	\$1,639.38	\$1,765.48
HMOCOC 20L	Large	HMO	North Country	\$611.11	\$1,222.22	\$1,161.11	\$1,527.78	\$1,588.89	\$1,711.11
HMOCOC 20+L	Large	HMO	North Country	\$623.45	\$1,246.90	\$1,184.56	\$1,558.63	\$1,620.97	\$1,745.66
HMOCOC 25L	Large	HMO	North Country	\$603.13	\$1,206.26	\$1,145.95	\$1,507.83	\$1,568.14	\$1,688.76
HMOCOC 25/40L	Large	HMO	North Country	\$564.95	\$1,129.90	\$1,073.41	\$1,412.38	\$1,468.87	\$1,581.86
HMOCOC 30/50L	Large	HMO	North Country	\$538.67	\$1,077.34	\$1,023.47	\$1,346.68	\$1,400.54	\$1,508.28
HMOCOCBasixL	Large	HMO	North Country	\$558.82	\$1,117.64	\$1,061.76	\$1,397.05	\$1,452.93	\$1,564.70
HMOCOC 25/40L-3	Large	HMO	North Country	\$570.36	\$1,140.72	\$1,083.68	\$1,425.90	\$1,482.94	\$1,597.01
HMOCOC 25L-2 CA	Large	HMO	North Country	\$600.21	\$1,200.42	\$1,140.40	\$1,500.53	\$1,560.55	\$1,680.59
HMOCOC 30/50L-2 CA	Large	HMO	North Country	\$533.21	\$1,066.42	\$1,013.10	\$1,333.03	\$1,386.35	\$1,492.99
HMOCOC 2/20L	Large	HMO	Rochester	\$460.65	\$921.30	\$875.24	\$1,151.63	\$1,197.69	\$1,289.82
HMOCOC 10L	Large	HMO	Rochester	\$460.75	\$921.50	\$875.43	\$1,151.88	\$1,197.95	\$1,290.10
HMOCOC 10+L	Large	HMO	Rochester	\$465.86	\$931.72	\$885.13	\$1,164.65	\$1,211.24	\$1,304.41
HMOCOC 15L	Large	HMO	Rochester	\$455.21	\$910.42	\$864.90	\$1,138.03	\$1,183.55	\$1,274.59
HMOCOC 15+L	Large	HMO	Rochester	\$460.19	\$920.38	\$874.36	\$1,150.48	\$1,196.49	\$1,288.53
HMOCOC 20L	Large	HMO	Rochester	\$446.01	\$892.02	\$847.42	\$1,115.03	\$1,159.63	\$1,248.83
HMOCOC 20+L	Large	HMO	Rochester	\$455.01	\$910.02	\$864.52	\$1,137.53	\$1,183.03	\$1,274.03
HMOCOC 25L	Large	HMO	Rochester	\$440.24	\$880.48	\$836.46	\$1,100.60	\$1,144.62	\$1,232.67
HMOCOC 25/40L	Large	HMO	Rochester	\$412.40	\$824.80	\$783.56	\$1,031.00	\$1,072.24	\$1,154.72
HMOCOC 30/50L	Large	HMO	Rochester	\$393.27	\$786.54	\$747.21	\$983.18	\$1,022.50	\$1,101.16
HMOCOCBasixL	Large	HMO	Rochester	\$407.96	\$815.92	\$775.12	\$1,019.90	\$1,060.70	\$1,142.29
HMOCOC 25/40L-3	Large	HMO	Rochester	\$416.37	\$832.74	\$791.10	\$1,040.93	\$1,082.56	\$1,165.84
HMOCOC 25L-2 CA	Large	HMO	Rochester	\$438.10	\$876.20	\$832.39	\$1,095.25	\$1,139.06	\$1,226.68
HMOCOC 30/50L-2 CA	Large	HMO	Rochester	\$389.33	\$778.66	\$739.73	\$973.33	\$1,012.26	\$1,090.12

MVP Health Plan, Inc.

Article 44

Jan 1, 2015

Prior Year Premiums

Exhibit
VersionD
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Plan Name	Group Size	Plan Type	Rate Region	Third Quarter Rates 2014					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 2/20L	Large	HMO	Central I	\$592.51	\$1,185.02	\$1,125.77	\$1,481.28	\$1,540.53	\$1,659.03
HMOCOC 10L	Large	HMO	Central I	\$592.64	\$1,185.28	\$1,126.02	\$1,481.60	\$1,540.86	\$1,659.39
HMOCOC 10+L	Large	HMO	Central I	\$599.23	\$1,198.46	\$1,138.54	\$1,498.08	\$1,558.00	\$1,677.84
HMOCOC 15L	Large	HMO	Central I	\$585.49	\$1,170.98	\$1,112.43	\$1,463.73	\$1,522.27	\$1,639.37
HMOCOC 15+L	Large	HMO	Central I	\$591.91	\$1,183.82	\$1,124.63	\$1,479.78	\$1,538.97	\$1,657.35
HMOCOC 20L	Large	HMO	Central I	\$573.69	\$1,147.38	\$1,090.01	\$1,434.23	\$1,491.59	\$1,606.33
HMOCOC 20+L	Large	HMO	Central I	\$585.26	\$1,170.52	\$1,111.99	\$1,463.15	\$1,521.68	\$1,638.73
HMOCOC 25L	Large	HMO	Central I	\$566.19	\$1,132.38	\$1,075.76	\$1,415.48	\$1,472.09	\$1,585.33
HMOCOC 25/40L	Large	HMO	Central I	\$530.35	\$1,060.70	\$1,007.67	\$1,325.88	\$1,378.91	\$1,484.98
HMOCOC 30/50L	Large	HMO	Central I	\$505.71	\$1,011.42	\$960.85	\$1,264.28	\$1,314.85	\$1,415.99
HMOCOCBasixL	Large	HMO	Central I	\$524.65	\$1,049.30	\$996.84	\$1,311.63	\$1,364.09	\$1,469.02
HMOCOC 25/40L-3	Large	HMO	Central I	\$535.47	\$1,070.94	\$1,017.39	\$1,338.68	\$1,392.22	\$1,499.32
HMOCOC 25L-2 CA	Large	HMO	Central I	\$563.47	\$1,126.94	\$1,070.59	\$1,408.68	\$1,465.02	\$1,577.72
HMOCOC 30/50L-2 CA	Large	HMO	Central I	\$500.61	\$1,001.22	\$951.16	\$1,251.53	\$1,301.59	\$1,401.71
HMOCOC 2/20L	Large	HMO	Central II	\$574.86	\$1,149.72	\$1,092.23	\$1,437.15	\$1,494.64	\$1,609.61
HMOCOC 10L	Large	HMO	Central II	\$574.98	\$1,149.96	\$1,092.46	\$1,437.45	\$1,494.95	\$1,609.94
HMOCOC 10+L	Large	HMO	Central II	\$581.34	\$1,162.68	\$1,104.55	\$1,453.35	\$1,511.48	\$1,627.75
HMOCOC 15L	Large	HMO	Central II	\$568.05	\$1,136.10	\$1,079.30	\$1,420.13	\$1,476.93	\$1,590.54
HMOCOC 15+L	Large	HMO	Central II	\$574.28	\$1,148.56	\$1,091.13	\$1,435.70	\$1,493.13	\$1,607.98
HMOCOC 20L	Large	HMO	Central II	\$556.58	\$1,113.16	\$1,057.50	\$1,391.45	\$1,447.11	\$1,558.42
HMOCOC 20+L	Large	HMO	Central II	\$567.81	\$1,135.62	\$1,078.84	\$1,419.53	\$1,476.31	\$1,589.87
HMOCOC 25L	Large	HMO	Central II	\$549.33	\$1,098.66	\$1,043.73	\$1,373.33	\$1,428.26	\$1,538.12
HMOCOC 25/40L	Large	HMO	Central II	\$514.55	\$1,029.10	\$977.65	\$1,286.38	\$1,337.83	\$1,440.74
HMOCOC 30/50L	Large	HMO	Central II	\$490.64	\$981.28	\$932.22	\$1,226.60	\$1,275.66	\$1,373.79
HMOCOCBasixL	Large	HMO	Central II	\$509.02	\$1,018.04	\$967.14	\$1,272.55	\$1,323.45	\$1,425.26
HMOCOC 25/40L-3	Large	HMO	Central II	\$519.52	\$1,039.04	\$987.09	\$1,298.80	\$1,350.75	\$1,454.66
HMOCOC 25L-2 CA	Large	HMO	Central II	\$546.67	\$1,093.34	\$1,038.67	\$1,366.68	\$1,421.34	\$1,530.68
HMOCOC 30/50L-2 CA	Large	HMO	Central II	\$485.69	\$971.38	\$922.81	\$1,214.23	\$1,262.79	\$1,359.93
HMOCOC 2/20L	Large	HMO	Central III	\$621.97	\$1,243.94	\$1,181.74	\$1,554.93	\$1,617.12	\$1,741.52
HMOCOC 10L	Large	HMO	Central III	\$622.09	\$1,244.18	\$1,181.97	\$1,555.23	\$1,617.43	\$1,741.85
HMOCOC 10+L	Large	HMO	Central III	\$629.00	\$1,258.00	\$1,195.10	\$1,572.50	\$1,635.40	\$1,761.20
HMOCOC 15L	Large	HMO	Central III	\$614.59	\$1,229.18	\$1,167.72	\$1,536.48	\$1,597.93	\$1,720.85
HMOCOC 15+L	Large	HMO	Central III	\$621.33	\$1,242.66	\$1,180.53	\$1,553.33	\$1,615.46	\$1,739.72
HMOCOC 20L	Large	HMO	Central III	\$602.20	\$1,204.40	\$1,144.18	\$1,505.50	\$1,565.72	\$1,686.16
HMOCOC 20+L	Large	HMO	Central III	\$614.33	\$1,228.66	\$1,167.23	\$1,535.83	\$1,597.26	\$1,720.12
HMOCOC 25L	Large	HMO	Central III	\$594.32	\$1,188.64	\$1,129.21	\$1,485.80	\$1,545.23	\$1,664.10
HMOCOC 25/40L	Large	HMO	Central III	\$556.68	\$1,113.36	\$1,057.69	\$1,391.70	\$1,447.37	\$1,558.70
HMOCOC 30/50L	Large	HMO	Central III	\$530.82	\$1,061.64	\$1,008.56	\$1,327.05	\$1,380.13	\$1,486.30
HMOCOCBasixL	Large	HMO	Central III	\$550.69	\$1,101.38	\$1,046.31	\$1,376.73	\$1,431.79	\$1,541.93
HMOCOC 25/40L-3	Large	HMO	Central III	\$562.07	\$1,124.14	\$1,067.93	\$1,405.18	\$1,461.38	\$1,573.80
HMOCOC 25L-2 CA	Large	HMO	Central III	\$591.46	\$1,182.92	\$1,123.77	\$1,478.65	\$1,537.80	\$1,656.09
HMOCOC 30/50L-2 CA	Large	HMO	Central III	\$525.45	\$1,050.90	\$998.36	\$1,313.63	\$1,366.17	\$1,471.26
HMOCOC 2/20L	Large	HMO	East I	\$549.59	\$1,099.18	\$1,044.22	\$1,373.98	\$1,428.93	\$1,538.85
HMOCOC 10L	Large	HMO	East I	\$549.73	\$1,099.46	\$1,044.49	\$1,374.33	\$1,429.30	\$1,539.24
HMOCOC 10+L	Large	HMO	East I	\$555.81	\$1,111.62	\$1,056.04	\$1,389.53	\$1,445.11	\$1,556.27
HMOCOC 15L	Large	HMO	East I	\$543.08	\$1,086.16	\$1,031.85	\$1,357.70	\$1,412.01	\$1,520.62
HMOCOC 15+L	Large	HMO	East I	\$549.03	\$1,098.06	\$1,043.16	\$1,372.58	\$1,427.48	\$1,537.28
HMOCOC 20L	Large	HMO	East I	\$532.14	\$1,064.28	\$1,011.07	\$1,330.35	\$1,383.56	\$1,489.99
HMOCOC 20+L	Large	HMO	East I	\$542.86	\$1,085.72	\$1,031.43	\$1,357.15	\$1,411.44	\$1,520.01
HMOCOC 25L	Large	HMO	East I	\$525.19	\$1,050.38	\$997.86	\$1,312.98	\$1,365.49	\$1,470.53
HMOCOC 25/40L	Large	HMO	East I	\$491.95	\$983.90	\$934.71	\$1,229.88	\$1,279.07	\$1,377.46
HMOCOC 30/50L	Large	HMO	East I	\$469.11	\$938.22	\$891.31	\$1,172.78	\$1,219.69	\$1,313.51
HMOCOCBasixL	Large	HMO	East I	\$486.65	\$973.30	\$924.64	\$1,216.63	\$1,265.29	\$1,362.62
HMOCOC 25/40L-3	Large	HMO	East I	\$496.69	\$993.38	\$943.71	\$1,241.73	\$1,291.39	\$1,390.73
HMOCOC 25L-2 CA	Large	HMO	East I	\$522.66	\$1,045.32	\$993.05	\$1,306.65	\$1,358.92	\$1,463.45
HMOCOC 30/50L-2 CA	Large	HMO	East I	\$464.37	\$928.74	\$882.30	\$1,160.93	\$1,207.36	\$1,300.24
HMOCOC 2/20L	Large	HMO	East II	\$588.58	\$1,177.16	\$1,118.30	\$1,471.45	\$1,530.31	\$1,648.02

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Plan Name	Group Size	Plan Type	Rate Region	Third Quarter Rates 2014					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	East II	\$588.74	\$1,177.48	\$1,118.61	\$1,471.85	\$1,530.72	\$1,648.47
HMOCOC 10+L	Large	HMO	East II	\$595.25	\$1,190.50	\$1,130.98	\$1,488.13	\$1,547.65	\$1,666.70
HMOCOC 15L	Large	HMO	East II	\$581.62	\$1,163.24	\$1,105.08	\$1,454.05	\$1,512.21	\$1,628.54
HMOCOC 15+L	Large	HMO	East II	\$587.99	\$1,175.98	\$1,117.18	\$1,469.98	\$1,528.77	\$1,646.37
HMOCOC 20L	Large	HMO	East II	\$569.89	\$1,139.78	\$1,082.79	\$1,424.73	\$1,481.71	\$1,595.69
HMOCOC 20+L	Large	HMO	East II	\$581.39	\$1,162.78	\$1,104.64	\$1,453.48	\$1,511.61	\$1,627.89
HMOCOC 25L	Large	HMO	East II	\$562.44	\$1,124.88	\$1,068.64	\$1,406.10	\$1,462.34	\$1,574.83
HMOCOC 25/40L	Large	HMO	East II	\$526.84	\$1,053.68	\$1,001.00	\$1,317.10	\$1,369.78	\$1,475.15
HMOCOC 30/50L	Large	HMO	East II	\$502.37	\$1,004.74	\$954.50	\$1,255.93	\$1,306.16	\$1,406.64
HMOCOCBasixL	Large	HMO	East II	\$521.16	\$1,042.32	\$990.20	\$1,302.90	\$1,355.02	\$1,459.25
HMOCOC 25/40L-3	Large	HMO	East II	\$531.92	\$1,063.84	\$1,010.65	\$1,329.80	\$1,382.99	\$1,489.38
HMOCOC 25L-2 CA	Large	HMO	East II	\$559.74	\$1,119.48	\$1,063.51	\$1,399.35	\$1,455.32	\$1,567.27
HMOCOC 30/50L-2 CA	Large	HMO	East II	\$497.28	\$994.56	\$944.83	\$1,243.20	\$1,292.93	\$1,392.38
HMOCOC 2/20L	Large	HMO	Mid-Hudson East	\$628.08	\$1,256.16	\$1,193.35	\$1,570.20	\$1,633.01	\$1,758.62
HMOCOC 10L	Large	HMO	Mid-Hudson East	\$628.22	\$1,256.44	\$1,193.62	\$1,570.55	\$1,633.37	\$1,759.02
HMOCOC 10+L	Large	HMO	Mid-Hudson East	\$635.20	\$1,270.40	\$1,206.88	\$1,588.00	\$1,651.52	\$1,778.56
HMOCOC 15L	Large	HMO	Mid-Hudson East	\$620.65	\$1,241.30	\$1,179.24	\$1,551.63	\$1,613.69	\$1,737.82
HMOCOC 15+L	Large	HMO	Mid-Hudson East	\$627.45	\$1,254.90	\$1,192.16	\$1,568.63	\$1,631.37	\$1,756.86
HMOCOC 20L	Large	HMO	Mid-Hudson East	\$608.12	\$1,216.24	\$1,155.43	\$1,520.30	\$1,581.11	\$1,702.74
HMOCOC 20+L	Large	HMO	Mid-Hudson East	\$620.41	\$1,240.82	\$1,178.78	\$1,551.03	\$1,613.07	\$1,737.15
HMOCOC 25L	Large	HMO	Mid-Hudson East	\$600.19	\$1,200.38	\$1,140.36	\$1,500.48	\$1,560.49	\$1,680.53
HMOCOC 25/40L	Large	HMO	Mid-Hudson East	\$562.20	\$1,124.40	\$1,068.18	\$1,405.50	\$1,461.72	\$1,574.16
HMOCOC 30/50L	Large	HMO	Mid-Hudson East	\$536.05	\$1,072.10	\$1,018.50	\$1,340.13	\$1,393.73	\$1,500.94
HMOCOCBasixL	Large	HMO	Mid-Hudson East	\$556.10	\$1,112.20	\$1,056.59	\$1,390.25	\$1,445.86	\$1,557.08
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson East	\$567.59	\$1,135.18	\$1,078.42	\$1,418.98	\$1,475.73	\$1,589.25
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson East	\$597.28	\$1,194.56	\$1,134.83	\$1,493.20	\$1,552.93	\$1,672.38
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson East	\$530.62	\$1,061.24	\$1,008.18	\$1,326.55	\$1,379.61	\$1,485.74
HMOCOC 2/20L	Large	HMO	Mid-Hudson West	\$586.06	\$1,172.12	\$1,113.51	\$1,465.15	\$1,523.76	\$1,640.97
HMOCOC 10L	Large	HMO	Mid-Hudson West	\$586.19	\$1,172.38	\$1,113.76	\$1,465.48	\$1,524.09	\$1,641.33
HMOCOC 10+L	Large	HMO	Mid-Hudson West	\$592.70	\$1,185.40	\$1,126.13	\$1,481.75	\$1,541.02	\$1,659.56
HMOCOC 15L	Large	HMO	Mid-Hudson West	\$579.12	\$1,158.24	\$1,100.33	\$1,447.80	\$1,505.71	\$1,621.54
HMOCOC 15+L	Large	HMO	Mid-Hudson West	\$585.48	\$1,170.96	\$1,112.41	\$1,463.70	\$1,522.25	\$1,639.34
HMOCOC 20L	Large	HMO	Mid-Hudson West	\$567.43	\$1,134.86	\$1,078.12	\$1,418.58	\$1,475.32	\$1,588.80
HMOCOC 20+L	Large	HMO	Mid-Hudson West	\$578.88	\$1,157.76	\$1,099.87	\$1,447.20	\$1,505.09	\$1,620.86
HMOCOC 25L	Large	HMO	Mid-Hudson West	\$560.03	\$1,120.06	\$1,064.06	\$1,400.08	\$1,456.08	\$1,568.08
HMOCOC 25/40L	Large	HMO	Mid-Hudson West	\$524.59	\$1,049.18	\$996.72	\$1,311.48	\$1,363.93	\$1,468.85
HMOCOC 30/50L	Large	HMO	Mid-Hudson West	\$500.20	\$1,000.40	\$950.38	\$1,250.50	\$1,300.52	\$1,400.56
HMOCOCBasixL	Large	HMO	Mid-Hudson West	\$518.92	\$1,037.84	\$985.95	\$1,297.30	\$1,349.19	\$1,452.98
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson West	\$529.64	\$1,059.28	\$1,006.32	\$1,324.10	\$1,377.06	\$1,482.99
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson West	\$557.32	\$1,114.64	\$1,058.91	\$1,393.30	\$1,449.03	\$1,560.50
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson West	\$495.15	\$990.30	\$940.79	\$1,237.88	\$1,287.39	\$1,386.42
HMOCOC 2/20L	Large	HMO	NY Metro	\$634.08	\$1,268.16	\$1,204.75	\$1,585.20	\$1,648.61	\$1,775.42
HMOCOC 10L	Large	HMO	NY Metro	\$634.23	\$1,268.46	\$1,205.04	\$1,585.58	\$1,649.00	\$1,775.84
HMOCOC 10+L	Large	HMO	NY Metro	\$641.27	\$1,282.54	\$1,218.41	\$1,603.18	\$1,667.30	\$1,795.56
HMOCOC 15L	Large	HMO	NY Metro	\$626.58	\$1,253.16	\$1,190.50	\$1,566.45	\$1,629.11	\$1,754.42
HMOCOC 15+L	Large	HMO	NY Metro	\$633.46	\$1,266.92	\$1,203.57	\$1,583.65	\$1,647.00	\$1,773.69
HMOCOC 20L	Large	HMO	NY Metro	\$613.92	\$1,227.84	\$1,166.45	\$1,534.80	\$1,596.19	\$1,718.98
HMOCOC 20+L	Large	HMO	NY Metro	\$626.33	\$1,252.66	\$1,190.03	\$1,565.83	\$1,628.46	\$1,753.72
HMOCOC 25L	Large	HMO	NY Metro	\$605.92	\$1,211.84	\$1,151.25	\$1,514.80	\$1,575.39	\$1,696.58
HMOCOC 25/40L	Large	HMO	NY Metro	\$567.56	\$1,135.12	\$1,078.36	\$1,418.90	\$1,475.66	\$1,589.17
HMOCOC 30/50L	Large	HMO	NY Metro	\$541.17	\$1,082.34	\$1,028.22	\$1,352.93	\$1,407.04	\$1,515.28
HMOCOCBasixL	Large	HMO	NY Metro	\$561.43	\$1,122.86	\$1,066.72	\$1,403.58	\$1,459.72	\$1,572.00
HMOCOC 25/40L-3	Large	HMO	NY Metro	\$573.01	\$1,146.02	\$1,088.72	\$1,432.53	\$1,489.83	\$1,604.43
HMOCOC 25L-2 CA	Large	HMO	NY Metro	\$603.00	\$1,206.00	\$1,145.70	\$1,507.50	\$1,567.80	\$1,688.40
HMOCOC 30/50L-2 CA	Large	HMO	NY Metro	\$535.68	\$1,071.36	\$1,017.79	\$1,339.20	\$1,392.77	\$1,499.90
HMOCOC 2/20L	Large	HMO	North Country	\$638.72	\$1,277.44	\$1,213.57	\$1,596.80	\$1,660.67	\$1,788.42
HMOCOC 10L	Large	HMO	North Country	\$638.91	\$1,277.82	\$1,213.93	\$1,597.28	\$1,661.17	\$1,788.95

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Plan Name	Group Size	Plan Type	Rate Region	Third Quarter Rates 2014					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10+L	Large	HMO	North Country	\$645.99	\$1,291.98	\$1,227.38	\$1,614.98	\$1,679.57	\$1,808.77
HMOCOC 15L	Large	HMO	North Country	\$631.17	\$1,262.34	\$1,199.22	\$1,577.93	\$1,641.04	\$1,767.28
HMOCOC 15+L	Large	HMO	North Country	\$638.10	\$1,276.20	\$1,212.39	\$1,595.25	\$1,659.06	\$1,786.68
HMOCOC 20L	Large	HMO	North Country	\$618.44	\$1,236.88	\$1,175.04	\$1,546.10	\$1,607.94	\$1,731.63
HMOCOC 20+L	Large	HMO	North Country	\$630.93	\$1,261.86	\$1,198.77	\$1,577.33	\$1,640.42	\$1,766.60
HMOCOC 25L	Large	HMO	North Country	\$610.37	\$1,220.74	\$1,159.70	\$1,525.93	\$1,586.96	\$1,709.04
HMOCOC 25/40L	Large	HMO	North Country	\$571.73	\$1,143.46	\$1,086.29	\$1,429.33	\$1,486.50	\$1,600.84
HMOCOC 30/50L	Large	HMO	North Country	\$545.13	\$1,090.26	\$1,035.75	\$1,362.83	\$1,417.34	\$1,526.36
HMOCOCBasixL	Large	HMO	North Country	\$565.53	\$1,131.06	\$1,074.51	\$1,413.83	\$1,470.38	\$1,583.48
HMOCOC 25/40L-3	Large	HMO	North Country	\$577.20	\$1,154.40	\$1,096.68	\$1,443.00	\$1,500.72	\$1,616.16
HMOCOC 25L-2 CA	Large	HMO	North Country	\$607.41	\$1,214.82	\$1,154.08	\$1,518.53	\$1,579.27	\$1,700.75
HMOCOC 30/50L-2 CA	Large	HMO	North Country	\$539.61	\$1,079.22	\$1,025.26	\$1,349.03	\$1,402.99	\$1,510.91
HMOCOC 2/20L	Large	HMO	Rochester	\$466.18	\$932.36	\$885.74	\$1,165.45	\$1,212.07	\$1,305.30
HMOCOC 10L	Large	HMO	Rochester	\$466.28	\$932.56	\$885.93	\$1,165.70	\$1,212.33	\$1,305.58
HMOCOC 10+L	Large	HMO	Rochester	\$471.45	\$942.90	\$895.76	\$1,178.63	\$1,225.77	\$1,320.06
HMOCOC 15L	Large	HMO	Rochester	\$460.67	\$921.34	\$875.27	\$1,151.68	\$1,197.74	\$1,289.88
HMOCOC 15+L	Large	HMO	Rochester	\$465.71	\$931.42	\$884.85	\$1,164.28	\$1,210.85	\$1,303.99
HMOCOC 20L	Large	HMO	Rochester	\$451.36	\$902.72	\$857.58	\$1,128.40	\$1,173.54	\$1,263.81
HMOCOC 20+L	Large	HMO	Rochester	\$460.47	\$920.94	\$874.89	\$1,151.18	\$1,197.22	\$1,289.32
HMOCOC 25L	Large	HMO	Rochester	\$445.52	\$891.04	\$846.49	\$1,113.80	\$1,158.35	\$1,247.46
HMOCOC 25/40L	Large	HMO	Rochester	\$417.35	\$834.70	\$792.97	\$1,043.38	\$1,085.11	\$1,168.58
HMOCOC 30/50L	Large	HMO	Rochester	\$397.99	\$795.98	\$756.18	\$994.98	\$1,034.77	\$1,114.37
HMOCOCBasixL	Large	HMO	Rochester	\$412.86	\$825.72	\$784.43	\$1,032.15	\$1,073.44	\$1,156.01
HMOCOC 25/40L-3	Large	HMO	Rochester	\$421.37	\$842.74	\$800.60	\$1,053.43	\$1,095.56	\$1,179.84
HMOCOC 25L-2 CA	Large	HMO	Rochester	\$443.36	\$886.72	\$842.38	\$1,108.40	\$1,152.74	\$1,241.41
HMOCOC 30/50L-2 CA	Large	HMO	Rochester	\$394.00	\$788.00	\$748.60	\$985.00	\$1,024.40	\$1,103.20

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Plan Name	Group Size	Plan Type	Rate Region	Fourth Quarter Rates 2014					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 2/20L	Large	HMO	Central I	\$599.62	\$1,199.24	\$1,139.28	\$1,499.05	\$1,559.01	\$1,678.94
HMOCOC 10L	Large	HMO	Central I	\$599.75	\$1,199.50	\$1,139.53	\$1,499.38	\$1,559.35	\$1,679.30
HMOCOC 10+L	Large	HMO	Central I	\$606.42	\$1,212.84	\$1,152.20	\$1,516.05	\$1,576.69	\$1,697.98
HMOCOC 15L	Large	HMO	Central I	\$592.52	\$1,185.04	\$1,125.79	\$1,481.30	\$1,540.55	\$1,659.06
HMOCOC 15+L	Large	HMO	Central I	\$599.01	\$1,198.02	\$1,138.12	\$1,497.53	\$1,557.43	\$1,677.23
HMOCOC 20L	Large	HMO	Central I	\$580.57	\$1,161.14	\$1,103.08	\$1,451.43	\$1,509.48	\$1,625.60
HMOCOC 20+L	Large	HMO	Central I	\$592.28	\$1,184.56	\$1,125.33	\$1,480.70	\$1,539.93	\$1,658.38
HMOCOC 25L	Large	HMO	Central I	\$572.98	\$1,145.96	\$1,088.66	\$1,432.45	\$1,489.75	\$1,604.34
HMOCOC 25/40L	Large	HMO	Central I	\$536.71	\$1,073.42	\$1,019.75	\$1,341.78	\$1,395.45	\$1,502.79
HMOCOC 30/50L	Large	HMO	Central I	\$511.78	\$1,023.56	\$972.38	\$1,279.45	\$1,330.63	\$1,432.98
HMOCOCBasixL	Large	HMO	Central I	\$530.95	\$1,061.90	\$1,008.81	\$1,327.38	\$1,380.47	\$1,486.66
HMOCOC 25/40L-3	Large	HMO	Central I	\$541.90	\$1,083.80	\$1,029.61	\$1,354.75	\$1,408.94	\$1,517.32
HMOCOC 25L-2 CA	Large	HMO	Central I	\$570.23	\$1,140.46	\$1,083.44	\$1,425.58	\$1,482.60	\$1,596.64
HMOCOC 30/50L-2 CA	Large	HMO	Central I	\$506.62	\$1,013.24	\$962.58	\$1,266.55	\$1,317.21	\$1,418.54
HMOCOC 2/20L	Large	HMO	Central II	\$581.76	\$1,163.52	\$1,105.34	\$1,454.40	\$1,512.58	\$1,628.93
HMOCOC 10L	Large	HMO	Central II	\$581.88	\$1,163.76	\$1,105.57	\$1,454.70	\$1,512.89	\$1,629.26
HMOCOC 10+L	Large	HMO	Central II	\$588.32	\$1,176.64	\$1,117.81	\$1,470.80	\$1,529.63	\$1,647.30
HMOCOC 15L	Large	HMO	Central II	\$574.87	\$1,149.74	\$1,092.25	\$1,437.18	\$1,494.66	\$1,609.64
HMOCOC 15+L	Large	HMO	Central II	\$581.17	\$1,162.34	\$1,104.22	\$1,452.93	\$1,511.04	\$1,627.28
HMOCOC 20L	Large	HMO	Central II	\$563.26	\$1,126.52	\$1,070.19	\$1,408.15	\$1,464.48	\$1,577.13
HMOCOC 20+L	Large	HMO	Central II	\$574.62	\$1,149.24	\$1,091.78	\$1,436.55	\$1,494.01	\$1,608.94
HMOCOC 25L	Large	HMO	Central II	\$555.92	\$1,111.84	\$1,056.25	\$1,389.80	\$1,445.39	\$1,556.58
HMOCOC 25/40L	Large	HMO	Central II	\$520.72	\$1,041.44	\$989.37	\$1,301.80	\$1,353.87	\$1,458.02
HMOCOC 30/50L	Large	HMO	Central II	\$496.53	\$993.06	\$943.41	\$1,241.33	\$1,290.98	\$1,390.28
HMOCOCBasixL	Large	HMO	Central II	\$515.13	\$1,030.26	\$978.75	\$1,287.83	\$1,339.34	\$1,442.36
HMOCOC 25/40L-3	Large	HMO	Central II	\$525.75	\$1,051.50	\$998.93	\$1,314.38	\$1,366.95	\$1,472.10
HMOCOC 25L-2 CA	Large	HMO	Central II	\$553.23	\$1,106.46	\$1,051.14	\$1,383.08	\$1,438.40	\$1,549.04
HMOCOC 30/50L-2 CA	Large	HMO	Central II	\$491.52	\$983.04	\$933.89	\$1,228.80	\$1,277.95	\$1,376.26
HMOCOC 2/20L	Large	HMO	Central III	\$629.43	\$1,258.86	\$1,195.92	\$1,573.58	\$1,636.52	\$1,762.40
HMOCOC 10L	Large	HMO	Central III	\$629.56	\$1,259.12	\$1,196.16	\$1,573.90	\$1,636.86	\$1,762.77
HMOCOC 10+L	Large	HMO	Central III	\$636.55	\$1,273.10	\$1,209.45	\$1,591.38	\$1,655.03	\$1,782.34
HMOCOC 15L	Large	HMO	Central III	\$621.97	\$1,243.94	\$1,181.74	\$1,554.93	\$1,617.12	\$1,741.52
HMOCOC 15+L	Large	HMO	Central III	\$628.79	\$1,257.58	\$1,194.70	\$1,571.98	\$1,634.85	\$1,760.61
HMOCOC 20L	Large	HMO	Central III	\$609.43	\$1,218.86	\$1,157.92	\$1,523.58	\$1,584.52	\$1,706.40
HMOCOC 20+L	Large	HMO	Central III	\$621.70	\$1,243.40	\$1,181.23	\$1,554.25	\$1,616.42	\$1,740.76
HMOCOC 25L	Large	HMO	Central III	\$601.45	\$1,202.90	\$1,142.76	\$1,503.63	\$1,563.77	\$1,684.06
HMOCOC 25/40L	Large	HMO	Central III	\$563.36	\$1,126.72	\$1,070.38	\$1,408.40	\$1,464.74	\$1,577.41
HMOCOC 30/50L	Large	HMO	Central III	\$537.19	\$1,074.38	\$1,020.66	\$1,342.98	\$1,396.69	\$1,504.13
HMOCOCBasixL	Large	HMO	Central III	\$557.30	\$1,114.60	\$1,058.87	\$1,393.25	\$1,448.98	\$1,560.44
HMOCOC 25/40L-3	Large	HMO	Central III	\$568.81	\$1,137.62	\$1,080.74	\$1,422.03	\$1,478.91	\$1,592.67
HMOCOC 25L-2 CA	Large	HMO	Central III	\$598.56	\$1,197.12	\$1,137.26	\$1,496.40	\$1,556.26	\$1,675.97
HMOCOC 30/50L-2 CA	Large	HMO	Central III	\$531.76	\$1,063.52	\$1,010.34	\$1,329.40	\$1,382.58	\$1,488.93
HMOCOC 2/20L	Large	HMO	East I	\$556.19	\$1,112.38	\$1,056.76	\$1,390.48	\$1,446.09	\$1,557.33
HMOCOC 10L	Large	HMO	East I	\$556.33	\$1,112.66	\$1,057.03	\$1,390.83	\$1,446.46	\$1,557.72
HMOCOC 10+L	Large	HMO	East I	\$562.48	\$1,124.96	\$1,068.71	\$1,406.20	\$1,462.45	\$1,574.94
HMOCOC 15L	Large	HMO	East I	\$549.60	\$1,099.20	\$1,044.24	\$1,374.00	\$1,428.96	\$1,538.88
HMOCOC 15+L	Large	HMO	East I	\$555.62	\$1,111.24	\$1,055.68	\$1,389.05	\$1,444.61	\$1,555.74
HMOCOC 20L	Large	HMO	East I	\$538.53	\$1,077.06	\$1,023.21	\$1,346.33	\$1,400.18	\$1,507.88
HMOCOC 20+L	Large	HMO	East I	\$549.37	\$1,098.74	\$1,043.80	\$1,373.43	\$1,428.36	\$1,538.24
HMOCOC 25L	Large	HMO	East I	\$531.49	\$1,062.98	\$1,009.83	\$1,328.73	\$1,381.87	\$1,488.17
HMOCOC 25/40L	Large	HMO	East I	\$497.85	\$995.70	\$945.92	\$1,244.63	\$1,294.41	\$1,393.98
HMOCOC 30/50L	Large	HMO	East I	\$474.74	\$949.48	\$902.01	\$1,186.85	\$1,234.32	\$1,329.27
HMOCOCBasixL	Large	HMO	East I	\$492.49	\$984.98	\$935.73	\$1,231.23	\$1,280.47	\$1,378.97
HMOCOC 25/40L-3	Large	HMO	East I	\$502.65	\$1,005.30	\$955.04	\$1,256.63	\$1,306.89	\$1,407.42
HMOCOC 25L-2 CA	Large	HMO	East I	\$528.93	\$1,057.86	\$1,004.97	\$1,322.33	\$1,375.22	\$1,481.00
HMOCOC 30/50L-2 CA	Large	HMO	East I	\$469.94	\$939.88	\$892.89	\$1,174.85	\$1,221.84	\$1,315.83
HMOCOC 2/20L	Large	HMO	East II	\$595.64	\$1,191.28	\$1,131.72	\$1,489.10	\$1,548.66	\$1,667.79

MVP Health Plan, Inc.

Article 44

Jan 1, 2015

Prior Year Premiums

Exhibit
VersionD
7/18/2014

Plan Name	Group Size	Plan Type	Rate Region	Fourth Quarter Rates 2014					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	East II	\$595.80	\$1,191.60	\$1,132.02	\$1,489.50	\$1,549.08	\$1,668.24
HMOCOC 10+L	Large	HMO	East II	\$602.39	\$1,204.78	\$1,144.54	\$1,505.98	\$1,566.21	\$1,686.69
HMOCOC 15L	Large	HMO	East II	\$588.60	\$1,177.20	\$1,118.34	\$1,471.50	\$1,530.36	\$1,648.08
HMOCOC 15+L	Large	HMO	East II	\$595.05	\$1,190.10	\$1,130.60	\$1,487.63	\$1,547.13	\$1,666.14
HMOCOC 20L	Large	HMO	East II	\$576.73	\$1,153.46	\$1,095.79	\$1,441.83	\$1,499.50	\$1,614.84
HMOCOC 20+L	Large	HMO	East II	\$588.37	\$1,176.74	\$1,117.90	\$1,470.93	\$1,529.76	\$1,647.44
HMOCOC 25L	Large	HMO	East II	\$569.19	\$1,138.38	\$1,081.46	\$1,422.98	\$1,479.89	\$1,593.73
HMOCOC 25/40L	Large	HMO	East II	\$533.16	\$1,066.32	\$1,013.00	\$1,332.90	\$1,386.22	\$1,492.85
HMOCOC 30/50L	Large	HMO	East II	\$508.40	\$1,016.80	\$965.96	\$1,271.00	\$1,321.84	\$1,423.52
HMOCOCBasixL	Large	HMO	East II	\$527.41	\$1,054.82	\$1,002.08	\$1,318.53	\$1,371.27	\$1,476.75
HMOCOC 25/40L-3	Large	HMO	East II	\$538.30	\$1,076.60	\$1,022.77	\$1,345.75	\$1,399.58	\$1,507.24
HMOCOC 25L-2 CA	Large	HMO	East II	\$566.46	\$1,132.92	\$1,076.27	\$1,416.15	\$1,472.80	\$1,586.09
HMOCOC 30/50L-2 CA	Large	HMO	East II	\$503.25	\$1,006.50	\$956.18	\$1,258.13	\$1,308.45	\$1,409.10
HMOCOC 2/20L	Large	HMO	Mid-Hudson East	\$635.62	\$1,271.24	\$1,207.68	\$1,589.05	\$1,652.61	\$1,779.74
HMOCOC 10L	Large	HMO	Mid-Hudson East	\$635.76	\$1,271.52	\$1,207.94	\$1,589.40	\$1,652.98	\$1,780.13
HMOCOC 10+L	Large	HMO	Mid-Hudson East	\$642.82	\$1,285.64	\$1,221.36	\$1,607.05	\$1,671.33	\$1,799.90
HMOCOC 15L	Large	HMO	Mid-Hudson East	\$628.10	\$1,256.20	\$1,193.39	\$1,570.25	\$1,633.06	\$1,758.68
HMOCOC 15+L	Large	HMO	Mid-Hudson East	\$634.98	\$1,269.96	\$1,206.46	\$1,587.45	\$1,650.95	\$1,777.94
HMOCOC 20L	Large	HMO	Mid-Hudson East	\$615.42	\$1,230.84	\$1,169.30	\$1,538.55	\$1,600.09	\$1,723.18
HMOCOC 20+L	Large	HMO	Mid-Hudson East	\$627.85	\$1,255.70	\$1,192.92	\$1,569.63	\$1,632.41	\$1,757.98
HMOCOC 25L	Large	HMO	Mid-Hudson East	\$607.39	\$1,214.78	\$1,154.04	\$1,518.48	\$1,579.21	\$1,700.69
HMOCOC 25/40L	Large	HMO	Mid-Hudson East	\$568.95	\$1,137.90	\$1,081.01	\$1,422.38	\$1,479.27	\$1,593.06
HMOCOC 30/50L	Large	HMO	Mid-Hudson East	\$542.48	\$1,084.96	\$1,030.71	\$1,356.20	\$1,410.45	\$1,518.94
HMOCOCBasixL	Large	HMO	Mid-Hudson East	\$562.77	\$1,125.54	\$1,069.26	\$1,406.93	\$1,463.20	\$1,575.76
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson East	\$574.40	\$1,148.80	\$1,091.36	\$1,436.00	\$1,493.44	\$1,608.32
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson East	\$604.45	\$1,208.90	\$1,148.46	\$1,511.13	\$1,571.57	\$1,692.46
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson East	\$536.99	\$1,073.98	\$1,020.28	\$1,342.48	\$1,396.17	\$1,503.57
HMOCOC 2/20L	Large	HMO	Mid-Hudson West	\$593.09	\$1,186.18	\$1,126.87	\$1,482.73	\$1,542.03	\$1,660.65
HMOCOC 10L	Large	HMO	Mid-Hudson West	\$593.22	\$1,186.44	\$1,127.12	\$1,483.05	\$1,542.37	\$1,661.02
HMOCOC 10+L	Large	HMO	Mid-Hudson West	\$599.81	\$1,199.62	\$1,139.64	\$1,499.53	\$1,559.51	\$1,679.47
HMOCOC 15L	Large	HMO	Mid-Hudson West	\$586.07	\$1,172.14	\$1,113.53	\$1,465.18	\$1,523.78	\$1,641.00
HMOCOC 15+L	Large	HMO	Mid-Hudson West	\$592.51	\$1,185.02	\$1,125.77	\$1,481.28	\$1,540.53	\$1,659.03
HMOCOC 20L	Large	HMO	Mid-Hudson West	\$574.24	\$1,148.48	\$1,091.06	\$1,435.60	\$1,493.02	\$1,607.87
HMOCOC 20+L	Large	HMO	Mid-Hudson West	\$585.83	\$1,171.66	\$1,113.08	\$1,464.58	\$1,523.16	\$1,640.32
HMOCOC 25L	Large	HMO	Mid-Hudson West	\$566.75	\$1,133.50	\$1,076.83	\$1,416.88	\$1,473.55	\$1,586.90
HMOCOC 25/40L	Large	HMO	Mid-Hudson West	\$530.89	\$1,061.78	\$1,008.69	\$1,327.23	\$1,380.31	\$1,486.49
HMOCOC 30/50L	Large	HMO	Mid-Hudson West	\$506.20	\$1,012.40	\$961.78	\$1,265.50	\$1,316.12	\$1,417.36
HMOCOCBasixL	Large	HMO	Mid-Hudson West	\$525.15	\$1,050.30	\$997.79	\$1,312.88	\$1,365.39	\$1,470.42
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson West	\$536.00	\$1,072.00	\$1,018.40	\$1,340.00	\$1,393.60	\$1,500.80
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson West	\$564.01	\$1,128.02	\$1,071.62	\$1,410.03	\$1,466.43	\$1,579.23
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson West	\$501.09	\$1,002.18	\$952.07	\$1,252.73	\$1,302.83	\$1,403.05
HMOCOC 2/20L	Large	HMO	NY Metro	\$641.69	\$1,283.38	\$1,219.21	\$1,604.23	\$1,668.39	\$1,796.73
HMOCOC 10L	Large	HMO	NY Metro	\$641.84	\$1,283.68	\$1,219.50	\$1,604.60	\$1,668.78	\$1,797.15
HMOCOC 10+L	Large	HMO	NY Metro	\$648.97	\$1,297.94	\$1,233.04	\$1,622.43	\$1,687.32	\$1,817.12
HMOCOC 15L	Large	HMO	NY Metro	\$634.10	\$1,268.20	\$1,204.79	\$1,585.25	\$1,648.66	\$1,775.48
HMOCOC 15+L	Large	HMO	NY Metro	\$641.06	\$1,282.12	\$1,218.01	\$1,602.65	\$1,666.76	\$1,794.97
HMOCOC 20L	Large	HMO	NY Metro	\$621.29	\$1,242.58	\$1,180.45	\$1,553.23	\$1,615.35	\$1,739.61
HMOCOC 20+L	Large	HMO	NY Metro	\$633.85	\$1,267.70	\$1,204.32	\$1,584.63	\$1,648.01	\$1,774.78
HMOCOC 25L	Large	HMO	NY Metro	\$613.19	\$1,226.38	\$1,165.06	\$1,532.98	\$1,594.29	\$1,716.93
HMOCOC 25/40L	Large	HMO	NY Metro	\$574.37	\$1,148.74	\$1,091.30	\$1,435.93	\$1,493.36	\$1,608.24
HMOCOC 30/50L	Large	HMO	NY Metro	\$547.66	\$1,095.32	\$1,040.55	\$1,369.15	\$1,423.92	\$1,533.45
HMOCOCBasixL	Large	HMO	NY Metro	\$568.17	\$1,136.34	\$1,079.52	\$1,420.43	\$1,477.24	\$1,590.88
HMOCOC 25/40L-3	Large	HMO	NY Metro	\$579.89	\$1,159.78	\$1,101.79	\$1,449.73	\$1,507.71	\$1,623.69
HMOCOC 25L-2 CA	Large	HMO	NY Metro	\$610.24	\$1,220.48	\$1,159.46	\$1,525.60	\$1,586.62	\$1,708.67
HMOCOC 30/50L-2 CA	Large	HMO	NY Metro	\$542.11	\$1,084.22	\$1,030.01	\$1,355.28	\$1,409.49	\$1,517.91
HMOCOC 2/20L	Large	HMO	North Country	\$646.38	\$1,292.76	\$1,228.12	\$1,615.95	\$1,680.59	\$1,809.86
HMOCOC 10L	Large	HMO	North Country	\$646.58	\$1,293.16	\$1,228.50	\$1,616.45	\$1,681.11	\$1,810.42

MVP Health Plan, Inc.
Article 44
Jan 1, 2015
Prior Year Premiums

Exhibit D
Version 7/18/2014

Plan Name	Group Size	Plan Type	Rate Region	Fourth Quarter Rates 2014					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10+L	Large	HMO	North Country	\$653.74	\$1,307.48	\$1,242.11	\$1,634.35	\$1,699.72	\$1,830.47
HMOCOC 15L	Large	HMO	North Country	\$638.74	\$1,277.48	\$1,213.61	\$1,596.85	\$1,660.72	\$1,788.47
HMOCOC 15+L	Large	HMO	North Country	\$645.76	\$1,291.52	\$1,226.94	\$1,614.40	\$1,678.98	\$1,808.13
HMOCOC 20L	Large	HMO	North Country	\$625.86	\$1,251.72	\$1,189.13	\$1,564.65	\$1,627.24	\$1,752.41
HMOCOC 20+L	Large	HMO	North Country	\$638.50	\$1,277.00	\$1,213.15	\$1,596.25	\$1,660.10	\$1,787.80
HMOCOC 25L	Large	HMO	North Country	\$617.69	\$1,235.38	\$1,173.61	\$1,544.23	\$1,605.99	\$1,729.53
HMOCOC 25/40L	Large	HMO	North Country	\$578.59	\$1,157.18	\$1,099.32	\$1,446.48	\$1,504.33	\$1,620.05
HMOCOC 30/50L	Large	HMO	North Country	\$551.67	\$1,103.34	\$1,048.17	\$1,379.18	\$1,434.34	\$1,544.68
HMOCOCBasixL	Large	HMO	North Country	\$572.32	\$1,144.64	\$1,087.41	\$1,430.80	\$1,488.03	\$1,602.50
HMOCOC 25/40L-3	Large	HMO	North Country	\$584.13	\$1,168.26	\$1,109.85	\$1,460.33	\$1,518.74	\$1,635.56
HMOCOC 25L-2 CA	Large	HMO	North Country	\$614.70	\$1,229.40	\$1,167.93	\$1,536.75	\$1,598.22	\$1,721.16
HMOCOC 30/50L-2 CA	Large	HMO	North Country	\$546.09	\$1,092.18	\$1,037.57	\$1,365.23	\$1,419.83	\$1,529.05
HMOCOC 2/20L	Large	HMO	Rochester	\$471.77	\$943.54	\$896.36	\$1,179.43	\$1,226.60	\$1,320.96
HMOCOC 10L	Large	HMO	Rochester	\$471.88	\$943.76	\$896.57	\$1,179.70	\$1,226.89	\$1,321.26
HMOCOC 10+L	Large	HMO	Rochester	\$477.11	\$954.22	\$906.51	\$1,192.78	\$1,240.49	\$1,335.91
HMOCOC 15L	Large	HMO	Rochester	\$466.20	\$932.40	\$885.78	\$1,165.50	\$1,212.12	\$1,305.36
HMOCOC 15+L	Large	HMO	Rochester	\$471.30	\$942.60	\$895.47	\$1,178.25	\$1,225.38	\$1,319.64
HMOCOC 20L	Large	HMO	Rochester	\$456.78	\$913.56	\$867.88	\$1,141.95	\$1,187.63	\$1,278.98
HMOCOC 20+L	Large	HMO	Rochester	\$466.00	\$932.00	\$885.40	\$1,165.00	\$1,211.60	\$1,304.80
HMOCOC 25L	Large	HMO	Rochester	\$450.87	\$901.74	\$856.65	\$1,127.18	\$1,172.26	\$1,262.44
HMOCOC 25/40L	Large	HMO	Rochester	\$422.36	\$844.72	\$802.48	\$1,055.90	\$1,098.14	\$1,182.61
HMOCOC 30/50L	Large	HMO	Rochester	\$402.77	\$805.54	\$765.26	\$1,006.93	\$1,047.20	\$1,127.76
HMOCOCBasixL	Large	HMO	Rochester	\$417.81	\$835.62	\$793.84	\$1,044.53	\$1,086.31	\$1,169.87
HMOCOC 25/40L-3	Large	HMO	Rochester	\$426.43	\$852.86	\$810.22	\$1,066.08	\$1,108.72	\$1,194.00
HMOCOC 25L-2 CA	Large	HMO	Rochester	\$448.68	\$897.36	\$852.49	\$1,121.70	\$1,166.57	\$1,256.30
HMOCOC 30/50L-2 CA	Large	HMO	Rochester	\$398.73	\$797.46	\$757.59	\$996.83	\$1,036.70	\$1,116.44

MVP Health Plan, Inc.

Article 44

Jan 1, 2015

Change in Dollars

Exhibit
VersionE
7/18/2014

Plan Name	Group Size	Plan Type	Rate Region	First Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 2/20L	Large	HMO	Central I	\$54.47	\$108.94	\$103.49	\$136.18	\$141.63	\$152.52
HMOCOC 10L	Large	HMO	Central I	\$54.47	\$108.94	\$103.50	\$136.17	\$141.62	\$152.51
HMOCOC 10+L	Large	HMO	Central I	\$55.08	\$110.16	\$104.65	\$137.70	\$143.21	\$154.22
HMOCOC 15L	Large	HMO	Central I	\$53.82	\$107.64	\$102.26	\$134.55	\$139.94	\$150.70
HMOCOC 15+L	Large	HMO	Central I	\$54.41	\$108.82	\$103.37	\$136.02	\$141.47	\$152.35
HMOCOC 20L	Large	HMO	Central I	\$52.72	\$105.44	\$100.17	\$131.80	\$137.07	\$147.61
HMOCOC 20+L	Large	HMO	Central I	\$53.80	\$107.60	\$102.22	\$134.50	\$139.88	\$150.64
HMOCOC 25L	Large	HMO	Central I	\$52.03	\$104.06	\$98.85	\$130.07	\$135.28	\$145.68
HMOCOC 25/40L	Large	HMO	Central I	\$48.74	\$97.48	\$92.60	\$121.85	\$126.72	\$136.47
HMOCOC 30/50L	Large	HMO	Central I	\$46.49	\$92.98	\$88.33	\$116.23	\$120.87	\$130.18
HMOCOCBasixL	Large	HMO	Central I	\$48.23	\$96.46	\$91.64	\$120.58	\$125.40	\$135.05
HMOCOC 25/40L-3	Large	HMO	Central I	\$49.22	\$98.44	\$93.51	\$123.05	\$127.97	\$137.82
HMOCOC 25L-2 CA	Large	HMO	Central I	\$51.79	\$103.58	\$98.40	\$129.47	\$134.66	\$145.01
HMOCOC 30/50L-2 CA	Large	HMO	Central I	\$46.03	\$92.06	\$87.46	\$115.08	\$119.68	\$128.88
HMOCOC 2/20L	Large	HMO	Central II	\$52.85	\$105.70	\$100.42	\$132.13	\$137.41	\$147.98
HMOCOC 10L	Large	HMO	Central II	\$52.86	\$105.72	\$100.43	\$132.15	\$137.44	\$148.00
HMOCOC 10+L	Large	HMO	Central II	\$53.44	\$106.88	\$101.53	\$133.60	\$138.95	\$149.63
HMOCOC 15L	Large	HMO	Central II	\$52.23	\$104.46	\$99.23	\$130.57	\$135.80	\$146.24
HMOCOC 15+L	Large	HMO	Central II	\$52.79	\$105.58	\$100.30	\$131.98	\$137.26	\$147.81
HMOCOC 20L	Large	HMO	Central II	\$51.16	\$102.32	\$97.21	\$127.90	\$133.01	\$143.25
HMOCOC 20+L	Large	HMO	Central II	\$52.18	\$104.36	\$99.14	\$130.45	\$135.67	\$146.11
HMOCOC 25L	Large	HMO	Central II	\$50.49	\$100.98	\$95.93	\$126.23	\$131.27	\$141.38
HMOCOC 25/40L	Large	HMO	Central II	\$47.29	\$94.58	\$89.85	\$118.23	\$122.96	\$132.41
HMOCOC 30/50L	Large	HMO	Central II	\$45.11	\$90.22	\$85.71	\$112.77	\$117.29	\$126.30
HMOCOCBasixL	Large	HMO	Central II	\$46.79	\$93.58	\$88.90	\$116.98	\$121.66	\$131.01
HMOCOC 25/40L-3	Large	HMO	Central II	\$47.75	\$95.50	\$90.73	\$119.37	\$124.15	\$133.70
HMOCOC 25L-2 CA	Large	HMO	Central II	\$50.25	\$100.50	\$95.48	\$125.63	\$130.65	\$140.70
HMOCOC 30/50L-2 CA	Large	HMO	Central II	\$44.65	\$89.30	\$84.83	\$111.63	\$116.09	\$125.02
HMOCOC 2/20L	Large	HMO	Central III	\$57.18	\$114.36	\$108.64	\$142.95	\$148.67	\$160.10
HMOCOC 10L	Large	HMO	Central III	\$57.19	\$114.38	\$108.66	\$142.98	\$148.70	\$160.13
HMOCOC 10+L	Large	HMO	Central III	\$57.82	\$115.64	\$109.86	\$144.55	\$150.33	\$161.89
HMOCOC 15L	Large	HMO	Central III	\$56.50	\$113.00	\$107.35	\$141.25	\$146.90	\$158.20
HMOCOC 15+L	Large	HMO	Central III	\$57.12	\$114.24	\$108.53	\$142.80	\$148.51	\$159.94
HMOCOC 20L	Large	HMO	Central III	\$55.36	\$110.72	\$105.18	\$138.40	\$143.94	\$155.01
HMOCOC 20+L	Large	HMO	Central III	\$56.46	\$112.92	\$107.27	\$141.15	\$146.80	\$158.09
HMOCOC 25L	Large	HMO	Central III	\$54.63	\$109.26	\$103.80	\$136.57	\$142.03	\$152.96
HMOCOC 25/40L	Large	HMO	Central III	\$51.17	\$102.34	\$97.23	\$127.93	\$133.04	\$143.27
HMOCOC 30/50L	Large	HMO	Central III	\$48.79	\$97.58	\$92.70	\$121.97	\$126.85	\$136.61
HMOCOCBasixL	Large	HMO	Central III	\$50.62	\$101.24	\$96.18	\$126.55	\$131.61	\$141.73
HMOCOC 25/40L-3	Large	HMO	Central III	\$51.66	\$103.32	\$98.15	\$129.15	\$134.32	\$144.64
HMOCOC 25L-2 CA	Large	HMO	Central III	\$54.37	\$108.74	\$103.30	\$135.93	\$141.36	\$152.23
HMOCOC 30/50L-2 CA	Large	HMO	Central III	\$48.31	\$96.62	\$91.79	\$120.78	\$125.60	\$135.27
HMOCOC 2/20L	Large	HMO	East I	\$50.53	\$101.06	\$96.00	\$126.32	\$131.38	\$141.49
HMOCOC 10L	Large	HMO	East I	\$50.54	\$101.08	\$96.03	\$126.35	\$131.41	\$141.51
HMOCOC 10+L	Large	HMO	East I	\$51.09	\$102.18	\$97.07	\$127.72	\$132.83	\$143.05
HMOCOC 15L	Large	HMO	East I	\$49.92	\$99.84	\$94.85	\$124.80	\$129.79	\$139.78
HMOCOC 15+L	Large	HMO	East I	\$50.47	\$100.94	\$95.89	\$126.17	\$131.23	\$141.32
HMOCOC 20L	Large	HMO	East I	\$48.92	\$97.84	\$92.95	\$122.30	\$127.20	\$136.98
HMOCOC 20+L	Large	HMO	East I	\$49.90	\$99.80	\$94.81	\$124.75	\$129.74	\$139.72
HMOCOC 25L	Large	HMO	East I	\$48.27	\$96.54	\$91.71	\$120.67	\$125.50	\$135.15
HMOCOC 25/40L	Large	HMO	East I	\$45.21	\$90.42	\$85.90	\$113.03	\$117.54	\$126.59
HMOCOC 30/50L	Large	HMO	East I	\$43.12	\$86.24	\$81.92	\$107.80	\$112.11	\$120.74
HMOCOCBasixL	Large	HMO	East I	\$44.73	\$89.46	\$84.99	\$111.83	\$116.30	\$125.25
HMOCOC 25/40L-3	Large	HMO	East I	\$45.66	\$91.32	\$86.76	\$114.15	\$118.71	\$127.85
HMOCOC 25L-2 CA	Large	HMO	East I	\$48.04	\$96.08	\$91.27	\$120.10	\$124.91	\$134.51
HMOCOC 30/50L-2 CA	Large	HMO	East I	\$42.69	\$85.38	\$81.11	\$106.73	\$111.00	\$119.53
HMOCOC 2/20L	Large	HMO	East II	\$54.10	\$108.20	\$102.79	\$135.25	\$140.66	\$151.48

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Plan Name	Group Size	Plan Type	Rate Region	First Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	East II	\$54.11	\$108.22	\$102.81	\$135.28	\$140.68	\$151.51
HMOCOC 10+L	Large	HMO	East II	\$54.71	\$109.42	\$103.95	\$136.78	\$142.25	\$153.18
HMOCOC 15L	Large	HMO	East II	\$53.46	\$106.92	\$101.57	\$133.65	\$138.99	\$149.69
HMOCOC 15+L	Large	HMO	East II	\$54.05	\$108.10	\$102.69	\$135.12	\$140.53	\$151.34
HMOCOC 20L	Large	HMO	East II	\$52.39	\$104.78	\$99.54	\$130.97	\$136.21	\$146.69
HMOCOC 20+L	Large	HMO	East II	\$53.44	\$106.88	\$101.54	\$133.60	\$138.95	\$149.63
HMOCOC 25L	Large	HMO	East II	\$51.70	\$103.40	\$98.23	\$129.25	\$134.42	\$144.76
HMOCOC 25/40L	Large	HMO	East II	\$48.43	\$96.86	\$92.02	\$121.08	\$125.92	\$135.60
HMOCOC 30/50L	Large	HMO	East II	\$46.19	\$92.38	\$87.76	\$115.48	\$120.10	\$129.33
HMOCOCBasixL	Large	HMO	East II	\$47.90	\$95.80	\$91.01	\$119.75	\$124.54	\$134.12
HMOCOC 25/40L-3	Large	HMO	East II	\$48.89	\$97.78	\$92.89	\$122.23	\$127.11	\$136.90
HMOCOC 25L-2 CA	Large	HMO	East II	\$51.46	\$102.92	\$97.77	\$128.65	\$133.80	\$144.09
HMOCOC 30/50L-2 CA	Large	HMO	East II	\$45.72	\$91.44	\$86.86	\$114.30	\$118.87	\$128.02
HMOCOC 2/20L	Large	HMO	Mid-Hudson East	\$57.74	\$115.48	\$109.71	\$144.35	\$150.13	\$161.67
HMOCOC 10L	Large	HMO	Mid-Hudson East	\$57.75	\$115.50	\$109.72	\$144.37	\$150.15	\$161.70
HMOCOC 10+L	Large	HMO	Mid-Hudson East	\$58.38	\$116.76	\$110.92	\$145.95	\$151.79	\$163.47
HMOCOC 15L	Large	HMO	Mid-Hudson East	\$57.05	\$114.10	\$108.39	\$142.63	\$148.33	\$159.74
HMOCOC 15+L	Large	HMO	Mid-Hudson East	\$57.67	\$115.34	\$109.58	\$144.18	\$149.94	\$161.47
HMOCOC 20L	Large	HMO	Mid-Hudson East	\$55.91	\$111.82	\$106.23	\$139.78	\$145.36	\$156.55
HMOCOC 20+L	Large	HMO	Mid-Hudson East	\$57.03	\$114.06	\$108.36	\$142.58	\$148.28	\$159.69
HMOCOC 25L	Large	HMO	Mid-Hudson East	\$55.17	\$110.34	\$104.82	\$137.93	\$143.45	\$154.48
HMOCOC 25/40L	Large	HMO	Mid-Hudson East	\$51.69	\$103.38	\$98.21	\$129.23	\$134.40	\$144.73
HMOCOC 30/50L	Large	HMO	Mid-Hudson East	\$49.27	\$98.54	\$93.61	\$123.17	\$128.10	\$137.95
HMOCOCBasixL	Large	HMO	Mid-Hudson East	\$51.11	\$102.22	\$97.11	\$127.77	\$132.89	\$143.11
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson East	\$52.17	\$104.34	\$99.12	\$130.42	\$135.64	\$146.07
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson East	\$54.90	\$109.80	\$104.31	\$137.25	\$142.74	\$153.72
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson East	\$48.78	\$97.56	\$92.68	\$121.95	\$126.82	\$136.58
HMOCOC 2/20L	Large	HMO	Mid-Hudson West	\$53.87	\$107.74	\$102.35	\$134.68	\$140.07	\$150.84
HMOCOC 10L	Large	HMO	Mid-Hudson West	\$53.88	\$107.76	\$102.38	\$134.70	\$140.09	\$150.86
HMOCOC 10+L	Large	HMO	Mid-Hudson West	\$54.48	\$108.96	\$103.51	\$136.20	\$141.65	\$152.55
HMOCOC 15L	Large	HMO	Mid-Hudson West	\$53.24	\$106.48	\$101.16	\$133.10	\$138.42	\$149.07
HMOCOC 15+L	Large	HMO	Mid-Hudson West	\$53.82	\$107.64	\$102.26	\$134.55	\$139.93	\$150.70
HMOCOC 20L	Large	HMO	Mid-Hudson West	\$52.16	\$104.32	\$99.10	\$130.40	\$135.62	\$146.05
HMOCOC 20+L	Large	HMO	Mid-Hudson West	\$53.21	\$106.42	\$101.10	\$133.03	\$138.35	\$148.99
HMOCOC 25L	Large	HMO	Mid-Hudson West	\$51.48	\$102.96	\$97.81	\$128.70	\$133.85	\$144.15
HMOCOC 25/40L	Large	HMO	Mid-Hudson West	\$48.23	\$96.46	\$91.64	\$120.58	\$125.40	\$135.04
HMOCOC 30/50L	Large	HMO	Mid-Hudson West	\$45.97	\$91.94	\$87.34	\$114.92	\$119.52	\$128.71
HMOCOCBasixL	Large	HMO	Mid-Hudson West	\$47.70	\$95.40	\$90.63	\$119.25	\$124.02	\$133.56
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson West	\$48.69	\$97.38	\$92.51	\$121.72	\$126.59	\$136.33
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson West	\$51.23	\$102.46	\$97.34	\$128.08	\$133.20	\$143.45
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson West	\$45.51	\$91.02	\$86.47	\$113.78	\$118.32	\$127.43
HMOCOC 2/20L	Large	HMO	NY Metro	\$130.05	\$260.10	\$247.09	\$325.12	\$338.13	\$364.14
HMOCOC 10L	Large	HMO	NY Metro	\$130.08	\$260.16	\$247.15	\$325.20	\$338.21	\$364.23
HMOCOC 10+L	Large	HMO	NY Metro	\$131.52	\$263.04	\$249.89	\$328.80	\$341.95	\$368.25
HMOCOC 15L	Large	HMO	NY Metro	\$128.51	\$257.02	\$244.17	\$321.27	\$334.12	\$359.83
HMOCOC 15+L	Large	HMO	NY Metro	\$129.92	\$259.84	\$246.85	\$324.80	\$337.79	\$363.78
HMOCOC 20L	Large	HMO	NY Metro	\$125.92	\$251.84	\$239.24	\$314.80	\$327.39	\$352.58
HMOCOC 20+L	Large	HMO	NY Metro	\$128.47	\$256.94	\$244.10	\$321.18	\$334.02	\$359.71
HMOCOC 25L	Large	HMO	NY Metro	\$124.27	\$248.54	\$236.11	\$310.68	\$323.11	\$347.96
HMOCOC 25/40L	Large	HMO	NY Metro	\$116.41	\$232.82	\$221.18	\$291.03	\$302.66	\$325.95
HMOCOC 30/50L	Large	HMO	NY Metro	\$110.99	\$221.98	\$210.88	\$277.47	\$288.57	\$310.77
HMOCOCBasixL	Large	HMO	NY Metro	\$115.16	\$230.32	\$218.81	\$287.90	\$299.42	\$322.45
HMOCOC 25/40L-3	Large	HMO	NY Metro	\$117.52	\$235.04	\$223.29	\$293.80	\$305.55	\$329.05
HMOCOC 25L-2 CA	Large	HMO	NY Metro	\$123.69	\$247.38	\$235.01	\$309.23	\$321.59	\$346.34
HMOCOC 30/50L-2 CA	Large	HMO	NY Metro	\$109.87	\$219.74	\$208.75	\$274.67	\$285.66	\$307.64
HMOCOC 2/20L	Large	HMO	North Country	\$58.70	\$117.40	\$111.53	\$146.75	\$152.62	\$164.36
HMOCOC 10L	Large	HMO	North Country	\$58.74	\$117.48	\$111.60	\$146.85	\$152.73	\$164.47

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Plan Name	Group Size	Plan Type	Rate Region	First Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10+L	Large	HMO	North Country	\$59.38	\$118.76	\$112.83	\$148.45	\$154.38	\$166.26
HMOCOC 15L	Large	HMO	North Country	\$58.01	\$116.02	\$110.22	\$145.02	\$150.83	\$162.43
HMOCOC 15+L	Large	HMO	North Country	\$58.66	\$117.32	\$111.45	\$146.65	\$152.52	\$164.25
HMOCOC 20L	Large	HMO	North Country	\$56.85	\$113.70	\$108.02	\$142.13	\$147.81	\$159.18
HMOCOC 20+L	Large	HMO	North Country	\$57.99	\$115.98	\$110.19	\$144.98	\$150.77	\$162.37
HMOCOC 25L	Large	HMO	North Country	\$56.10	\$112.20	\$106.59	\$140.25	\$145.86	\$157.08
HMOCOC 25/40L	Large	HMO	North Country	\$52.55	\$105.10	\$99.84	\$131.37	\$136.63	\$147.14
HMOCOC 30/50L	Large	HMO	North Country	\$50.11	\$100.22	\$95.21	\$125.28	\$130.28	\$140.31
HMOCOCBasixL	Large	HMO	North Country	\$52.00	\$104.00	\$98.80	\$130.00	\$135.20	\$145.60
HMOCOC 25/40L-3	Large	HMO	North Country	\$53.05	\$106.10	\$100.80	\$132.63	\$137.93	\$148.54
HMOCOC 25L-2 CA	Large	HMO	North Country	\$55.83	\$111.66	\$106.08	\$139.57	\$145.16	\$156.33
HMOCOC 30/50L-2 CA	Large	HMO	North Country	\$49.60	\$99.20	\$94.24	\$124.00	\$128.96	\$138.88
HMOCOC 2/20L	Large	HMO	Rochester	\$42.85	\$85.70	\$81.42	\$107.12	\$111.41	\$119.98
HMOCOC 10L	Large	HMO	Rochester	\$42.86	\$85.72	\$81.44	\$107.15	\$111.44	\$120.01
HMOCOC 10+L	Large	HMO	Rochester	\$43.33	\$86.66	\$82.32	\$108.33	\$112.66	\$121.33
HMOCOC 15L	Large	HMO	Rochester	\$42.35	\$84.70	\$80.46	\$105.87	\$110.11	\$118.58
HMOCOC 15+L	Large	HMO	Rochester	\$42.81	\$85.62	\$81.34	\$107.02	\$111.30	\$119.87
HMOCOC 20L	Large	HMO	Rochester	\$41.49	\$82.98	\$78.83	\$103.73	\$107.88	\$116.17
HMOCOC 20+L	Large	HMO	Rochester	\$42.34	\$84.68	\$80.45	\$105.85	\$110.08	\$118.55
HMOCOC 25L	Large	HMO	Rochester	\$40.95	\$81.90	\$77.80	\$102.38	\$106.47	\$114.66
HMOCOC 25/40L	Large	HMO	Rochester	\$38.37	\$76.74	\$72.90	\$95.92	\$99.76	\$107.43
HMOCOC 30/50L	Large	HMO	Rochester	\$36.59	\$73.18	\$69.52	\$91.47	\$95.13	\$102.45
HMOCOCBasixL	Large	HMO	Rochester	\$37.95	\$75.90	\$72.10	\$94.88	\$98.67	\$106.26
HMOCOC 25/40L-3	Large	HMO	Rochester	\$38.74	\$77.48	\$73.60	\$96.85	\$100.72	\$108.48
HMOCOC 25L-2 CA	Large	HMO	Rochester	\$40.75	\$81.50	\$77.42	\$101.87	\$105.95	\$114.10
HMOCOC 30/50L-2 CA	Large	HMO	Rochester	\$36.22	\$72.44	\$68.82	\$90.55	\$94.17	\$101.41

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Plan Name	Group Size	Plan Type	Rate Region	Second Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 2/20L	Large	HMO	Central I	\$57.03	\$114.06	\$108.36	\$142.58	\$148.28	\$159.69
HMOCOC 10L	Large	HMO	Central I	\$57.03	\$114.06	\$108.36	\$142.57	\$148.27	\$159.68
HMOCOC 10+L	Large	HMO	Central I	\$57.66	\$115.32	\$109.55	\$144.15	\$149.92	\$161.44
HMOCOC 15L	Large	HMO	Central I	\$56.34	\$112.68	\$107.04	\$140.85	\$146.48	\$157.75
HMOCOC 15+L	Large	HMO	Central I	\$56.96	\$113.92	\$108.23	\$142.40	\$148.10	\$159.49
HMOCOC 20L	Large	HMO	Central I	\$55.19	\$110.38	\$104.86	\$137.97	\$143.50	\$154.53
HMOCOC 20+L	Large	HMO	Central I	\$56.32	\$112.64	\$107.01	\$140.80	\$146.43	\$157.69
HMOCOC 25L	Large	HMO	Central I	\$54.47	\$108.94	\$103.50	\$136.18	\$141.62	\$152.52
HMOCOC 25/40L	Large	HMO	Central I	\$51.03	\$102.06	\$96.96	\$127.58	\$132.67	\$142.88
HMOCOC 30/50L	Large	HMO	Central I	\$48.66	\$97.32	\$92.45	\$121.65	\$126.51	\$136.25
HMOCOCBasixL	Large	HMO	Central I	\$50.49	\$100.98	\$95.93	\$126.22	\$131.27	\$141.38
HMOCOC 25/40L-3	Large	HMO	Central I	\$51.53	\$103.06	\$97.91	\$128.83	\$133.98	\$144.28
HMOCOC 25L-2 CA	Large	HMO	Central I	\$54.22	\$108.44	\$103.02	\$135.55	\$140.98	\$151.82
HMOCOC 30/50L-2 CA	Large	HMO	Central I	\$48.18	\$96.36	\$91.55	\$120.45	\$125.27	\$134.90
HMOCOC 2/20L	Large	HMO	Central II	\$55.32	\$110.64	\$105.10	\$138.30	\$143.84	\$154.90
HMOCOC 10L	Large	HMO	Central II	\$55.33	\$110.66	\$105.13	\$138.33	\$143.85	\$154.92
HMOCOC 10+L	Large	HMO	Central II	\$55.95	\$111.90	\$106.30	\$139.87	\$145.47	\$156.66
HMOCOC 15L	Large	HMO	Central II	\$54.67	\$109.34	\$103.87	\$136.67	\$142.14	\$153.07
HMOCOC 15+L	Large	HMO	Central II	\$55.26	\$110.52	\$105.00	\$138.15	\$143.68	\$154.72
HMOCOC 20L	Large	HMO	Central II	\$53.56	\$107.12	\$101.77	\$133.90	\$139.25	\$149.97
HMOCOC 20+L	Large	HMO	Central II	\$54.63	\$109.26	\$103.80	\$136.58	\$142.04	\$152.97
HMOCOC 25L	Large	HMO	Central II	\$52.85	\$105.70	\$100.41	\$132.13	\$137.41	\$147.98
HMOCOC 25/40L	Large	HMO	Central II	\$49.51	\$99.02	\$94.06	\$123.77	\$128.73	\$138.63
HMOCOC 30/50L	Large	HMO	Central II	\$47.22	\$94.44	\$89.72	\$118.05	\$122.77	\$132.21
HMOCOCBasixL	Large	HMO	Central II	\$48.99	\$97.98	\$93.08	\$122.48	\$127.37	\$137.18
HMOCOC 25/40L-3	Large	HMO	Central II	\$49.99	\$99.98	\$94.99	\$124.98	\$129.97	\$139.97
HMOCOC 25L-2 CA	Large	HMO	Central II	\$52.60	\$105.20	\$99.94	\$131.50	\$136.76	\$147.28
HMOCOC 30/50L-2 CA	Large	HMO	Central II	\$46.74	\$93.48	\$88.80	\$116.85	\$121.52	\$130.88
HMOCOC 2/20L	Large	HMO	Central III	\$59.86	\$119.72	\$113.74	\$149.65	\$155.64	\$167.61
HMOCOC 10L	Large	HMO	Central III	\$59.87	\$119.74	\$113.75	\$149.67	\$155.66	\$167.63
HMOCOC 10+L	Large	HMO	Central III	\$60.53	\$121.06	\$115.00	\$151.33	\$157.38	\$169.49
HMOCOC 15L	Large	HMO	Central III	\$59.15	\$118.30	\$112.39	\$147.88	\$153.79	\$165.62
HMOCOC 15+L	Large	HMO	Central III	\$59.80	\$119.60	\$113.62	\$149.50	\$155.48	\$167.44
HMOCOC 20L	Large	HMO	Central III	\$57.95	\$115.90	\$110.11	\$144.88	\$150.67	\$162.26
HMOCOC 20+L	Large	HMO	Central III	\$59.10	\$118.20	\$112.29	\$147.75	\$153.66	\$165.48
HMOCOC 25L	Large	HMO	Central III	\$57.19	\$114.38	\$108.66	\$142.97	\$148.70	\$160.13
HMOCOC 25/40L	Large	HMO	Central III	\$53.57	\$107.14	\$101.79	\$133.93	\$139.28	\$150.00
HMOCOC 30/50L	Large	HMO	Central III	\$51.08	\$102.16	\$97.05	\$127.70	\$132.81	\$143.03
HMOCOCBasixL	Large	HMO	Central III	\$52.99	\$105.98	\$100.69	\$132.48	\$137.77	\$148.37
HMOCOC 25/40L-3	Large	HMO	Central III	\$54.08	\$108.16	\$102.75	\$135.20	\$140.60	\$151.42
HMOCOC 25L-2 CA	Large	HMO	Central III	\$56.92	\$113.84	\$108.14	\$142.30	\$147.99	\$159.38
HMOCOC 30/50L-2 CA	Large	HMO	Central III	\$50.57	\$101.14	\$96.08	\$126.43	\$131.48	\$141.59
HMOCOC 2/20L	Large	HMO	East I	\$52.90	\$105.80	\$100.51	\$132.25	\$137.54	\$148.12
HMOCOC 10L	Large	HMO	East I	\$52.91	\$105.82	\$100.53	\$132.27	\$137.56	\$148.15
HMOCOC 10+L	Large	HMO	East I	\$53.49	\$106.98	\$101.63	\$133.73	\$139.08	\$149.77
HMOCOC 15L	Large	HMO	East I	\$52.26	\$104.52	\$99.29	\$130.65	\$135.88	\$146.33
HMOCOC 15+L	Large	HMO	East I	\$52.84	\$105.68	\$100.39	\$132.10	\$137.39	\$147.95
HMOCOC 20L	Large	HMO	East I	\$51.21	\$102.42	\$97.30	\$128.02	\$133.14	\$143.39
HMOCOC 20+L	Large	HMO	East I	\$52.24	\$104.48	\$99.25	\$130.60	\$135.83	\$146.27
HMOCOC 25L	Large	HMO	East I	\$50.54	\$101.08	\$96.03	\$126.35	\$131.40	\$141.51
HMOCOC 25/40L	Large	HMO	East I	\$47.33	\$94.66	\$89.93	\$118.33	\$123.06	\$132.52
HMOCOC 30/50L	Large	HMO	East I	\$45.14	\$90.28	\$85.76	\$112.85	\$117.36	\$126.39
HMOCOCBasixL	Large	HMO	East I	\$46.83	\$93.66	\$88.98	\$117.08	\$121.76	\$131.13
HMOCOC 25/40L-3	Large	HMO	East I	\$47.80	\$95.60	\$90.82	\$119.50	\$124.28	\$133.84
HMOCOC 25L-2 CA	Large	HMO	East I	\$50.30	\$100.60	\$95.57	\$125.75	\$130.78	\$140.84
HMOCOC 30/50L-2 CA	Large	HMO	East I	\$44.69	\$89.38	\$84.92	\$111.73	\$116.19	\$125.13
HMOCOC 2/20L	Large	HMO	East II	\$56.63	\$113.26	\$107.60	\$141.58	\$147.24	\$158.56

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Plan Name	Group Size	Plan Type	Rate Region	Second Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	East II	\$56.64	\$113.28	\$107.62	\$141.60	\$147.26	\$158.59
HMOCOC 10+L	Large	HMO	East II	\$57.28	\$114.56	\$108.83	\$143.20	\$148.93	\$160.39
HMOCOC 15L	Large	HMO	East II	\$55.97	\$111.94	\$106.34	\$139.93	\$145.52	\$156.71
HMOCOC 15+L	Large	HMO	East II	\$56.58	\$113.16	\$107.50	\$141.45	\$147.11	\$158.42
HMOCOC 20L	Large	HMO	East II	\$54.84	\$109.68	\$104.19	\$137.10	\$142.58	\$153.56
HMOCOC 20+L	Large	HMO	East II	\$55.95	\$111.90	\$106.31	\$139.88	\$145.47	\$156.66
HMOCOC 25L	Large	HMO	East II	\$54.12	\$108.24	\$102.83	\$135.30	\$140.71	\$151.53
HMOCOC 25/40L	Large	HMO	East II	\$50.70	\$101.40	\$96.33	\$126.75	\$131.82	\$141.96
HMOCOC 30/50L	Large	HMO	East II	\$48.35	\$96.70	\$91.86	\$120.87	\$125.71	\$135.38
HMOCOCBasixL	Large	HMO	East II	\$50.14	\$100.28	\$95.27	\$125.35	\$130.36	\$140.40
HMOCOC 25/40L-3	Large	HMO	East II	\$51.18	\$102.36	\$97.24	\$127.95	\$133.06	\$143.30
HMOCOC 25L-2 CA	Large	HMO	East II	\$53.87	\$107.74	\$102.35	\$134.68	\$140.06	\$150.84
HMOCOC 30/50L-2 CA	Large	HMO	East II	\$47.86	\$95.72	\$90.94	\$119.65	\$124.43	\$134.01
HMOCOC 2/20L	Large	HMO	Mid-Hudson East	\$60.45	\$120.90	\$114.85	\$151.12	\$157.17	\$169.26
HMOCOC 10L	Large	HMO	Mid-Hudson East	\$60.46	\$120.92	\$114.88	\$151.15	\$157.20	\$169.28
HMOCOC 10+L	Large	HMO	Mid-Hudson East	\$61.12	\$122.24	\$116.13	\$152.80	\$158.91	\$171.13
HMOCOC 15L	Large	HMO	Mid-Hudson East	\$59.73	\$119.46	\$113.49	\$149.32	\$155.30	\$167.25
HMOCOC 15+L	Large	HMO	Mid-Hudson East	\$60.37	\$120.74	\$114.70	\$150.92	\$156.96	\$169.03
HMOCOC 20L	Large	HMO	Mid-Hudson East	\$58.53	\$117.06	\$111.21	\$146.32	\$152.17	\$163.88
HMOCOC 20+L	Large	HMO	Mid-Hudson East	\$59.70	\$119.40	\$113.43	\$149.25	\$155.22	\$167.16
HMOCOC 25L	Large	HMO	Mid-Hudson East	\$57.76	\$115.52	\$109.75	\$144.40	\$150.18	\$161.72
HMOCOC 25/40L	Large	HMO	Mid-Hudson East	\$54.11	\$108.22	\$102.81	\$135.27	\$140.68	\$151.51
HMOCOC 30/50L	Large	HMO	Mid-Hudson East	\$51.58	\$103.16	\$98.00	\$128.95	\$134.11	\$144.43
HMOCOCBasixL	Large	HMO	Mid-Hudson East	\$53.50	\$107.00	\$101.65	\$133.75	\$139.10	\$149.80
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson East	\$54.62	\$109.24	\$103.78	\$136.55	\$142.01	\$152.93
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson East	\$57.47	\$114.94	\$109.19	\$143.68	\$149.42	\$160.92
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson East	\$51.06	\$102.12	\$97.01	\$127.65	\$132.75	\$142.97
HMOCOC 2/20L	Large	HMO	Mid-Hudson West	\$56.39	\$112.78	\$107.14	\$140.97	\$146.61	\$157.89
HMOCOC 10L	Large	HMO	Mid-Hudson West	\$56.40	\$112.80	\$107.16	\$141.00	\$146.64	\$157.92
HMOCOC 10+L	Large	HMO	Mid-Hudson West	\$57.04	\$114.08	\$108.38	\$142.60	\$148.31	\$159.71
HMOCOC 15L	Large	HMO	Mid-Hudson West	\$55.73	\$111.46	\$105.88	\$139.32	\$144.90	\$156.04
HMOCOC 15+L	Large	HMO	Mid-Hudson West	\$56.34	\$112.68	\$107.04	\$140.85	\$146.49	\$157.75
HMOCOC 20L	Large	HMO	Mid-Hudson West	\$54.60	\$109.20	\$103.74	\$136.50	\$141.96	\$152.88
HMOCOC 20+L	Large	HMO	Mid-Hudson West	\$55.71	\$111.42	\$105.85	\$139.28	\$144.85	\$155.98
HMOCOC 25L	Large	HMO	Mid-Hudson West	\$53.89	\$107.78	\$102.39	\$134.72	\$140.12	\$150.89
HMOCOC 25/40L	Large	HMO	Mid-Hudson West	\$50.49	\$100.98	\$95.93	\$126.22	\$131.28	\$141.37
HMOCOC 30/50L	Large	HMO	Mid-Hudson West	\$48.13	\$96.26	\$91.45	\$120.32	\$125.14	\$134.76
HMOCOCBasixL	Large	HMO	Mid-Hudson West	\$49.94	\$99.88	\$94.89	\$124.85	\$129.85	\$139.83
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson West	\$50.97	\$101.94	\$96.85	\$127.43	\$132.52	\$142.71
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson West	\$53.63	\$107.26	\$101.90	\$134.07	\$139.43	\$150.16
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson West	\$47.64	\$95.28	\$90.52	\$119.10	\$123.86	\$133.40
HMOCOC 2/20L	Large	HMO	NY Metro	\$133.86	\$267.72	\$254.34	\$334.65	\$348.03	\$374.81
HMOCOC 10L	Large	HMO	NY Metro	\$133.89	\$267.78	\$254.39	\$334.72	\$348.11	\$374.89
HMOCOC 10+L	Large	HMO	NY Metro	\$135.38	\$270.76	\$257.23	\$338.45	\$351.99	\$379.06
HMOCOC 15L	Large	HMO	NY Metro	\$132.27	\$264.54	\$251.31	\$330.67	\$343.90	\$370.36
HMOCOC 15+L	Large	HMO	NY Metro	\$133.73	\$267.46	\$254.08	\$334.32	\$347.70	\$374.44
HMOCOC 20L	Large	HMO	NY Metro	\$129.61	\$259.22	\$246.26	\$324.03	\$336.99	\$362.91
HMOCOC 20+L	Large	HMO	NY Metro	\$132.23	\$264.46	\$251.24	\$330.58	\$343.80	\$370.24
HMOCOC 25L	Large	HMO	NY Metro	\$127.91	\$255.82	\$243.03	\$319.78	\$332.57	\$358.15
HMOCOC 25/40L	Large	HMO	NY Metro	\$119.82	\$239.64	\$227.66	\$299.55	\$311.53	\$335.50
HMOCOC 30/50L	Large	HMO	NY Metro	\$114.24	\$228.48	\$217.05	\$285.60	\$297.02	\$319.87
HMOCOCBasixL	Large	HMO	NY Metro	\$118.53	\$237.06	\$225.21	\$296.32	\$308.18	\$331.88
HMOCOC 25/40L-3	Large	HMO	NY Metro	\$120.97	\$241.94	\$229.84	\$302.43	\$314.52	\$338.71
HMOCOC 25L-2 CA	Large	HMO	NY Metro	\$127.31	\$254.62	\$241.88	\$318.27	\$331.01	\$356.47
HMOCOC 30/50L-2 CA	Large	HMO	NY Metro	\$113.08	\$226.16	\$214.85	\$282.70	\$294.01	\$316.63
HMOCOC 2/20L	Large	HMO	North Country	\$61.46	\$122.92	\$116.77	\$153.65	\$159.80	\$172.09
HMOCOC 10L	Large	HMO	North Country	\$61.49	\$122.98	\$116.83	\$153.72	\$159.87	\$172.18

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Plan Name	Group Size	Plan Type	Rate Region	Second Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10+L	Large	HMO	North Country	\$62.16	\$124.32	\$118.10	\$155.40	\$161.61	\$174.05
HMOCOC 15L	Large	HMO	North Country	\$60.72	\$121.44	\$115.37	\$151.80	\$157.88	\$170.02
HMOCOC 15+L	Large	HMO	North Country	\$61.41	\$122.82	\$116.68	\$153.52	\$159.66	\$171.95
HMOCOC 20L	Large	HMO	North Country	\$59.51	\$119.02	\$113.07	\$148.77	\$154.72	\$166.63
HMOCOC 20+L	Large	HMO	North Country	\$60.71	\$121.42	\$115.34	\$151.77	\$157.85	\$169.99
HMOCOC 25L	Large	HMO	North Country	\$58.73	\$117.46	\$111.58	\$146.82	\$152.70	\$164.45
HMOCOC 25/40L	Large	HMO	North Country	\$55.01	\$110.02	\$104.51	\$137.52	\$143.03	\$154.03
HMOCOC 30/50L	Large	HMO	North Country	\$52.46	\$104.92	\$99.68	\$131.15	\$136.40	\$146.88
HMOCOCBasixL	Large	HMO	North Country	\$54.43	\$108.86	\$103.42	\$136.08	\$141.52	\$152.40
HMOCOC 25/40L-3	Large	HMO	North Country	\$55.54	\$111.08	\$105.53	\$138.85	\$144.40	\$155.51
HMOCOC 25L-2 CA	Large	HMO	North Country	\$58.44	\$116.88	\$111.04	\$146.10	\$151.94	\$163.63
HMOCOC 30/50L-2 CA	Large	HMO	North Country	\$51.93	\$103.86	\$98.67	\$129.82	\$135.01	\$145.40
HMOCOC 2/20L	Large	HMO	Rochester	\$44.86	\$89.72	\$85.23	\$112.15	\$116.64	\$125.61
HMOCOC 10L	Large	HMO	Rochester	\$44.87	\$89.74	\$85.25	\$112.17	\$116.66	\$125.64
HMOCOC 10+L	Large	HMO	Rochester	\$45.37	\$90.74	\$86.21	\$113.43	\$117.96	\$127.03
HMOCOC 15L	Large	HMO	Rochester	\$44.33	\$88.66	\$84.23	\$110.82	\$115.25	\$124.12
HMOCOC 15+L	Large	HMO	Rochester	\$44.81	\$89.62	\$85.14	\$112.02	\$116.51	\$125.47
HMOCOC 20L	Large	HMO	Rochester	\$43.43	\$86.86	\$82.52	\$108.57	\$112.91	\$121.60
HMOCOC 20+L	Large	HMO	Rochester	\$44.32	\$88.64	\$84.21	\$110.80	\$115.23	\$124.09
HMOCOC 25L	Large	HMO	Rochester	\$42.87	\$85.74	\$81.45	\$107.18	\$111.47	\$120.04
HMOCOC 25/40L	Large	HMO	Rochester	\$40.17	\$80.34	\$76.32	\$100.43	\$104.44	\$112.48
HMOCOC 30/50L	Large	HMO	Rochester	\$38.31	\$76.62	\$72.79	\$95.77	\$99.61	\$107.26
HMOCOCBasixL	Large	HMO	Rochester	\$39.73	\$79.46	\$75.49	\$99.33	\$103.29	\$111.24
HMOCOC 25/40L-3	Large	HMO	Rochester	\$40.55	\$81.10	\$77.05	\$101.37	\$105.43	\$113.54
HMOCOC 25L-2 CA	Large	HMO	Rochester	\$42.66	\$85.32	\$81.05	\$106.65	\$110.92	\$119.45
HMOCOC 30/50L-2 CA	Large	HMO	Rochester	\$37.91	\$75.82	\$72.03	\$94.77	\$98.56	\$106.15

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Plan Name	Group Size	Plan Type	Rate Region	Third Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 2/20L	Large	HMO	Central I	\$59.64	\$119.28	\$113.32	\$149.10	\$155.06	\$166.99
HMOCOC 10L	Large	HMO	Central I	\$59.64	\$119.28	\$113.31	\$149.10	\$155.07	\$166.99
HMOCOC 10+L	Large	HMO	Central I	\$60.30	\$120.60	\$114.57	\$150.75	\$156.78	\$168.84
HMOCOC 15L	Large	HMO	Central I	\$58.92	\$117.84	\$111.95	\$147.30	\$153.20	\$164.98
HMOCOC 15+L	Large	HMO	Central I	\$59.57	\$119.14	\$113.18	\$148.92	\$154.88	\$166.79
HMOCOC 20L	Large	HMO	Central I	\$57.72	\$115.44	\$109.67	\$144.30	\$150.08	\$161.62
HMOCOC 20+L	Large	HMO	Central I	\$58.90	\$117.80	\$111.91	\$147.25	\$153.14	\$164.92
HMOCOC 25L	Large	HMO	Central I	\$56.97	\$113.94	\$108.24	\$142.42	\$148.13	\$159.52
HMOCOC 25/40L	Large	HMO	Central I	\$53.37	\$106.74	\$101.40	\$133.42	\$138.76	\$149.44
HMOCOC 30/50L	Large	HMO	Central I	\$50.89	\$101.78	\$96.69	\$127.22	\$132.31	\$142.49
HMOCOCBasixL	Large	HMO	Central I	\$52.80	\$105.60	\$100.32	\$132.00	\$137.28	\$147.84
HMOCOC 25/40L-3	Large	HMO	Central I	\$53.89	\$107.78	\$102.39	\$134.72	\$140.12	\$150.89
HMOCOC 25L-2 CA	Large	HMO	Central I	\$56.71	\$113.42	\$107.75	\$141.77	\$147.45	\$158.78
HMOCOC 30/50L-2 CA	Large	HMO	Central I	\$50.38	\$100.76	\$95.72	\$125.95	\$130.98	\$141.06
HMOCOC 2/20L	Large	HMO	Central II	\$57.85	\$115.70	\$109.92	\$144.63	\$150.41	\$161.98
HMOCOC 10L	Large	HMO	Central II	\$57.86	\$115.72	\$109.94	\$144.65	\$150.43	\$162.01
HMOCOC 10+L	Large	HMO	Central II	\$58.52	\$117.04	\$111.18	\$146.30	\$152.16	\$163.86
HMOCOC 15L	Large	HMO	Central II	\$57.17	\$114.34	\$108.62	\$142.92	\$148.64	\$160.08
HMOCOC 15+L	Large	HMO	Central II	\$57.79	\$115.58	\$109.80	\$144.48	\$150.25	\$161.82
HMOCOC 20L	Large	HMO	Central II	\$56.01	\$112.02	\$106.42	\$140.03	\$145.62	\$156.83
HMOCOC 20+L	Large	HMO	Central II	\$57.14	\$114.28	\$108.57	\$142.85	\$148.56	\$159.99
HMOCOC 25L	Large	HMO	Central II	\$55.28	\$110.56	\$105.03	\$138.20	\$143.73	\$154.79
HMOCOC 25/40L	Large	HMO	Central II	\$51.78	\$103.56	\$98.38	\$129.45	\$134.63	\$144.98
HMOCOC 30/50L	Large	HMO	Central II	\$49.38	\$98.76	\$93.82	\$123.45	\$128.39	\$138.27
HMOCOCBasixL	Large	HMO	Central II	\$51.23	\$102.46	\$97.34	\$128.08	\$133.20	\$143.44
HMOCOC 25/40L-3	Large	HMO	Central II	\$52.28	\$104.56	\$99.33	\$130.70	\$135.93	\$146.38
HMOCOC 25L-2 CA	Large	HMO	Central II	\$55.01	\$110.02	\$104.52	\$137.52	\$143.03	\$154.02
HMOCOC 30/50L-2 CA	Large	HMO	Central II	\$48.88	\$97.76	\$92.87	\$122.20	\$127.09	\$136.87
HMOCOC 2/20L	Large	HMO	Central III	\$62.60	\$125.20	\$118.94	\$156.50	\$162.76	\$175.28
HMOCOC 10L	Large	HMO	Central III	\$62.61	\$125.22	\$118.96	\$156.52	\$162.79	\$175.31
HMOCOC 10+L	Large	HMO	Central III	\$63.30	\$126.60	\$120.27	\$158.25	\$164.58	\$177.24
HMOCOC 15L	Large	HMO	Central III	\$61.86	\$123.72	\$117.54	\$154.65	\$160.84	\$173.21
HMOCOC 15+L	Large	HMO	Central III	\$62.54	\$125.08	\$118.82	\$156.35	\$162.60	\$175.12
HMOCOC 20L	Large	HMO	Central III	\$60.61	\$121.22	\$115.16	\$151.53	\$157.59	\$169.71
HMOCOC 20+L	Large	HMO	Central III	\$61.81	\$123.62	\$117.44	\$154.52	\$160.70	\$173.07
HMOCOC 25L	Large	HMO	Central III	\$59.81	\$119.62	\$113.64	\$149.53	\$155.51	\$167.46
HMOCOC 25/40L	Large	HMO	Central III	\$56.02	\$112.04	\$106.44	\$140.05	\$145.65	\$156.86
HMOCOC 30/50L	Large	HMO	Central III	\$53.42	\$106.84	\$101.50	\$133.55	\$138.89	\$149.57
HMOCOCBasixL	Large	HMO	Central III	\$55.42	\$110.84	\$105.30	\$138.55	\$144.10	\$155.18
HMOCOC 25/40L-3	Large	HMO	Central III	\$56.56	\$113.12	\$107.47	\$141.40	\$147.06	\$158.36
HMOCOC 25L-2 CA	Large	HMO	Central III	\$59.53	\$119.06	\$113.11	\$148.83	\$154.77	\$166.68
HMOCOC 30/50L-2 CA	Large	HMO	Central III	\$52.89	\$105.78	\$100.49	\$132.22	\$137.51	\$148.09
HMOCOC 2/20L	Large	HMO	East I	\$55.32	\$110.64	\$105.11	\$138.30	\$143.84	\$154.90
HMOCOC 10L	Large	HMO	East I	\$55.33	\$110.66	\$105.12	\$138.32	\$143.86	\$154.93
HMOCOC 10+L	Large	HMO	East I	\$55.94	\$111.88	\$106.29	\$139.85	\$145.44	\$156.63
HMOCOC 15L	Large	HMO	East I	\$54.65	\$109.30	\$103.84	\$136.63	\$142.09	\$153.02
HMOCOC 15+L	Large	HMO	East I	\$55.26	\$110.52	\$104.99	\$138.15	\$143.67	\$154.73
HMOCOC 20L	Large	HMO	East I	\$53.56	\$107.12	\$101.76	\$133.90	\$139.26	\$149.97
HMOCOC 20+L	Large	HMO	East I	\$54.63	\$109.26	\$103.80	\$136.58	\$142.03	\$152.96
HMOCOC 25L	Large	HMO	East I	\$52.85	\$105.70	\$100.42	\$132.12	\$137.41	\$147.98
HMOCOC 25/40L	Large	HMO	East I	\$49.50	\$99.00	\$94.05	\$123.75	\$128.70	\$138.60
HMOCOC 30/50L	Large	HMO	East I	\$47.21	\$94.42	\$89.70	\$118.02	\$122.74	\$132.19
HMOCOCBasixL	Large	HMO	East I	\$48.98	\$97.96	\$93.06	\$122.45	\$127.35	\$137.14
HMOCOC 25/40L-3	Large	HMO	East I	\$49.99	\$99.98	\$94.98	\$124.97	\$129.98	\$139.97
HMOCOC 25L-2 CA	Large	HMO	East I	\$52.60	\$105.20	\$99.94	\$131.50	\$136.76	\$147.28
HMOCOC 30/50L-2 CA	Large	HMO	East I	\$46.73	\$93.46	\$88.79	\$116.82	\$121.50	\$130.84
HMOCOC 2/20L	Large	HMO	East II	\$59.22	\$118.44	\$112.52	\$148.05	\$153.97	\$165.82

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Plan Name	Group Size	Plan Type	Rate Region	Third Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	East II	\$59.24	\$118.48	\$112.55	\$148.10	\$154.03	\$165.87
HMOCOC 10+L	Large	HMO	East II	\$59.90	\$119.80	\$113.81	\$149.75	\$155.74	\$167.72
HMOCOC 15L	Large	HMO	East II	\$58.53	\$117.06	\$111.21	\$146.33	\$152.18	\$163.88
HMOCOC 15+L	Large	HMO	East II	\$59.17	\$118.34	\$112.42	\$147.92	\$153.85	\$165.68
HMOCOC 20L	Large	HMO	East II	\$57.35	\$114.70	\$108.97	\$143.37	\$149.11	\$160.58
HMOCOC 20+L	Large	HMO	East II	\$58.52	\$117.04	\$111.19	\$146.30	\$152.16	\$163.86
HMOCOC 25L	Large	HMO	East II	\$56.60	\$113.20	\$107.54	\$141.50	\$147.16	\$158.48
HMOCOC 25/40L	Large	HMO	East II	\$53.02	\$106.04	\$100.73	\$132.55	\$137.86	\$148.46
HMOCOC 30/50L	Large	HMO	East II	\$50.56	\$101.12	\$96.07	\$126.40	\$131.46	\$141.56
HMOCOCBasixL	Large	HMO	East II	\$52.44	\$104.88	\$99.64	\$131.10	\$136.34	\$146.83
HMOCOC 25/40L-3	Large	HMO	East II	\$53.52	\$107.04	\$101.69	\$133.80	\$139.15	\$149.85
HMOCOC 25L-2 CA	Large	HMO	East II	\$56.33	\$112.66	\$107.02	\$140.83	\$146.46	\$157.73
HMOCOC 30/50L-2 CA	Large	HMO	East II	\$50.05	\$100.10	\$95.10	\$125.13	\$130.13	\$140.14
HMOCOC 2/20L	Large	HMO	Mid-Hudson East	\$63.22	\$126.44	\$120.12	\$158.05	\$164.37	\$177.02
HMOCOC 10L	Large	HMO	Mid-Hudson East	\$63.23	\$126.46	\$120.14	\$158.08	\$164.40	\$177.04
HMOCOC 10+L	Large	HMO	Mid-Hudson East	\$63.92	\$127.84	\$121.45	\$159.80	\$166.19	\$178.98
HMOCOC 15L	Large	HMO	Mid-Hudson East	\$62.47	\$124.94	\$118.69	\$156.17	\$162.42	\$174.92
HMOCOC 15+L	Large	HMO	Mid-Hudson East	\$63.14	\$126.28	\$119.96	\$157.85	\$164.16	\$176.79
HMOCOC 20L	Large	HMO	Mid-Hudson East	\$61.21	\$122.42	\$116.30	\$153.03	\$159.15	\$171.38
HMOCOC 20+L	Large	HMO	Mid-Hudson East	\$62.43	\$124.86	\$118.62	\$156.07	\$162.31	\$174.80
HMOCOC 25L	Large	HMO	Mid-Hudson East	\$60.40	\$120.80	\$114.76	\$151.00	\$157.04	\$169.12
HMOCOC 25/40L	Large	HMO	Mid-Hudson East	\$56.58	\$113.16	\$107.50	\$141.45	\$147.11	\$158.42
HMOCOC 30/50L	Large	HMO	Mid-Hudson East	\$53.94	\$107.88	\$102.48	\$134.85	\$140.24	\$151.03
HMOCOCBasixL	Large	HMO	Mid-Hudson East	\$55.96	\$111.92	\$106.32	\$139.90	\$145.50	\$156.69
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson East	\$57.12	\$114.24	\$108.53	\$142.80	\$148.52	\$159.94
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson East	\$60.11	\$120.22	\$114.21	\$150.28	\$156.28	\$168.31
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson East	\$53.40	\$106.80	\$101.46	\$133.50	\$138.84	\$149.52
HMOCOC 2/20L	Large	HMO	Mid-Hudson West	\$58.97	\$117.94	\$112.05	\$147.43	\$153.32	\$165.11
HMOCOC 10L	Large	HMO	Mid-Hudson West	\$58.98	\$117.96	\$112.06	\$147.45	\$153.35	\$165.15
HMOCOC 10+L	Large	HMO	Mid-Hudson West	\$59.65	\$119.30	\$113.34	\$149.13	\$155.09	\$167.02
HMOCOC 15L	Large	HMO	Mid-Hudson West	\$58.28	\$116.56	\$110.73	\$145.70	\$151.53	\$163.18
HMOCOC 15+L	Large	HMO	Mid-Hudson West	\$58.92	\$117.84	\$111.95	\$147.30	\$153.19	\$164.98
HMOCOC 20L	Large	HMO	Mid-Hudson West	\$57.10	\$114.20	\$108.49	\$142.75	\$148.46	\$159.88
HMOCOC 20+L	Large	HMO	Mid-Hudson West	\$58.27	\$116.54	\$110.72	\$145.68	\$151.50	\$163.16
HMOCOC 25L	Large	HMO	Mid-Hudson West	\$56.36	\$112.72	\$107.08	\$140.90	\$146.53	\$157.81
HMOCOC 25/40L	Large	HMO	Mid-Hudson West	\$52.80	\$105.60	\$100.32	\$132.00	\$137.28	\$147.84
HMOCOC 30/50L	Large	HMO	Mid-Hudson West	\$50.34	\$100.68	\$95.65	\$125.85	\$130.88	\$140.95
HMOCOCBasixL	Large	HMO	Mid-Hudson West	\$52.23	\$104.46	\$99.24	\$130.58	\$135.80	\$146.24
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson West	\$53.30	\$106.60	\$101.27	\$133.25	\$138.58	\$149.24
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson West	\$56.09	\$112.18	\$106.57	\$140.23	\$145.84	\$157.05
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson West	\$49.82	\$99.64	\$94.65	\$124.55	\$129.53	\$139.50
HMOCOC 2/20L	Large	HMO	NY Metro	\$137.75	\$275.50	\$261.73	\$344.38	\$358.15	\$385.70
HMOCOC 10L	Large	HMO	NY Metro	\$137.78	\$275.56	\$261.78	\$344.45	\$358.23	\$385.79
HMOCOC 10+L	Large	HMO	NY Metro	\$139.32	\$278.64	\$264.71	\$348.30	\$362.23	\$390.09
HMOCOC 15L	Large	HMO	NY Metro	\$136.11	\$272.22	\$258.61	\$340.28	\$353.88	\$381.11
HMOCOC 15+L	Large	HMO	NY Metro	\$137.62	\$275.24	\$261.48	\$344.05	\$357.81	\$385.33
HMOCOC 20L	Large	HMO	NY Metro	\$133.37	\$266.74	\$253.40	\$333.43	\$346.76	\$373.43
HMOCOC 20+L	Large	HMO	NY Metro	\$136.07	\$272.14	\$258.53	\$340.17	\$353.78	\$381.00
HMOCOC 25L	Large	HMO	NY Metro	\$131.63	\$263.26	\$250.10	\$329.08	\$342.24	\$368.56
HMOCOC 25/40L	Large	HMO	NY Metro	\$123.30	\$246.60	\$234.27	\$308.25	\$320.58	\$345.24
HMOCOC 30/50L	Large	HMO	NY Metro	\$117.55	\$235.10	\$223.35	\$293.87	\$305.63	\$329.14
HMOCOCBasixL	Large	HMO	NY Metro	\$121.97	\$243.94	\$231.74	\$304.92	\$317.12	\$341.52
HMOCOC 25/40L-3	Large	HMO	NY Metro	\$124.49	\$248.98	\$236.53	\$311.22	\$323.67	\$348.57
HMOCOC 25L-2 CA	Large	HMO	NY Metro	\$131.01	\$262.02	\$248.92	\$327.53	\$340.63	\$366.83
HMOCOC 30/50L-2 CA	Large	HMO	NY Metro	\$116.37	\$232.74	\$221.11	\$290.93	\$302.56	\$325.84
HMOCOC 2/20L	Large	HMO	North Country	\$64.28	\$128.56	\$122.13	\$160.70	\$167.13	\$179.98
HMOCOC 10L	Large	HMO	North Country	\$64.30	\$128.60	\$122.17	\$160.75	\$167.18	\$180.04

MVP Health Plan, Inc.

Article 44

Jan 1, 2015

Change in Dollars

Exhibit

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Plan Name	Group Size	Plan Type	Rate Region	Third Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10+L	Large	HMO	North Country	\$65.01	\$130.02	\$123.52	\$162.52	\$169.03	\$182.03
HMOCOC 15L	Large	HMO	North Country	\$63.51	\$127.02	\$120.67	\$158.77	\$165.13	\$177.82
HMOCOC 15+L	Large	HMO	North Country	\$64.22	\$128.44	\$122.02	\$160.55	\$166.97	\$179.82
HMOCOC 20L	Large	HMO	North Country	\$62.24	\$124.48	\$118.25	\$155.60	\$161.83	\$174.27
HMOCOC 20+L	Large	HMO	North Country	\$63.49	\$126.98	\$120.63	\$158.72	\$165.07	\$177.78
HMOCOC 25L	Large	HMO	North Country	\$61.42	\$122.84	\$116.70	\$153.55	\$159.69	\$171.97
HMOCOC 25/40L	Large	HMO	North Country	\$57.53	\$115.06	\$109.30	\$143.82	\$149.58	\$161.09
HMOCOC 30/50L	Large	HMO	North Country	\$54.87	\$109.74	\$104.25	\$137.17	\$142.66	\$153.64
HMOCOCBasixL	Large	HMO	North Country	\$56.92	\$113.84	\$108.15	\$142.30	\$147.99	\$159.38
HMOCOC 25/40L-3	Large	HMO	North Country	\$58.09	\$116.18	\$110.37	\$145.23	\$151.03	\$162.65
HMOCOC 25L-2 CA	Large	HMO	North Country	\$61.12	\$122.24	\$116.13	\$152.80	\$158.91	\$171.13
HMOCOC 30/50L-2 CA	Large	HMO	North Country	\$54.31	\$108.62	\$103.19	\$135.77	\$141.20	\$152.07
HMOCOC 2/20L	Large	HMO	Rochester	\$46.91	\$93.82	\$89.13	\$117.28	\$121.96	\$131.35
HMOCOC 10L	Large	HMO	Rochester	\$46.92	\$93.84	\$89.15	\$117.30	\$121.99	\$131.38
HMOCOC 10+L	Large	HMO	Rochester	\$47.45	\$94.90	\$90.15	\$118.62	\$123.37	\$132.86
HMOCOC 15L	Large	HMO	Rochester	\$46.36	\$92.72	\$88.09	\$115.90	\$120.54	\$129.80
HMOCOC 15+L	Large	HMO	Rochester	\$46.87	\$93.74	\$89.05	\$117.17	\$121.86	\$131.23
HMOCOC 20L	Large	HMO	Rochester	\$45.42	\$90.84	\$86.30	\$113.55	\$118.09	\$127.17
HMOCOC 20+L	Large	HMO	Rochester	\$46.35	\$92.70	\$88.07	\$115.87	\$120.51	\$129.78
HMOCOC 25L	Large	HMO	Rochester	\$44.84	\$89.68	\$85.19	\$112.10	\$116.59	\$125.55
HMOCOC 25/40L	Large	HMO	Rochester	\$42.01	\$84.02	\$79.81	\$105.02	\$109.23	\$117.63
HMOCOC 30/50L	Large	HMO	Rochester	\$40.06	\$80.12	\$76.12	\$100.15	\$104.16	\$112.17
HMOCOCBasixL	Large	HMO	Rochester	\$41.55	\$83.10	\$78.95	\$103.88	\$108.03	\$116.34
HMOCOC 25/40L-3	Large	HMO	Rochester	\$42.40	\$84.80	\$80.56	\$106.00	\$110.24	\$118.72
HMOCOC 25L-2 CA	Large	HMO	Rochester	\$44.61	\$89.22	\$84.76	\$111.53	\$115.98	\$124.91
HMOCOC 30/50L-2 CA	Large	HMO	Rochester	\$39.65	\$79.30	\$75.34	\$99.13	\$103.09	\$111.02

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Plan Name	Group Size	Plan Type	Rate Region	Fourth Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 2/20L	Large	HMO	Central I	\$62.31	\$124.62	\$118.39	\$155.78	\$162.01	\$174.46
HMOCOC 10L	Large	HMO	Central I	\$62.31	\$124.62	\$118.38	\$155.77	\$162.01	\$174.47
HMOCOC 10+L	Large	HMO	Central I	\$63.00	\$126.00	\$119.70	\$157.50	\$163.80	\$176.40
HMOCOC 15L	Large	HMO	Central I	\$61.56	\$123.12	\$116.96	\$153.90	\$160.06	\$172.36
HMOCOC 15+L	Large	HMO	Central I	\$62.24	\$124.48	\$118.26	\$155.60	\$161.82	\$174.27
HMOCOC 20L	Large	HMO	Central I	\$60.31	\$120.62	\$114.59	\$150.77	\$156.81	\$168.86
HMOCOC 20+L	Large	HMO	Central I	\$61.54	\$123.08	\$116.93	\$153.85	\$160.00	\$172.32
HMOCOC 25L	Large	HMO	Central I	\$59.53	\$119.06	\$113.11	\$148.83	\$154.78	\$166.69
HMOCOC 25/40L	Large	HMO	Central I	\$55.77	\$111.54	\$105.96	\$139.42	\$145.00	\$156.15
HMOCOC 30/50L	Large	HMO	Central I	\$53.17	\$106.34	\$101.03	\$132.93	\$138.24	\$148.88
HMOCOCBasixL	Large	HMO	Central I	\$55.16	\$110.32	\$104.80	\$137.90	\$143.42	\$154.45
HMOCOC 25/40L-3	Large	HMO	Central I	\$56.30	\$112.60	\$106.97	\$140.75	\$146.38	\$157.64
HMOCOC 25L-2 CA	Large	HMO	Central I	\$59.25	\$118.50	\$112.57	\$148.12	\$154.05	\$165.90
HMOCOC 30/50L-2 CA	Large	HMO	Central I	\$52.63	\$105.26	\$100.00	\$131.58	\$136.84	\$147.36
HMOCOC 2/20L	Large	HMO	Central II	\$60.44	\$120.88	\$114.84	\$151.10	\$157.14	\$169.23
HMOCOC 10L	Large	HMO	Central II	\$60.45	\$120.90	\$114.86	\$151.13	\$157.17	\$169.26
HMOCOC 10+L	Large	HMO	Central II	\$61.14	\$122.28	\$116.16	\$152.85	\$158.97	\$171.19
HMOCOC 15L	Large	HMO	Central II	\$59.73	\$119.46	\$113.49	\$149.32	\$155.30	\$167.24
HMOCOC 15+L	Large	HMO	Central II	\$60.38	\$120.76	\$114.73	\$150.95	\$156.99	\$169.06
HMOCOC 20L	Large	HMO	Central II	\$58.52	\$117.04	\$111.19	\$146.30	\$152.15	\$163.85
HMOCOC 20+L	Large	HMO	Central II	\$59.70	\$119.40	\$113.43	\$149.25	\$155.22	\$167.16
HMOCOC 25L	Large	HMO	Central II	\$57.76	\$115.52	\$109.74	\$144.40	\$150.18	\$161.72
HMOCOC 25/40L	Large	HMO	Central II	\$54.10	\$108.20	\$102.79	\$135.25	\$140.66	\$151.48
HMOCOC 30/50L	Large	HMO	Central II	\$51.59	\$103.18	\$98.02	\$128.97	\$134.13	\$144.46
HMOCOCBasixL	Large	HMO	Central II	\$53.52	\$107.04	\$101.69	\$133.80	\$139.15	\$149.86
HMOCOC 25/40L-3	Large	HMO	Central II	\$54.63	\$109.26	\$103.79	\$136.57	\$142.04	\$152.96
HMOCOC 25L-2 CA	Large	HMO	Central II	\$57.48	\$114.96	\$109.21	\$143.70	\$149.45	\$160.95
HMOCOC 30/50L-2 CA	Large	HMO	Central II	\$51.07	\$102.14	\$97.03	\$127.68	\$132.78	\$142.99
HMOCOC 2/20L	Large	HMO	Central III	\$65.41	\$130.82	\$124.28	\$163.52	\$170.06	\$183.15
HMOCOC 10L	Large	HMO	Central III	\$65.41	\$130.82	\$124.28	\$163.53	\$170.06	\$183.15
HMOCOC 10+L	Large	HMO	Central III	\$66.13	\$132.26	\$125.64	\$165.32	\$171.94	\$185.16
HMOCOC 15L	Large	HMO	Central III	\$64.63	\$129.26	\$122.80	\$161.57	\$168.04	\$180.96
HMOCOC 15+L	Large	HMO	Central III	\$65.34	\$130.68	\$124.15	\$163.35	\$169.89	\$182.95
HMOCOC 20L	Large	HMO	Central III	\$63.32	\$126.64	\$120.31	\$158.30	\$164.63	\$177.30
HMOCOC 20+L	Large	HMO	Central III	\$64.58	\$129.16	\$122.70	\$161.45	\$167.91	\$180.82
HMOCOC 25L	Large	HMO	Central III	\$62.49	\$124.98	\$118.73	\$156.22	\$162.47	\$174.97
HMOCOC 25/40L	Large	HMO	Central III	\$58.53	\$117.06	\$111.21	\$146.33	\$152.17	\$163.88
HMOCOC 30/50L	Large	HMO	Central III	\$55.81	\$111.62	\$106.04	\$139.52	\$145.11	\$156.27
HMOCOCBasixL	Large	HMO	Central III	\$57.90	\$115.80	\$110.01	\$144.75	\$150.54	\$162.12
HMOCOC 25/40L-3	Large	HMO	Central III	\$59.10	\$118.20	\$112.29	\$147.75	\$153.66	\$165.48
HMOCOC 25L-2 CA	Large	HMO	Central III	\$62.19	\$124.38	\$118.17	\$155.48	\$161.69	\$174.13
HMOCOC 30/50L-2 CA	Large	HMO	Central III	\$55.26	\$110.52	\$105.00	\$138.15	\$143.67	\$154.73
HMOCOC 2/20L	Large	HMO	East I	\$57.79	\$115.58	\$109.80	\$144.47	\$150.26	\$161.81
HMOCOC 10L	Large	HMO	East I	\$57.81	\$115.62	\$109.84	\$144.52	\$150.30	\$161.87
HMOCOC 10+L	Large	HMO	East I	\$58.45	\$116.90	\$111.06	\$146.13	\$151.97	\$163.66
HMOCOC 15L	Large	HMO	East I	\$57.10	\$114.20	\$108.49	\$142.75	\$148.46	\$159.88
HMOCOC 15+L	Large	HMO	East I	\$57.73	\$115.46	\$109.69	\$144.33	\$150.10	\$161.64
HMOCOC 20L	Large	HMO	East I	\$55.96	\$111.92	\$106.32	\$139.90	\$145.49	\$156.69
HMOCOC 20+L	Large	HMO	East I	\$57.08	\$114.16	\$108.46	\$142.70	\$148.41	\$159.82
HMOCOC 25L	Large	HMO	East I	\$55.22	\$110.44	\$104.92	\$138.05	\$143.58	\$154.62
HMOCOC 25/40L	Large	HMO	East I	\$51.72	\$103.44	\$98.26	\$129.30	\$134.47	\$144.82
HMOCOC 30/50L	Large	HMO	East I	\$49.32	\$98.64	\$93.70	\$123.30	\$128.24	\$138.10
HMOCOCBasixL	Large	HMO	East I	\$51.17	\$102.34	\$97.22	\$127.92	\$133.05	\$143.28
HMOCOC 25/40L-3	Large	HMO	East I	\$52.23	\$104.46	\$99.23	\$130.57	\$135.80	\$146.24
HMOCOC 25L-2 CA	Large	HMO	East I	\$54.96	\$109.92	\$104.42	\$137.40	\$142.89	\$153.89
HMOCOC 30/50L-2 CA	Large	HMO	East I	\$48.83	\$97.66	\$92.77	\$122.08	\$126.96	\$136.73
HMOCOC 2/20L	Large	HMO	East II	\$61.88	\$123.76	\$117.57	\$154.70	\$160.89	\$173.27

MVP Health Plan, Inc.

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Plan Name	Group Size	Plan Type	Rate Region	Fourth Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	East II	\$61.90	\$123.80	\$117.61	\$154.75	\$160.94	\$173.32
HMOCOC 10+L	Large	HMO	East II	\$62.59	\$125.18	\$118.92	\$156.47	\$162.74	\$175.25
HMOCOC 15L	Large	HMO	East II	\$61.15	\$122.30	\$116.19	\$152.88	\$158.99	\$171.22
HMOCOC 15+L	Large	HMO	East II	\$61.82	\$123.64	\$117.45	\$154.55	\$160.73	\$173.10
HMOCOC 20L	Large	HMO	East II	\$59.92	\$119.84	\$113.85	\$149.80	\$155.79	\$167.78
HMOCOC 20+L	Large	HMO	East II	\$61.14	\$122.28	\$116.17	\$152.85	\$158.97	\$171.19
HMOCOC 25L	Large	HMO	East II	\$59.14	\$118.28	\$112.37	\$147.85	\$153.77	\$165.59
HMOCOC 25/40L	Large	HMO	East II	\$55.40	\$110.80	\$105.26	\$138.50	\$144.04	\$155.12
HMOCOC 30/50L	Large	HMO	East II	\$52.82	\$105.64	\$100.36	\$132.05	\$137.33	\$147.90
HMOCOCBasixL	Large	HMO	East II	\$54.79	\$109.58	\$104.10	\$136.97	\$142.45	\$153.41
HMOCOC 25/40L-3	Large	HMO	East II	\$55.92	\$111.84	\$106.25	\$139.80	\$145.39	\$156.58
HMOCOC 25L-2 CA	Large	HMO	East II	\$58.85	\$117.70	\$111.82	\$147.13	\$153.01	\$164.78
HMOCOC 30/50L-2 CA	Large	HMO	East II	\$52.29	\$104.58	\$99.35	\$130.72	\$135.95	\$146.41
HMOCOC 2/20L	Large	HMO	Mid-Hudson East	\$66.05	\$132.10	\$125.49	\$165.13	\$171.73	\$184.94
HMOCOC 10L	Large	HMO	Mid-Hudson East	\$66.06	\$132.12	\$125.52	\$165.15	\$171.75	\$184.97
HMOCOC 10+L	Large	HMO	Mid-Hudson East	\$66.79	\$133.58	\$126.90	\$166.98	\$173.66	\$187.01
HMOCOC 15L	Large	HMO	Mid-Hudson East	\$65.27	\$130.54	\$124.01	\$163.18	\$169.70	\$182.76
HMOCOC 15+L	Large	HMO	Mid-Hudson East	\$65.97	\$131.94	\$125.35	\$164.93	\$171.52	\$184.72
HMOCOC 20L	Large	HMO	Mid-Hudson East	\$63.95	\$127.90	\$121.50	\$159.88	\$166.27	\$179.06
HMOCOC 20+L	Large	HMO	Mid-Hudson East	\$65.23	\$130.46	\$123.93	\$163.07	\$169.60	\$182.64
HMOCOC 25L	Large	HMO	Mid-Hudson East	\$63.11	\$126.22	\$119.91	\$157.77	\$164.09	\$176.71
HMOCOC 25/40L	Large	HMO	Mid-Hudson East	\$59.11	\$118.22	\$112.30	\$147.77	\$153.69	\$165.51
HMOCOC 30/50L	Large	HMO	Mid-Hudson East	\$56.36	\$112.72	\$107.09	\$140.90	\$146.53	\$157.81
HMOCOCBasixL	Large	HMO	Mid-Hudson East	\$58.47	\$116.94	\$111.10	\$146.17	\$152.02	\$163.71
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson East	\$59.68	\$119.36	\$113.39	\$149.20	\$155.17	\$167.10
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson East	\$62.80	\$125.60	\$119.32	\$157.00	\$163.28	\$175.84
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson East	\$55.79	\$111.58	\$106.00	\$139.47	\$145.06	\$156.21
HMOCOC 2/20L	Large	HMO	Mid-Hudson West	\$61.62	\$123.24	\$117.08	\$154.05	\$160.22	\$172.54
HMOCOC 10L	Large	HMO	Mid-Hudson West	\$61.63	\$123.26	\$117.10	\$154.08	\$160.24	\$172.56
HMOCOC 10+L	Large	HMO	Mid-Hudson West	\$62.33	\$124.66	\$118.43	\$155.82	\$162.05	\$174.52
HMOCOC 15L	Large	HMO	Mid-Hudson West	\$60.89	\$121.78	\$115.69	\$152.22	\$158.32	\$170.49
HMOCOC 15+L	Large	HMO	Mid-Hudson West	\$61.56	\$123.12	\$116.96	\$153.90	\$160.05	\$172.37
HMOCOC 20L	Large	HMO	Mid-Hudson West	\$59.66	\$119.32	\$113.35	\$149.15	\$155.12	\$167.05
HMOCOC 20+L	Large	HMO	Mid-Hudson West	\$60.88	\$121.76	\$115.67	\$152.20	\$158.29	\$170.47
HMOCOC 25L	Large	HMO	Mid-Hudson West	\$58.89	\$117.78	\$111.89	\$147.22	\$153.11	\$164.89
HMOCOC 25/40L	Large	HMO	Mid-Hudson West	\$55.16	\$110.32	\$104.81	\$137.90	\$143.42	\$154.45
HMOCOC 30/50L	Large	HMO	Mid-Hudson West	\$52.60	\$105.20	\$99.94	\$131.50	\$136.76	\$147.28
HMOCOCBasixL	Large	HMO	Mid-Hudson West	\$54.57	\$109.14	\$103.68	\$136.42	\$141.88	\$152.80
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson West	\$55.68	\$111.36	\$105.79	\$139.20	\$144.77	\$155.90
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson West	\$58.60	\$117.20	\$111.34	\$146.50	\$152.36	\$164.08
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson West	\$52.05	\$104.10	\$98.90	\$130.12	\$135.33	\$145.74
HMOCOC 2/20L	Large	HMO	NY Metro	\$141.72	\$283.44	\$269.27	\$354.30	\$368.48	\$396.82
HMOCOC 10L	Large	HMO	NY Metro	\$141.75	\$283.50	\$269.32	\$354.38	\$368.55	\$396.90
HMOCOC 10+L	Large	HMO	NY Metro	\$143.33	\$286.66	\$272.33	\$358.32	\$372.66	\$401.32
HMOCOC 15L	Large	HMO	NY Metro	\$140.03	\$280.06	\$266.06	\$350.08	\$364.08	\$392.08
HMOCOC 15+L	Large	HMO	NY Metro	\$141.59	\$283.18	\$269.03	\$353.98	\$368.13	\$396.45
HMOCOC 20L	Large	HMO	NY Metro	\$137.21	\$274.42	\$260.70	\$343.02	\$356.75	\$384.19
HMOCOC 20+L	Large	HMO	NY Metro	\$139.99	\$279.98	\$265.98	\$349.97	\$363.97	\$391.97
HMOCOC 25L	Large	HMO	NY Metro	\$135.42	\$270.84	\$257.30	\$338.55	\$352.10	\$379.18
HMOCOC 25/40L	Large	HMO	NY Metro	\$126.85	\$253.70	\$241.02	\$317.12	\$329.81	\$355.18
HMOCOC 30/50L	Large	HMO	NY Metro	\$120.94	\$241.88	\$229.79	\$302.35	\$314.44	\$338.63
HMOCOCBasixL	Large	HMO	NY Metro	\$125.48	\$250.96	\$238.42	\$313.70	\$326.25	\$351.34
HMOCOC 25/40L-3	Large	HMO	NY Metro	\$128.07	\$256.14	\$243.33	\$320.17	\$332.99	\$358.60
HMOCOC 25L-2 CA	Large	HMO	NY Metro	\$134.78	\$269.56	\$256.08	\$336.95	\$350.43	\$377.39
HMOCOC 30/50L-2 CA	Large	HMO	NY Metro	\$119.72	\$239.44	\$227.47	\$299.30	\$311.27	\$335.21
HMOCOC 2/20L	Large	HMO	North Country	\$67.17	\$134.34	\$127.63	\$167.93	\$174.64	\$188.08
HMOCOC 10L	Large	HMO	North Country	\$67.18	\$134.36	\$127.64	\$167.95	\$174.67	\$188.11

MVP Health Plan, Inc.

Article 44

Jan 1, 2015

Change in Dollars

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Plan Name	Group Size	Plan Type	Rate Region	Fourth Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10+L	Large	HMO	North Country	\$67.93	\$135.86	\$129.06	\$169.83	\$176.62	\$190.21
HMOCOC 15L	Large	HMO	North Country	\$66.36	\$132.72	\$126.08	\$165.90	\$172.54	\$185.81
HMOCOC 15+L	Large	HMO	North Country	\$67.09	\$134.18	\$127.48	\$167.73	\$174.43	\$187.85
HMOCOC 20L	Large	HMO	North Country	\$65.03	\$130.06	\$123.56	\$162.58	\$169.07	\$182.08
HMOCOC 20+L	Large	HMO	North Country	\$66.34	\$132.68	\$126.05	\$165.85	\$172.48	\$185.75
HMOCOC 25L	Large	HMO	North Country	\$64.18	\$128.36	\$121.94	\$160.45	\$166.87	\$179.71
HMOCOC 25/40L	Large	HMO	North Country	\$60.11	\$120.22	\$114.21	\$150.27	\$156.29	\$168.31
HMOCOC 30/50L	Large	HMO	North Country	\$57.33	\$114.66	\$108.93	\$143.32	\$149.06	\$160.52
HMOCOCBasixL	Large	HMO	North Country	\$59.47	\$118.94	\$112.99	\$148.68	\$154.62	\$166.51
HMOCOC 25/40L-3	Large	HMO	North Country	\$60.69	\$121.38	\$115.31	\$151.72	\$157.79	\$169.94
HMOCOC 25L-2 CA	Large	HMO	North Country	\$63.86	\$127.72	\$121.33	\$159.65	\$166.04	\$178.81
HMOCOC 30/50L-2 CA	Large	HMO	North Country	\$56.74	\$113.48	\$107.81	\$141.85	\$147.53	\$158.87
HMOCOC 2/20L	Large	HMO	Rochester	\$49.02	\$98.04	\$93.14	\$122.55	\$127.45	\$137.25
HMOCOC 10L	Large	HMO	Rochester	\$49.02	\$98.04	\$93.14	\$122.55	\$127.45	\$137.26
HMOCOC 10+L	Large	HMO	Rochester	\$49.57	\$99.14	\$94.18	\$123.92	\$128.88	\$138.79
HMOCOC 15L	Large	HMO	Rochester	\$48.44	\$96.88	\$92.04	\$121.10	\$125.94	\$135.63
HMOCOC 15+L	Large	HMO	Rochester	\$48.97	\$97.94	\$93.04	\$122.43	\$127.32	\$137.12
HMOCOC 20L	Large	HMO	Rochester	\$47.45	\$94.90	\$90.16	\$118.63	\$123.37	\$132.86
HMOCOC 20+L	Large	HMO	Rochester	\$48.42	\$96.84	\$92.00	\$121.05	\$125.89	\$135.58
HMOCOC 25L	Large	HMO	Rochester	\$46.85	\$93.70	\$89.02	\$117.12	\$121.81	\$131.18
HMOCOC 25/40L	Large	HMO	Rochester	\$43.89	\$87.78	\$83.40	\$109.73	\$114.11	\$122.89
HMOCOC 30/50L	Large	HMO	Rochester	\$41.85	\$83.70	\$79.52	\$104.62	\$108.81	\$117.18
HMOCOCBasixL	Large	HMO	Rochester	\$43.42	\$86.84	\$82.50	\$108.55	\$112.89	\$121.57
HMOCOC 25/40L-3	Large	HMO	Rochester	\$44.30	\$88.60	\$84.17	\$110.75	\$115.18	\$124.04
HMOCOC 25L-2 CA	Large	HMO	Rochester	\$46.61	\$93.22	\$88.56	\$116.53	\$121.18	\$130.51
HMOCOC 30/50L-2 CA	Large	HMO	Rochester	\$41.42	\$82.84	\$78.70	\$103.55	\$107.69	\$115.98

MVP Health Plan, Inc.

Article 44

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Percent Change

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Plan Name	Group Size	Plan Type	Rate Region	Change Over Previous Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	Central I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 10+L	Large	HMO	Central I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 15L	Large	HMO	Central I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 15+L	Large	HMO	Central I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 20L	Large	HMO	Central I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 20+L	Large	HMO	Central I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25L	Large	HMO	Central I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25/40L	Large	HMO	Central I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 30/50L	Large	HMO	Central I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOCBasixL	Large	HMO	Central I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25/40L-3	Large	HMO	Central I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25L-2 CA	Large	HMO	Central I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 30/50L-2 CA	Large	HMO	Central I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 2/20L	Large	HMO	Central II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 10L	Large	HMO	Central II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 10+L	Large	HMO	Central II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 15L	Large	HMO	Central II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 15+L	Large	HMO	Central II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 20L	Large	HMO	Central II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 20+L	Large	HMO	Central II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25L	Large	HMO	Central II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25/40L	Large	HMO	Central II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 30/50L	Large	HMO	Central II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOCBasixL	Large	HMO	Central II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25/40L-3	Large	HMO	Central II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25L-2 CA	Large	HMO	Central II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 30/50L-2 CA	Large	HMO	Central II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 2/20L	Large	HMO	Central III	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 10L	Large	HMO	Central III	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 10+L	Large	HMO	Central III	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 15L	Large	HMO	Central III	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 15+L	Large	HMO	Central III	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 20L	Large	HMO	Central III	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 20+L	Large	HMO	Central III	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25L	Large	HMO	Central III	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25/40L	Large	HMO	Central III	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 30/50L	Large	HMO	Central III	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOCBasixL	Large	HMO	Central III	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25/40L-3	Large	HMO	Central III	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25L-2 CA	Large	HMO	Central III	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 30/50L-2 CA	Large	HMO	Central III	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 2/20L	Large	HMO	East I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 10L	Large	HMO	East I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 10+L	Large	HMO	East I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 15L	Large	HMO	East I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 15+L	Large	HMO	East I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 20L	Large	HMO	East I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 20+L	Large	HMO	East I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25L	Large	HMO	East I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25/40L	Large	HMO	East I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 30/50L	Large	HMO	East I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOCBasixL	Large	HMO	East I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25/40L-3	Large	HMO	East I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25L-2 CA	Large	HMO	East I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 30/50L-2 CA	Large	HMO	East I	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 2/20L	Large	HMO	East II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%

MVP Health Plan, Inc.

Article 44

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Percent Change

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Plan Name	Group Size	Plan Type	Rate Region	Change Over Previous Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	East II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 10+L	Large	HMO	East II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 15L	Large	HMO	East II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 15+L	Large	HMO	East II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 20L	Large	HMO	East II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 20+L	Large	HMO	East II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25L	Large	HMO	East II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25/40L	Large	HMO	East II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 30/50L	Large	HMO	East II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOCBasixL	Large	HMO	East II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25/40L-3	Large	HMO	East II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25L-2 CA	Large	HMO	East II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 30/50L-2 CA	Large	HMO	East II	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 2/20L	Large	HMO	Mid-Hudson East	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 10L	Large	HMO	Mid-Hudson East	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 10+L	Large	HMO	Mid-Hudson East	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 15L	Large	HMO	Mid-Hudson East	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 15+L	Large	HMO	Mid-Hudson East	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 20L	Large	HMO	Mid-Hudson East	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 20+L	Large	HMO	Mid-Hudson East	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25L	Large	HMO	Mid-Hudson East	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25/40L	Large	HMO	Mid-Hudson East	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 30/50L	Large	HMO	Mid-Hudson East	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOCBasixL	Large	HMO	Mid-Hudson East	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson East	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson East	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson East	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 2/20L	Large	HMO	Mid-Hudson West	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 10L	Large	HMO	Mid-Hudson West	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 10+L	Large	HMO	Mid-Hudson West	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 15L	Large	HMO	Mid-Hudson West	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 15+L	Large	HMO	Mid-Hudson West	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 20L	Large	HMO	Mid-Hudson West	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 20+L	Large	HMO	Mid-Hudson West	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25L	Large	HMO	Mid-Hudson West	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25/40L	Large	HMO	Mid-Hudson West	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 30/50L	Large	HMO	Mid-Hudson West	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOCBasixL	Large	HMO	Mid-Hudson West	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson West	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson West	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson West	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 2/20L	Large	HMO	NY Metro	16.75%	16.75%	16.75%	16.75%	16.75%	16.75%
HMOCOC 10L	Large	HMO	NY Metro	16.75%	16.75%	16.75%	16.75%	16.75%	16.75%
HMOCOC 10+L	Large	HMO	NY Metro	16.75%	16.75%	16.75%	16.75%	16.75%	16.75%
HMOCOC 15L	Large	HMO	NY Metro	16.75%	16.75%	16.75%	16.75%	16.75%	16.75%
HMOCOC 15+L	Large	HMO	NY Metro	16.75%	16.75%	16.75%	16.75%	16.75%	16.75%
HMOCOC 20L	Large	HMO	NY Metro	16.75%	16.75%	16.75%	16.75%	16.75%	16.75%
HMOCOC 20+L	Large	HMO	NY Metro	16.75%	16.75%	16.75%	16.75%	16.75%	16.75%
HMOCOC 25L	Large	HMO	NY Metro	16.75%	16.75%	16.75%	16.75%	16.75%	16.75%
HMOCOC 25/40L	Large	HMO	NY Metro	16.75%	16.75%	16.75%	16.75%	16.75%	16.75%
HMOCOC 30/50L	Large	HMO	NY Metro	16.75%	16.75%	16.75%	16.75%	16.75%	16.75%
HMOCOCBasixL	Large	HMO	NY Metro	16.75%	16.75%	16.75%	16.75%	16.75%	16.75%
HMOCOC 25/40L-3	Large	HMO	NY Metro	16.75%	16.75%	16.75%	16.75%	16.75%	16.75%
HMOCOC 25L-2 CA	Large	HMO	NY Metro	16.75%	16.75%	16.75%	16.75%	16.75%	16.75%
HMOCOC 30/50L-2 CA	Large	HMO	NY Metro	16.75%	16.75%	16.75%	16.75%	16.75%	16.75%
HMOCOC 2/20L	Large	HMO	North Country	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%

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Plan Name	Group Size	Plan Type	Rate Region	Change Over Previous Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	North Country	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 10+L	Large	HMO	North Country	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 15L	Large	HMO	North Country	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 15+L	Large	HMO	North Country	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 20L	Large	HMO	North Country	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 20+L	Large	HMO	North Country	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25L	Large	HMO	North Country	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25/40L	Large	HMO	North Country	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 30/50L	Large	HMO	North Country	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOCBasixL	Large	HMO	North Country	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25/40L-3	Large	HMO	North Country	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25L-2 CA	Large	HMO	North Country	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 30/50L-2 CA	Large	HMO	North Country	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 2/20L	Large	HMO	Rochester	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 10L	Large	HMO	Rochester	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 10+L	Large	HMO	Rochester	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 15L	Large	HMO	Rochester	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 15+L	Large	HMO	Rochester	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 20L	Large	HMO	Rochester	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 20+L	Large	HMO	Rochester	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25L	Large	HMO	Rochester	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25/40L	Large	HMO	Rochester	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 30/50L	Large	HMO	Rochester	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOCBasixL	Large	HMO	Rochester	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25/40L-3	Large	HMO	Rochester	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 25L-2 CA	Large	HMO	Rochester	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%
HMOCOC 30/50L-2 CA	Large	HMO	Rochester	5.57%	5.57%	5.57%	5.57%	5.57%	5.57%

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Plan Name	Group Size	Plan Type	Rate Region	First Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	Central I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 10+L	Large	HMO	Central I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 15L	Large	HMO	Central I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 15+L	Large	HMO	Central I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 20L	Large	HMO	Central I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 20+L	Large	HMO	Central I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25L	Large	HMO	Central I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25/40L	Large	HMO	Central I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 30/50L	Large	HMO	Central I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOCBasixL	Large	HMO	Central I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25/40L-3	Large	HMO	Central I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25L-2 CA	Large	HMO	Central I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 30/50L-2 CA	Large	HMO	Central I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 2/20L	Large	HMO	Central II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 10L	Large	HMO	Central II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 10+L	Large	HMO	Central II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 15L	Large	HMO	Central II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 15+L	Large	HMO	Central II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 20L	Large	HMO	Central II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 20+L	Large	HMO	Central II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25L	Large	HMO	Central II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25/40L	Large	HMO	Central II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 30/50L	Large	HMO	Central II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOCBasixL	Large	HMO	Central II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25/40L-3	Large	HMO	Central II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25L-2 CA	Large	HMO	Central II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 30/50L-2 CA	Large	HMO	Central II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 2/20L	Large	HMO	Central III	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 10L	Large	HMO	Central III	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 10+L	Large	HMO	Central III	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 15L	Large	HMO	Central III	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 15+L	Large	HMO	Central III	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 20L	Large	HMO	Central III	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 20+L	Large	HMO	Central III	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25L	Large	HMO	Central III	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25/40L	Large	HMO	Central III	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 30/50L	Large	HMO	Central III	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOCBasixL	Large	HMO	Central III	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25/40L-3	Large	HMO	Central III	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25L-2 CA	Large	HMO	Central III	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 30/50L-2 CA	Large	HMO	Central III	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 2/20L	Large	HMO	East I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 10L	Large	HMO	East I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 10+L	Large	HMO	East I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 15L	Large	HMO	East I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 15+L	Large	HMO	East I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 20L	Large	HMO	East I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 20+L	Large	HMO	East I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25L	Large	HMO	East I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25/40L	Large	HMO	East I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 30/50L	Large	HMO	East I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOCBasixL	Large	HMO	East I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25/40L-3	Large	HMO	East I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25L-2 CA	Large	HMO	East I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 30/50L-2 CA	Large	HMO	East I	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 2/20L	Large	HMO	East II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%

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Plan Name	Group Size	Plan Type	Rate Region	First Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	East II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 10+L	Large	HMO	East II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 15L	Large	HMO	East II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 15+L	Large	HMO	East II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 20L	Large	HMO	East II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 20+L	Large	HMO	East II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25L	Large	HMO	East II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25/40L	Large	HMO	East II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 30/50L	Large	HMO	East II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOCBasixL	Large	HMO	East II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25/40L-3	Large	HMO	East II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25L-2 CA	Large	HMO	East II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 30/50L-2 CA	Large	HMO	East II	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 2/20L	Large	HMO	Mid-Hudson East	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 10L	Large	HMO	Mid-Hudson East	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 10+L	Large	HMO	Mid-Hudson East	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 15L	Large	HMO	Mid-Hudson East	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 15+L	Large	HMO	Mid-Hudson East	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 20L	Large	HMO	Mid-Hudson East	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 20+L	Large	HMO	Mid-Hudson East	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25L	Large	HMO	Mid-Hudson East	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25/40L	Large	HMO	Mid-Hudson East	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 30/50L	Large	HMO	Mid-Hudson East	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOCBasixL	Large	HMO	Mid-Hudson East	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson East	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson East	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson East	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 2/20L	Large	HMO	Mid-Hudson West	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 10L	Large	HMO	Mid-Hudson West	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 10+L	Large	HMO	Mid-Hudson West	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 15L	Large	HMO	Mid-Hudson West	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 15+L	Large	HMO	Mid-Hudson West	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 20L	Large	HMO	Mid-Hudson West	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 20+L	Large	HMO	Mid-Hudson West	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25L	Large	HMO	Mid-Hudson West	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25/40L	Large	HMO	Mid-Hudson West	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 30/50L	Large	HMO	Mid-Hudson West	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOCBasixL	Large	HMO	Mid-Hudson West	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson West	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson West	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson West	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 2/20L	Large	HMO	NY Metro	21.0%	21.0%	21.0%	21.0%	21.0%	21.0%
HMOCOC 10L	Large	HMO	NY Metro	21.0%	21.0%	21.0%	21.0%	21.0%	21.0%
HMOCOC 10+L	Large	HMO	NY Metro	21.0%	21.0%	21.0%	21.0%	21.0%	21.0%
HMOCOC 15L	Large	HMO	NY Metro	21.0%	21.0%	21.0%	21.0%	21.0%	21.0%
HMOCOC 15+L	Large	HMO	NY Metro	21.0%	21.0%	21.0%	21.0%	21.0%	21.0%
HMOCOC 20L	Large	HMO	NY Metro	21.0%	21.0%	21.0%	21.0%	21.0%	21.0%
HMOCOC 20+L	Large	HMO	NY Metro	21.0%	21.0%	21.0%	21.0%	21.0%	21.0%
HMOCOC 25L	Large	HMO	NY Metro	21.0%	21.0%	21.0%	21.0%	21.0%	21.0%
HMOCOC 25/40L	Large	HMO	NY Metro	21.0%	21.0%	21.0%	21.0%	21.0%	21.0%
HMOCOC 30/50L	Large	HMO	NY Metro	21.0%	21.0%	21.0%	21.0%	21.0%	21.0%
HMOCOCBasixL	Large	HMO	NY Metro	21.0%	21.0%	21.0%	21.0%	21.0%	21.0%
HMOCOC 25/40L-3	Large	HMO	NY Metro	21.0%	21.0%	21.0%	21.0%	21.0%	21.0%
HMOCOC 25L-2 CA	Large	HMO	NY Metro	21.0%	21.0%	21.0%	21.0%	21.0%	21.0%
HMOCOC 30/50L-2 CA	Large	HMO	NY Metro	21.0%	21.0%	21.0%	21.0%	21.0%	21.0%
HMOCOC 2/20L	Large	HMO	North Country	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%

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Plan Name	Group Size	Plan Type	Rate Region	First Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	North Country	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 10+L	Large	HMO	North Country	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 15L	Large	HMO	North Country	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 15+L	Large	HMO	North Country	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 20L	Large	HMO	North Country	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 20+L	Large	HMO	North Country	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25L	Large	HMO	North Country	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25/40L	Large	HMO	North Country	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 30/50L	Large	HMO	North Country	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOCBasixL	Large	HMO	North Country	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25/40L-3	Large	HMO	North Country	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25L-2 CA	Large	HMO	North Country	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 30/50L-2 CA	Large	HMO	North Country	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 2/20L	Large	HMO	Rochester	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 10L	Large	HMO	Rochester	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 10+L	Large	HMO	Rochester	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 15L	Large	HMO	Rochester	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 15+L	Large	HMO	Rochester	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 20L	Large	HMO	Rochester	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 20+L	Large	HMO	Rochester	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25L	Large	HMO	Rochester	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25/40L	Large	HMO	Rochester	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 30/50L	Large	HMO	Rochester	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOCBasixL	Large	HMO	Rochester	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25/40L-3	Large	HMO	Rochester	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 25L-2 CA	Large	HMO	Rochester	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
HMOCOC 30/50L-2 CA	Large	HMO	Rochester	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%

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Plan Name	Group Size	Plan Type	Rate Region	Second Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	Central I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 10+L	Large	HMO	Central I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 15L	Large	HMO	Central I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 15+L	Large	HMO	Central I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 20L	Large	HMO	Central I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 20+L	Large	HMO	Central I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25L	Large	HMO	Central I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25/40L	Large	HMO	Central I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 30/50L	Large	HMO	Central I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOCBasixL	Large	HMO	Central I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25/40L-3	Large	HMO	Central I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25L-2 CA	Large	HMO	Central I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 30/50L-2 CA	Large	HMO	Central I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 2/20L	Large	HMO	Central II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 10L	Large	HMO	Central II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 10+L	Large	HMO	Central II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 15L	Large	HMO	Central II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 15+L	Large	HMO	Central II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 20L	Large	HMO	Central II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 20+L	Large	HMO	Central II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25L	Large	HMO	Central II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25/40L	Large	HMO	Central II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 30/50L	Large	HMO	Central II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOCBasixL	Large	HMO	Central II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25/40L-3	Large	HMO	Central II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25L-2 CA	Large	HMO	Central II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 30/50L-2 CA	Large	HMO	Central II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 2/20L	Large	HMO	Central III	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 10L	Large	HMO	Central III	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 10+L	Large	HMO	Central III	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 15L	Large	HMO	Central III	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 15+L	Large	HMO	Central III	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 20L	Large	HMO	Central III	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 20+L	Large	HMO	Central III	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25L	Large	HMO	Central III	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25/40L	Large	HMO	Central III	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 30/50L	Large	HMO	Central III	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOCBasixL	Large	HMO	Central III	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25/40L-3	Large	HMO	Central III	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25L-2 CA	Large	HMO	Central III	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 30/50L-2 CA	Large	HMO	Central III	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 2/20L	Large	HMO	East I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 10L	Large	HMO	East I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 10+L	Large	HMO	East I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 15L	Large	HMO	East I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 15+L	Large	HMO	East I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 20L	Large	HMO	East I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 20+L	Large	HMO	East I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25L	Large	HMO	East I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25/40L	Large	HMO	East I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 30/50L	Large	HMO	East I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOCBasixL	Large	HMO	East I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25/40L-3	Large	HMO	East I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25L-2 CA	Large	HMO	East I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 30/50L-2 CA	Large	HMO	East I	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 2/20L	Large	HMO	East II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%

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Plan Name	Group Size	Plan Type	Rate Region	Second Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	East II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 10+L	Large	HMO	East II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 15L	Large	HMO	East II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 15+L	Large	HMO	East II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 20L	Large	HMO	East II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 20+L	Large	HMO	East II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25L	Large	HMO	East II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25/40L	Large	HMO	East II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 30/50L	Large	HMO	East II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOCBasixL	Large	HMO	East II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25/40L-3	Large	HMO	East II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25L-2 CA	Large	HMO	East II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 30/50L-2 CA	Large	HMO	East II	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 2/20L	Large	HMO	Mid-Hudson East	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 10L	Large	HMO	Mid-Hudson East	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 10+L	Large	HMO	Mid-Hudson East	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 15L	Large	HMO	Mid-Hudson East	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 15+L	Large	HMO	Mid-Hudson East	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 20L	Large	HMO	Mid-Hudson East	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 20+L	Large	HMO	Mid-Hudson East	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25L	Large	HMO	Mid-Hudson East	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25/40L	Large	HMO	Mid-Hudson East	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 30/50L	Large	HMO	Mid-Hudson East	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOCBasixL	Large	HMO	Mid-Hudson East	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson East	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson East	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson East	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 2/20L	Large	HMO	Mid-Hudson West	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 10L	Large	HMO	Mid-Hudson West	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 10+L	Large	HMO	Mid-Hudson West	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 15L	Large	HMO	Mid-Hudson West	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 15+L	Large	HMO	Mid-Hudson West	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 20L	Large	HMO	Mid-Hudson West	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 20+L	Large	HMO	Mid-Hudson West	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25L	Large	HMO	Mid-Hudson West	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25/40L	Large	HMO	Mid-Hudson West	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 30/50L	Large	HMO	Mid-Hudson West	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOCBasixL	Large	HMO	Mid-Hudson West	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson West	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson West	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson West	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 2/20L	Large	HMO	NY Metro	21.4%	21.4%	21.4%	21.4%	21.4%	21.4%
HMOCOC 10L	Large	HMO	NY Metro	21.4%	21.4%	21.4%	21.4%	21.4%	21.4%
HMOCOC 10+L	Large	HMO	NY Metro	21.4%	21.4%	21.4%	21.4%	21.4%	21.4%
HMOCOC 15L	Large	HMO	NY Metro	21.4%	21.4%	21.4%	21.4%	21.4%	21.4%
HMOCOC 15+L	Large	HMO	NY Metro	21.4%	21.4%	21.4%	21.4%	21.4%	21.4%
HMOCOC 20L	Large	HMO	NY Metro	21.4%	21.4%	21.4%	21.4%	21.4%	21.4%
HMOCOC 20+L	Large	HMO	NY Metro	21.4%	21.4%	21.4%	21.4%	21.4%	21.4%
HMOCOC 25L	Large	HMO	NY Metro	21.4%	21.4%	21.4%	21.4%	21.4%	21.4%
HMOCOC 25/40L	Large	HMO	NY Metro	21.4%	21.4%	21.4%	21.4%	21.4%	21.4%
HMOCOC 30/50L	Large	HMO	NY Metro	21.4%	21.4%	21.4%	21.4%	21.4%	21.4%
HMOCOCBasixL	Large	HMO	NY Metro	21.4%	21.4%	21.4%	21.4%	21.4%	21.4%
HMOCOC 25/40L-3	Large	HMO	NY Metro	21.4%	21.4%	21.4%	21.4%	21.4%	21.4%
HMOCOC 25L-2 CA	Large	HMO	NY Metro	21.4%	21.4%	21.4%	21.4%	21.4%	21.4%
HMOCOC 30/50L-2 CA	Large	HMO	NY Metro	21.4%	21.4%	21.4%	21.4%	21.4%	21.4%
HMOCOC 2/20L	Large	HMO	North Country	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%

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Plan Name	Group Size	Plan Type	Rate Region	Second Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	North Country	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 10+L	Large	HMO	North Country	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 15L	Large	HMO	North Country	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 15+L	Large	HMO	North Country	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 20L	Large	HMO	North Country	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 20+L	Large	HMO	North Country	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25L	Large	HMO	North Country	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25/40L	Large	HMO	North Country	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 30/50L	Large	HMO	North Country	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOCBasixL	Large	HMO	North Country	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25/40L-3	Large	HMO	North Country	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25L-2 CA	Large	HMO	North Country	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 30/50L-2 CA	Large	HMO	North Country	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 2/20L	Large	HMO	Rochester	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 10L	Large	HMO	Rochester	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 10+L	Large	HMO	Rochester	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 15L	Large	HMO	Rochester	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 15+L	Large	HMO	Rochester	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 20L	Large	HMO	Rochester	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 20+L	Large	HMO	Rochester	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25L	Large	HMO	Rochester	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25/40L	Large	HMO	Rochester	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 30/50L	Large	HMO	Rochester	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOCBasixL	Large	HMO	Rochester	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25/40L-3	Large	HMO	Rochester	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 25L-2 CA	Large	HMO	Rochester	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
HMOCOC 30/50L-2 CA	Large	HMO	Rochester	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%

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Plan Name	Group Size	Plan Type	Rate Region	Third Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	Central I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 10+L	Large	HMO	Central I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 15L	Large	HMO	Central I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 15+L	Large	HMO	Central I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 20L	Large	HMO	Central I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 20+L	Large	HMO	Central I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25L	Large	HMO	Central I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25/40L	Large	HMO	Central I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 30/50L	Large	HMO	Central I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOCBasixL	Large	HMO	Central I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25/40L-3	Large	HMO	Central I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25L-2 CA	Large	HMO	Central I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 30/50L-2 CA	Large	HMO	Central I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 2/20L	Large	HMO	Central II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 10L	Large	HMO	Central II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 10+L	Large	HMO	Central II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 15L	Large	HMO	Central II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 15+L	Large	HMO	Central II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 20L	Large	HMO	Central II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 20+L	Large	HMO	Central II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25L	Large	HMO	Central II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25/40L	Large	HMO	Central II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 30/50L	Large	HMO	Central II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOCBasixL	Large	HMO	Central II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25/40L-3	Large	HMO	Central II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25L-2 CA	Large	HMO	Central II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 30/50L-2 CA	Large	HMO	Central II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 2/20L	Large	HMO	Central III	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 10L	Large	HMO	Central III	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 10+L	Large	HMO	Central III	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 15L	Large	HMO	Central III	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 15+L	Large	HMO	Central III	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 20L	Large	HMO	Central III	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 20+L	Large	HMO	Central III	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25L	Large	HMO	Central III	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25/40L	Large	HMO	Central III	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 30/50L	Large	HMO	Central III	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOCBasixL	Large	HMO	Central III	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25/40L-3	Large	HMO	Central III	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25L-2 CA	Large	HMO	Central III	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 30/50L-2 CA	Large	HMO	Central III	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 2/20L	Large	HMO	East I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 10L	Large	HMO	East I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 10+L	Large	HMO	East I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 15L	Large	HMO	East I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 15+L	Large	HMO	East I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 20L	Large	HMO	East I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 20+L	Large	HMO	East I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25L	Large	HMO	East I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25/40L	Large	HMO	East I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 30/50L	Large	HMO	East I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOCBasixL	Large	HMO	East I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25/40L-3	Large	HMO	East I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25L-2 CA	Large	HMO	East I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 30/50L-2 CA	Large	HMO	East I	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 2/20L	Large	HMO	East II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%

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Plan Name	Group Size	Plan Type	Rate Region	Third Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	East II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 10+L	Large	HMO	East II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 15L	Large	HMO	East II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 15+L	Large	HMO	East II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 20L	Large	HMO	East II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 20+L	Large	HMO	East II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25L	Large	HMO	East II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25/40L	Large	HMO	East II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 30/50L	Large	HMO	East II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOCBasixL	Large	HMO	East II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25/40L-3	Large	HMO	East II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25L-2 CA	Large	HMO	East II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 30/50L-2 CA	Large	HMO	East II	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 2/20L	Large	HMO	Mid-Hudson East	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 10L	Large	HMO	Mid-Hudson East	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 10+L	Large	HMO	Mid-Hudson East	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 15L	Large	HMO	Mid-Hudson East	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 15+L	Large	HMO	Mid-Hudson East	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 20L	Large	HMO	Mid-Hudson East	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 20+L	Large	HMO	Mid-Hudson East	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25L	Large	HMO	Mid-Hudson East	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25/40L	Large	HMO	Mid-Hudson East	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 30/50L	Large	HMO	Mid-Hudson East	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOCBasixL	Large	HMO	Mid-Hudson East	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson East	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson East	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson East	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 2/20L	Large	HMO	Mid-Hudson West	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 10L	Large	HMO	Mid-Hudson West	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 10+L	Large	HMO	Mid-Hudson West	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 15L	Large	HMO	Mid-Hudson West	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 15+L	Large	HMO	Mid-Hudson West	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 20L	Large	HMO	Mid-Hudson West	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 20+L	Large	HMO	Mid-Hudson West	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25L	Large	HMO	Mid-Hudson West	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25/40L	Large	HMO	Mid-Hudson West	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 30/50L	Large	HMO	Mid-Hudson West	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOCBasixL	Large	HMO	Mid-Hudson West	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson West	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson West	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson West	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 2/20L	Large	HMO	NY Metro	21.7%	21.7%	21.7%	21.7%	21.7%	21.7%
HMOCOC 10L	Large	HMO	NY Metro	21.7%	21.7%	21.7%	21.7%	21.7%	21.7%
HMOCOC 10+L	Large	HMO	NY Metro	21.7%	21.7%	21.7%	21.7%	21.7%	21.7%
HMOCOC 15L	Large	HMO	NY Metro	21.7%	21.7%	21.7%	21.7%	21.7%	21.7%
HMOCOC 15+L	Large	HMO	NY Metro	21.7%	21.7%	21.7%	21.7%	21.7%	21.7%
HMOCOC 20L	Large	HMO	NY Metro	21.7%	21.7%	21.7%	21.7%	21.7%	21.7%
HMOCOC 20+L	Large	HMO	NY Metro	21.7%	21.7%	21.7%	21.7%	21.7%	21.7%
HMOCOC 25L	Large	HMO	NY Metro	21.7%	21.7%	21.7%	21.7%	21.7%	21.7%
HMOCOC 25/40L	Large	HMO	NY Metro	21.7%	21.7%	21.7%	21.7%	21.7%	21.7%
HMOCOC 30/50L	Large	HMO	NY Metro	21.7%	21.7%	21.7%	21.7%	21.7%	21.7%
HMOCOCBasixL	Large	HMO	NY Metro	21.7%	21.7%	21.7%	21.7%	21.7%	21.7%
HMOCOC 25/40L-3	Large	HMO	NY Metro	21.7%	21.7%	21.7%	21.7%	21.7%	21.7%
HMOCOC 25L-2 CA	Large	HMO	NY Metro	21.7%	21.7%	21.7%	21.7%	21.7%	21.7%
HMOCOC 30/50L-2 CA	Large	HMO	NY Metro	21.7%	21.7%	21.7%	21.7%	21.7%	21.7%
HMOCOC 2/20L	Large	HMO	North Country	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%

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				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	North Country	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 10+L	Large	HMO	North Country	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 15L	Large	HMO	North Country	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 15+L	Large	HMO	North Country	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 20L	Large	HMO	North Country	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 20+L	Large	HMO	North Country	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25L	Large	HMO	North Country	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25/40L	Large	HMO	North Country	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 30/50L	Large	HMO	North Country	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOCBasixL	Large	HMO	North Country	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25/40L-3	Large	HMO	North Country	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25L-2 CA	Large	HMO	North Country	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 30/50L-2 CA	Large	HMO	North Country	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 2/20L	Large	HMO	Rochester	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 10L	Large	HMO	Rochester	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 10+L	Large	HMO	Rochester	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 15L	Large	HMO	Rochester	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 15+L	Large	HMO	Rochester	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 20L	Large	HMO	Rochester	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 20+L	Large	HMO	Rochester	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25L	Large	HMO	Rochester	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25/40L	Large	HMO	Rochester	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 30/50L	Large	HMO	Rochester	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOCBasixL	Large	HMO	Rochester	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25/40L-3	Large	HMO	Rochester	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 25L-2 CA	Large	HMO	Rochester	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%
HMOCOC 30/50L-2 CA	Large	HMO	Rochester	10.1%	10.1%	10.1%	10.1%	10.1%	10.1%

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Plan Name	Group Size	Plan Type	Rate Region	Fourth Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	Central I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 10+L	Large	HMO	Central I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 15L	Large	HMO	Central I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 15+L	Large	HMO	Central I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 20L	Large	HMO	Central I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 20+L	Large	HMO	Central I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25L	Large	HMO	Central I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25/40L	Large	HMO	Central I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 30/50L	Large	HMO	Central I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOCBasixL	Large	HMO	Central I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25/40L-3	Large	HMO	Central I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25L-2 CA	Large	HMO	Central I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 30/50L-2 CA	Large	HMO	Central I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 2/20L	Large	HMO	Central II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 10L	Large	HMO	Central II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 10+L	Large	HMO	Central II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 15L	Large	HMO	Central II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 15+L	Large	HMO	Central II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 20L	Large	HMO	Central II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 20+L	Large	HMO	Central II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25L	Large	HMO	Central II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25/40L	Large	HMO	Central II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 30/50L	Large	HMO	Central II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOCBasixL	Large	HMO	Central II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25/40L-3	Large	HMO	Central II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25L-2 CA	Large	HMO	Central II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 30/50L-2 CA	Large	HMO	Central II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 2/20L	Large	HMO	Central III	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 10L	Large	HMO	Central III	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 10+L	Large	HMO	Central III	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 15L	Large	HMO	Central III	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 15+L	Large	HMO	Central III	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 20L	Large	HMO	Central III	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 20+L	Large	HMO	Central III	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25L	Large	HMO	Central III	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25/40L	Large	HMO	Central III	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 30/50L	Large	HMO	Central III	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOCBasixL	Large	HMO	Central III	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25/40L-3	Large	HMO	Central III	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25L-2 CA	Large	HMO	Central III	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 30/50L-2 CA	Large	HMO	Central III	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 2/20L	Large	HMO	East I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 10L	Large	HMO	East I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 10+L	Large	HMO	East I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 15L	Large	HMO	East I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 15+L	Large	HMO	East I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 20L	Large	HMO	East I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 20+L	Large	HMO	East I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25L	Large	HMO	East I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25/40L	Large	HMO	East I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 30/50L	Large	HMO	East I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOCBasixL	Large	HMO	East I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25/40L-3	Large	HMO	East I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25L-2 CA	Large	HMO	East I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 30/50L-2 CA	Large	HMO	East I	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 2/20L	Large	HMO	East II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%

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Plan Name	Group Size	Plan Type	Rate Region	Fourth Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	East II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 10+L	Large	HMO	East II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 15L	Large	HMO	East II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 15+L	Large	HMO	East II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 20L	Large	HMO	East II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 20+L	Large	HMO	East II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25L	Large	HMO	East II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25/40L	Large	HMO	East II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 30/50L	Large	HMO	East II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOCBasixL	Large	HMO	East II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25/40L-3	Large	HMO	East II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25L-2 CA	Large	HMO	East II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 30/50L-2 CA	Large	HMO	East II	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 2/20L	Large	HMO	Mid-Hudson East	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 10L	Large	HMO	Mid-Hudson East	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 10+L	Large	HMO	Mid-Hudson East	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 15L	Large	HMO	Mid-Hudson East	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 15+L	Large	HMO	Mid-Hudson East	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 20L	Large	HMO	Mid-Hudson East	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 20+L	Large	HMO	Mid-Hudson East	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25L	Large	HMO	Mid-Hudson East	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25/40L	Large	HMO	Mid-Hudson East	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 30/50L	Large	HMO	Mid-Hudson East	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOCBasixL	Large	HMO	Mid-Hudson East	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson East	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson East	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson East	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 2/20L	Large	HMO	Mid-Hudson West	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 10L	Large	HMO	Mid-Hudson West	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 10+L	Large	HMO	Mid-Hudson West	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 15L	Large	HMO	Mid-Hudson West	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 15+L	Large	HMO	Mid-Hudson West	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 20L	Large	HMO	Mid-Hudson West	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 20+L	Large	HMO	Mid-Hudson West	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25L	Large	HMO	Mid-Hudson West	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25/40L	Large	HMO	Mid-Hudson West	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 30/50L	Large	HMO	Mid-Hudson West	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOCBasixL	Large	HMO	Mid-Hudson West	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25/40L-3	Large	HMO	Mid-Hudson West	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25L-2 CA	Large	HMO	Mid-Hudson West	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 30/50L-2 CA	Large	HMO	Mid-Hudson West	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 2/20L	Large	HMO	NY Metro	22.1%	22.1%	22.1%	22.1%	22.1%	22.1%
HMOCOC 10L	Large	HMO	NY Metro	22.1%	22.1%	22.1%	22.1%	22.1%	22.1%
HMOCOC 10+L	Large	HMO	NY Metro	22.1%	22.1%	22.1%	22.1%	22.1%	22.1%
HMOCOC 15L	Large	HMO	NY Metro	22.1%	22.1%	22.1%	22.1%	22.1%	22.1%
HMOCOC 15+L	Large	HMO	NY Metro	22.1%	22.1%	22.1%	22.1%	22.1%	22.1%
HMOCOC 20L	Large	HMO	NY Metro	22.1%	22.1%	22.1%	22.1%	22.1%	22.1%
HMOCOC 20+L	Large	HMO	NY Metro	22.1%	22.1%	22.1%	22.1%	22.1%	22.1%
HMOCOC 25L	Large	HMO	NY Metro	22.1%	22.1%	22.1%	22.1%	22.1%	22.1%
HMOCOC 25/40L	Large	HMO	NY Metro	22.1%	22.1%	22.1%	22.1%	22.1%	22.1%
HMOCOC 30/50L	Large	HMO	NY Metro	22.1%	22.1%	22.1%	22.1%	22.1%	22.1%
HMOCOCBasixL	Large	HMO	NY Metro	22.1%	22.1%	22.1%	22.1%	22.1%	22.1%
HMOCOC 25/40L-3	Large	HMO	NY Metro	22.1%	22.1%	22.1%	22.1%	22.1%	22.1%
HMOCOC 25L-2 CA	Large	HMO	NY Metro	22.1%	22.1%	22.1%	22.1%	22.1%	22.1%
HMOCOC 30/50L-2 CA	Large	HMO	NY Metro	22.1%	22.1%	22.1%	22.1%	22.1%	22.1%
HMOCOC 2/20L	Large	HMO	North Country	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%

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Percent Change

Exhibit F

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Plan Name	Group Size	Plan Type	Rate Region	Fourth Quarter					
				Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
HMOCOC 10L	Large	HMO	North Country	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 10+L	Large	HMO	North Country	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 15L	Large	HMO	North Country	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 15+L	Large	HMO	North Country	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 20L	Large	HMO	North Country	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 20+L	Large	HMO	North Country	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25L	Large	HMO	North Country	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25/40L	Large	HMO	North Country	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 30/50L	Large	HMO	North Country	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOCBasixL	Large	HMO	North Country	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25/40L-3	Large	HMO	North Country	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25L-2 CA	Large	HMO	North Country	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 30/50L-2 CA	Large	HMO	North Country	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 2/20L	Large	HMO	Rochester	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 10L	Large	HMO	Rochester	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 10+L	Large	HMO	Rochester	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 15L	Large	HMO	Rochester	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 15+L	Large	HMO	Rochester	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 20L	Large	HMO	Rochester	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 20+L	Large	HMO	Rochester	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25L	Large	HMO	Rochester	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25/40L	Large	HMO	Rochester	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 30/50L	Large	HMO	Rochester	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOCBasixL	Large	HMO	Rochester	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25/40L-3	Large	HMO	Rochester	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 25L-2 CA	Large	HMO	Rochester	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
HMOCOC 30/50L-2 CA	Large	HMO	Rochester	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%

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Rider Name	Benefit Description	Available To	First Quarter Rates 2015					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
MED500L	Exclusion of Preventative Dental from Subscriber Contract	Large groups	-\$2.25	-\$4.50	-\$4.28	-\$5.63	-\$5.85	-\$6.30
MED503L	Eyewear Benefits (50% upto \$75)	Large groups	\$1.89	\$3.78	\$3.59	\$4.73	\$4.91	\$5.29
MED504L	Enhanced Eyewear Benefit (80% upto \$160)	Large groups	\$3.00	\$6.00	\$5.70	\$7.50	\$7.80	\$8.40
MED510L	\$240 Inpatient Hospitalization Copayment	Large groups where IP schedule copay is \$500 per stay	\$5.52	\$11.04	\$10.49	\$13.80	\$14.35	\$15.46
MED513L	External Prosthetic Devices, Ostomy Supplies & Durable Medical Equipment 80%	Large groups	\$1.76	\$3.52	\$3.34	\$4.40	\$4.58	\$4.93
MED515L	Disposable Medical Supplies w/ 20% Coinsurance	Large groups	\$1.61	\$3.22	\$3.06	\$4.03	\$4.19	\$4.51
MED517L	120 Days Skilled Nursing Facility	Large groups	\$0.24	\$0.48	\$0.46	\$0.60	\$0.62	\$0.67
MED528L	Hearing Aids for Kids	Large groups	\$0.30	\$0.60	\$0.57	\$0.75	\$0.78	\$0.84
MED533	Member Discount	Large groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
MED535L	Care Advantage Rider	Large groups	\$3.89	\$7.78	\$7.39	\$9.73	\$10.11	\$10.89
MED538L-a	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 2/20L	-\$3.34	-\$6.68	-\$6.35	-\$8.35	-\$8.68	-\$9.35
MED538L-b	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10L	-\$2.85	-\$5.70	-\$5.42	-\$7.13	-\$7.41	-\$7.98
MED538L-c	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10+L	-\$2.39	-\$4.78	-\$4.54	-\$5.98	-\$6.21	-\$6.69
MED538L-d	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15L	-\$3.85	-\$7.70	-\$7.32	-\$9.63	-\$10.01	-\$10.78
MED538L-e	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15+L	-\$3.45	-\$6.90	-\$6.56	-\$8.63	-\$8.97	-\$9.66
MED538L-f	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20L	-\$4.76	-\$9.52	-\$9.04	-\$11.90	-\$12.38	-\$13.33
MED538L-g	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20+L	-\$4.38	-\$8.76	-\$8.32	-\$10.95	-\$11.39	-\$12.26
MED538L-h	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25L	-\$5.83	-\$11.66	-\$11.08	-\$14.58	-\$15.16	-\$16.32

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Rider Name	Benefit Description	Available To	Second Quarter Rates 2015					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
MED500L	Exclusion of Preventative Dental from Subscriber Contract	Large groups	-\$2.28	-\$4.56	-\$4.33	-\$5.70	-\$5.93	-\$6.38
MED503L	Eyewear Benefits (50% upto \$75)	Large groups	\$1.92	\$3.84	\$3.65	\$4.80	\$4.99	\$5.38
MED504L	Enhanced Eyewear Benefit (80% upto \$160)	Large groups	\$3.05	\$6.10	\$5.80	\$7.63	\$7.93	\$8.54
MED510L	\$240 Inpatient Hospitalization Copayment	Large groups where IP schedule copay is \$500 per stay	\$5.60	\$11.20	\$10.64	\$14.00	\$14.56	\$15.68
MED513L	External Prosthetic Devices, Ostomy Supplies & Durable Medical Equipment 80%	Large groups	\$1.79	\$3.58	\$3.40	\$4.48	\$4.65	\$5.01
MED515L	Disposable Medical Supplies w/ 20% Coinsurance	Large groups	\$1.63	\$3.26	\$3.10	\$4.08	\$4.24	\$4.56
MED517L	120 Days Skilled Nursing Facility	Large groups	\$0.24	\$0.48	\$0.46	\$0.60	\$0.62	\$0.67
MED528L	Hearing Aids for Kids	Large groups	\$0.30	\$0.60	\$0.57	\$0.75	\$0.78	\$0.84
MED533	Member Discount	Large groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
MED535L	Care Advantage Rider	Large groups	\$3.95	\$7.90	\$7.51	\$9.88	\$10.27	\$11.06
MED538L-a	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 2/20L	-\$3.39	-\$6.78	-\$6.44	-\$8.48	-\$8.81	-\$9.49
MED538L-b	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10L	-\$2.89	-\$5.78	-\$5.49	-\$7.23	-\$7.51	-\$8.09
MED538L-c	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10+L	-\$2.43	-\$4.86	-\$4.62	-\$6.08	-\$6.32	-\$6.80
MED538L-d	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15L	-\$3.91	-\$7.82	-\$7.43	-\$9.78	-\$10.17	-\$10.95
MED538L-e	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15+L	-\$3.50	-\$7.00	-\$6.65	-\$8.75	-\$9.10	-\$9.80
MED538L-f	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20L	-\$4.83	-\$9.66	-\$9.18	-\$12.08	-\$12.56	-\$13.52
MED538L-g	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20+L	-\$4.45	-\$8.90	-\$8.46	-\$11.13	-\$11.57	-\$12.46
MED538L-h	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25L	-\$5.92	-\$11.84	-\$11.25	-\$14.80	-\$15.39	-\$16.58

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Rider Name	Benefit Description	Available To	Third Quarter Rates 2015					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
MED500L	Exclusion of Preventative Dental from Subscriber Contract	Large groups	-\$2.31	-\$4.62	-\$4.39	-\$5.78	-\$6.01	-\$6.47
MED503L	Eyewear Benefits (50% upto \$75)	Large groups	\$1.95	\$3.90	\$3.71	\$4.88	\$5.07	\$5.46
MED504L	Enhanced Eyewear Benefit (80% upto \$160)	Large groups	\$3.10	\$6.20	\$5.89	\$7.75	\$8.06	\$8.68
MED510L	\$240 Inpatient Hospitalization Copayment	Large groups where IP schedule copay is \$500 per stay	\$5.68	\$11.36	\$10.79	\$14.20	\$14.77	\$15.90
MED513L	External Prosthetic Devices, Ostomy Supplies & Durable Medical Equipment 80%	Large groups	\$1.82	\$3.64	\$3.46	\$4.55	\$4.73	\$5.10
MED515L	Disposable Medical Supplies w/ 20% Coinsurance	Large groups	\$1.65	\$3.30	\$3.14	\$4.13	\$4.29	\$4.62
MED517L	120 Days Skilled Nursing Facility	Large groups	\$0.25	\$0.50	\$0.48	\$0.63	\$0.65	\$0.70
MED528L	Hearing Aids for Kids	Large groups	\$0.30	\$0.60	\$0.57	\$0.75	\$0.78	\$0.84
MED533	Member Discount	Large groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
MED535L	Care Advantage Rider	Large groups	\$4.01	\$8.02	\$7.62	\$10.03	\$10.43	\$11.23
MED538L-a	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 2/20L	-\$3.44	-\$6.88	-\$6.54	-\$8.60	-\$8.94	-\$9.63
MED538L-b	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10L	-\$2.93	-\$5.86	-\$5.57	-\$7.33	-\$7.62	-\$8.20
MED538L-c	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10+L	-\$2.47	-\$4.94	-\$4.69	-\$6.18	-\$6.42	-\$6.92
MED538L-d	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15L	-\$3.97	-\$7.94	-\$7.54	-\$9.93	-\$10.32	-\$11.12
MED538L-e	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15+L	-\$3.55	-\$7.10	-\$6.75	-\$8.88	-\$9.23	-\$9.94
MED538L-f	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20L	-\$4.90	-\$9.80	-\$9.31	-\$12.25	-\$12.74	-\$13.72
MED538L-g	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20+L	-\$4.52	-\$9.04	-\$8.59	-\$11.30	-\$11.75	-\$12.66
MED538L-h	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25L	-\$6.01	-\$12.02	-\$11.42	-\$15.03	-\$15.63	-\$16.83

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Rider Name	Benefit Description	Available To	Fourth Quarter Rates 2015					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
MED500L	Exclusion of Preventative Dental from Subscriber Contract	Large groups	-\$2.34	-\$4.68	-\$4.45	-\$5.85	-\$6.08	-\$6.55
MED503L	Eyewear Benefits (50% upto \$75)	Large groups	\$1.98	\$3.96	\$3.76	\$4.95	\$5.15	\$5.54
MED504L	Enhanced Eyewear Benefit (80% upto \$160)	Large groups	\$3.15	\$6.30	\$5.99	\$7.88	\$8.19	\$8.82
MED510L	\$240 Inpatient Hospitalization Copayment	Large groups where IP schedule copay is \$500 per stay	\$5.77	\$11.54	\$10.96	\$14.43	\$15.00	\$16.16
MED513L	External Prosthetic Devices, Ostomy Supplies & Durable Medical Equipment 80%	Large groups	\$1.85	\$3.70	\$3.52	\$4.63	\$4.81	\$5.18
MED515L	Disposable Medical Supplies w/ 20% Coinsurance	Large groups	\$1.67	\$3.34	\$3.17	\$4.18	\$4.34	\$4.68
MED517L	120 Days Skilled Nursing Facility	Large groups	\$0.25	\$0.50	\$0.48	\$0.63	\$0.65	\$0.70
MED528L	Hearing Aids for Kids	Large groups	\$0.30	\$0.60	\$0.57	\$0.75	\$0.78	\$0.84
MED533	Member Discount	Large groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
MED535L	Care Advantage Rider	Large groups	\$4.07	\$8.14	\$7.73	\$10.18	\$10.58	\$11.40
MED538L-a	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 2/20L	-\$3.49	-\$6.98	-\$6.63	-\$8.73	-\$9.07	-\$9.77
MED538L-b	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10L	-\$2.97	-\$5.94	-\$5.64	-\$7.43	-\$7.72	-\$8.32
MED538L-c	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10+L	-\$2.51	-\$5.02	-\$4.77	-\$6.28	-\$6.53	-\$7.03
MED538L-d	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15L	-\$4.03	-\$8.06	-\$7.66	-\$10.08	-\$10.48	-\$11.28
MED538L-e	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15+L	-\$3.60	-\$7.20	-\$6.84	-\$9.00	-\$9.36	-\$10.08
MED538L-f	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20L	-\$4.97	-\$9.94	-\$9.44	-\$12.43	-\$12.92	-\$13.92
MED538L-g	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20+L	-\$4.59	-\$9.18	-\$8.72	-\$11.48	-\$11.93	-\$12.85
MED538L-h	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25L	-\$6.10	-\$12.20	-\$11.59	-\$15.25	-\$15.86	-\$17.08

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Rider Name	Benefit Description	Available To	First Quarter Rates 2014					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
MED500L	Exclusion of Preventative Dental from Subscriber Contract	Large groups	-\$2.06	-\$4.12	-\$3.91	-\$5.15	-\$5.36	-\$5.77
MED503L	Eyewear Benefits (50% upto \$75)	Large groups	\$1.73	\$3.46	\$3.29	\$4.33	\$4.50	\$4.84
MED504L	Enhanced Eyewear Benefit (80% upto \$160)	Large groups	\$2.75	\$5.50	\$5.23	\$6.88	\$7.15	\$7.70
MED510L	\$240 Inpatient Hospitalization Copayment	Large groups where IP schedule copay is \$500 per stay	\$5.05	\$10.10	\$9.60	\$12.63	\$13.13	\$14.14
MED513L	External Prosthetic Devices, Ostomy Supplies & Durable Medical Equipment 80%	Large groups	\$1.61	\$3.22	\$3.06	\$4.03	\$4.19	\$4.51
MED515L	Disposable Medical Supplies w/ 20% Coinsurance	Large groups	\$1.46	\$2.92	\$2.77	\$3.65	\$3.80	\$4.09
MED517L	120 Days Skilled Nursing Facility	Large groups	\$0.22	\$0.44	\$0.42	\$0.55	\$0.57	\$0.62
MED528L	Hearing Aids for Kids	Large groups	\$0.28	\$0.56	\$0.53	\$0.70	\$0.73	\$0.78
MED533	Member Discount	Large & Small groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
MED535L	Care Advantage Rider	Large groups	\$3.56	\$7.12	\$6.76	\$8.90	\$9.26	\$9.97
MED538L-a	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 2/20L	-\$3.04	-\$6.08	-\$5.78	-\$7.60	-\$7.90	-\$8.51
MED538L-b	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10L	-\$2.61	-\$5.22	-\$4.96	-\$6.53	-\$6.79	-\$7.31
MED538L-c	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10+L	-\$2.17	-\$4.34	-\$4.12	-\$5.43	-\$5.64	-\$6.08
MED538L-d	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15L	-\$3.53	-\$7.06	-\$6.71	-\$8.83	-\$9.18	-\$9.88
MED538L-e	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15+L	-\$3.15	-\$6.30	-\$5.99	-\$7.88	-\$8.19	-\$8.82
MED538L-f	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20L	-\$4.36	-\$8.72	-\$8.28	-\$10.90	-\$11.34	-\$12.21
MED538L-g	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20+L	-\$4.00	-\$8.00	-\$7.60	-\$10.00	-\$10.40	-\$11.20
MED538L-h	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25L	-\$5.33	-\$10.66	-\$10.13	-\$13.33	-\$13.86	-\$14.92

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Rider Name	Benefit Description	Available To	Second Quarter Rates 2014					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
MED500L	Exclusion of Preventative Dental from Subscriber Contract	Large groups	-\$2.08	-\$4.16	-\$3.95	-\$5.20	-\$5.41	-\$5.82
MED503L	Eyewear Benefits (50% upto \$75)	Large groups	\$1.75	\$3.50	\$3.33	\$4.38	\$4.55	\$4.90
MED504L	Enhanced Eyewear Benefit (80% upto \$160)	Large groups	\$2.78	\$5.56	\$5.28	\$6.95	\$7.23	\$7.78
MED510L	\$240 Inpatient Hospitalization Copayment	Large groups where IP schedule copay is \$500 per stay	\$5.11	\$10.22	\$9.71	\$12.78	\$13.29	\$14.31
MED513L	External Prosthetic Devices, Ostomy Supplies & Durable Medical Equipment 80%	Large groups	\$1.63	\$3.26	\$3.10	\$4.08	\$4.24	\$4.56
MED515L	Disposable Medical Supplies w/ 20% Coinsurance	Large groups	\$1.48	\$2.96	\$2.81	\$3.70	\$3.85	\$4.14
MED517L	120 Days Skilled Nursing Facility	Large groups	\$0.22	\$0.44	\$0.42	\$0.55	\$0.57	\$0.62
MED528L	Hearing Aids for Kids	Large groups	\$0.28	\$0.56	\$0.53	\$0.70	\$0.73	\$0.78
MED533	Member Discount	Large & Small groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
MED535L	Care Advantage Rider	Large groups	\$3.60	\$7.20	\$6.84	\$9.00	\$9.36	\$10.08
MED538L-a	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 2/20L	-\$3.08	-\$6.16	-\$5.85	-\$7.70	-\$8.01	-\$8.62
MED538L-b	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10L	-\$2.64	-\$5.28	-\$5.02	-\$6.60	-\$6.86	-\$7.39
MED538L-c	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10+L	-\$2.20	-\$4.40	-\$4.18	-\$5.50	-\$5.72	-\$6.16
MED538L-d	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15L	-\$3.57	-\$7.14	-\$6.78	-\$8.93	-\$9.28	-\$10.00
MED538L-e	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15+L	-\$3.19	-\$6.38	-\$6.06	-\$7.98	-\$8.29	-\$8.93
MED538L-f	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20L	-\$4.41	-\$8.82	-\$8.38	-\$11.03	-\$11.47	-\$12.35
MED538L-g	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20+L	-\$4.05	-\$8.10	-\$7.70	-\$10.13	-\$10.53	-\$11.34
MED538L-h	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25L	-\$5.39	-\$10.78	-\$10.24	-\$13.48	-\$14.01	-\$15.09

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Rider Name	Benefit Description	Available To	Third Quarter Rates 2014					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
MED500L	Exclusion of Preventative Dental from Subscriber Contract	Large groups	-\$2.10	-\$4.20	-\$3.99	-\$5.25	-\$5.46	-\$5.88
MED503L	Eyewear Benefits (50% upto \$75)	Large groups	\$1.77	\$3.54	\$3.36	\$4.43	\$4.60	\$4.96
MED504L	Enhanced Eyewear Benefit (80% upto \$160)	Large groups	\$2.81	\$5.62	\$5.34	\$7.03	\$7.31	\$7.87
MED510L	\$240 Inpatient Hospitalization Copayment	Large groups where IP schedule copay is \$500 per stay	\$5.17	\$10.34	\$9.82	\$12.93	\$13.44	\$14.48
MED513L	External Prosthetic Devices, Ostomy Supplies & Durable Medical Equipment 80%	Large groups	\$1.65	\$3.30	\$3.14	\$4.13	\$4.29	\$4.62
MED515L	Disposable Medical Supplies w/ 20% Coinsurance	Large groups	\$1.50	\$3.00	\$2.85	\$3.75	\$3.90	\$4.20
MED517L	120 Days Skilled Nursing Facility	Large groups	\$0.23	\$0.46	\$0.44	\$0.58	\$0.60	\$0.64
MED528L	Hearing Aids for Kids	Large groups	\$0.28	\$0.56	\$0.53	\$0.70	\$0.73	\$0.78
MED533	Member Discount	Large & Small groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
MED535L	Care Advantage Rider	Large groups	\$3.64	\$7.28	\$6.92	\$9.10	\$9.46	\$10.19
MED538L-a	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 2/20L	-\$3.12	-\$6.24	-\$5.93	-\$7.80	-\$8.11	-\$8.74
MED538L-b	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10L	-\$2.67	-\$5.34	-\$5.07	-\$6.68	-\$6.94	-\$7.48
MED538L-c	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10+L	-\$2.23	-\$4.46	-\$4.24	-\$5.58	-\$5.80	-\$6.24
MED538L-d	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15L	-\$3.61	-\$7.22	-\$6.86	-\$9.03	-\$9.39	-\$10.11
MED538L-e	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15+L	-\$3.23	-\$6.46	-\$6.14	-\$8.08	-\$8.40	-\$9.04
MED538L-f	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20L	-\$4.46	-\$8.92	-\$8.47	-\$11.15	-\$11.60	-\$12.49
MED538L-g	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20+L	-\$4.10	-\$8.20	-\$7.79	-\$10.25	-\$10.66	-\$11.48
MED538L-h	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25L	-\$5.45	-\$10.90	-\$10.36	-\$13.63	-\$14.17	-\$15.26

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Rider Name	Benefit Description	Available To	Fourth Quarter Rates 2014					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
MED500L	Exclusion of Preventative Dental from Subscriber Contract	Large groups	-\$2.13	-\$4.26	-\$4.05	-\$5.33	-\$5.54	-\$5.96
MED503L	Eyewear Benefits (50% upto \$75)	Large groups	\$1.79	\$3.58	\$3.40	\$4.48	\$4.65	\$5.01
MED504L	Enhanced Eyewear Benefit (80% upto \$160)	Large groups	\$2.84	\$5.68	\$5.40	\$7.10	\$7.38	\$7.95
MED510L	\$240 Inpatient Hospitalization Copayment	Large groups where IP schedule copay is \$500 per stay	\$5.23	\$10.46	\$9.94	\$13.08	\$13.60	\$14.64
MED513L	External Prosthetic Devices, Ostomy Supplies & Durable Medical Equipment 80%	Large groups	\$1.67	\$3.34	\$3.17	\$4.18	\$4.34	\$4.68
MED515L	Disposable Medical Supplies w/ 20% Coinsurance	Large groups	\$1.52	\$3.04	\$2.89	\$3.80	\$3.95	\$4.26
MED517L	120 Days Skilled Nursing Facility	Large groups	\$0.23	\$0.46	\$0.44	\$0.58	\$0.60	\$0.64
MED528L	Hearing Aids for Kids	Large groups	\$0.28	\$0.56	\$0.53	\$0.70	\$0.73	\$0.78
MED533	Member Discount	Large & Small groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
MED535L	Care Advantage Rider	Large groups	\$3.68	\$7.36	\$6.99	\$9.20	\$9.57	\$10.30
MED538L-a	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 2/20L	-\$3.16	-\$6.32	-\$6.00	-\$7.90	-\$8.22	-\$8.85
MED538L-b	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10L	-\$2.70	-\$5.40	-\$5.13	-\$6.75	-\$7.02	-\$7.56
MED538L-c	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10+L	-\$2.26	-\$4.52	-\$4.29	-\$5.65	-\$5.88	-\$6.33
MED538L-d	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15L	-\$3.65	-\$7.30	-\$6.94	-\$9.13	-\$9.49	-\$10.22
MED538L-e	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15+L	-\$3.27	-\$6.54	-\$6.21	-\$8.18	-\$8.50	-\$9.16
MED538L-f	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20L	-\$4.51	-\$9.02	-\$8.57	-\$11.28	-\$11.73	-\$12.63
MED538L-g	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20+L	-\$4.15	-\$8.30	-\$7.89	-\$10.38	-\$10.79	-\$11.62
MED538L-h	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25L	-\$5.52	-\$11.04	-\$10.49	-\$13.80	-\$14.35	-\$15.46

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Rider Name	Benefit Description	Available To	First Quarter					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
MED500L	Exclusion of Preventative Dental from Subscriber Contract	Large groups	-\$0.19	-\$0.38	-\$0.37	-\$0.48	-\$0.49	-\$0.53
MED503L	Eyewear Benefits (50% upto \$75)	Large groups	\$0.16	\$0.32	\$0.30	\$0.40	\$0.41	\$0.45
MED504L	Enhanced Eyewear Benefit (80% upto \$160)	Large groups	\$0.25	\$0.50	\$0.47	\$0.62	\$0.65	\$0.70
MED510L	\$240 Inpatient Hospitalization Copayment	Large groups where IP schedule copay is \$500 per stay	\$0.47	\$0.94	\$0.89	\$1.17	\$1.22	\$1.32
MED513L	External Prosthetic Devices, Ostomy Supplies & Durable Medical Equipment 80%	Large groups	\$0.15	\$0.30	\$0.28	\$0.37	\$0.39	\$0.42
MED515L	Disposable Medical Supplies w/ 20% Coinsurance	Large groups	\$0.15	\$0.30	\$0.29	\$0.38	\$0.39	\$0.42
MED517L	120 Days Skilled Nursing Facility	Large groups	\$0.02	\$0.04	\$0.04	\$0.05	\$0.05	\$0.05
MED528L	Hearing Aids for Kids	Large groups	\$0.02	\$0.04	\$0.04	\$0.05	\$0.05	\$0.06
MED533	Member Discount	Large groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
MED535L	Care Advantage Rider	Large groups	\$0.33	\$0.66	\$0.63	\$0.83	\$0.85	\$0.92
MED538L-a	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 2/20L	-\$0.30	-\$0.60	-\$0.57	-\$0.75	-\$0.78	-\$0.84
MED538L-b	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10L	-\$0.24	-\$0.48	-\$0.46	-\$0.60	-\$0.62	-\$0.67
MED538L-c	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10+L	-\$0.22	-\$0.44	-\$0.42	-\$0.55	-\$0.57	-\$0.61
MED538L-d	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15L	-\$0.32	-\$0.64	-\$0.61	-\$0.80	-\$0.83	-\$0.90
MED538L-e	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15+L	-\$0.30	-\$0.60	-\$0.57	-\$0.75	-\$0.78	-\$0.84
MED538L-f	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20L	-\$0.40	-\$0.80	-\$0.76	-\$1.00	-\$1.04	-\$1.12
MED538L-g	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20+L	-\$0.38	-\$0.76	-\$0.72	-\$0.95	-\$0.99	-\$1.06

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Rider Name	Benefit Description	Available To	Second Quarter					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
MED500L	Exclusion of Preventative Dental from Subscriber Contract	Large groups	-\$0.20	-\$0.40	-\$0.38	-\$0.50	-\$0.52	-\$0.56
MED503L	Eyewear Benefits (50% upto \$75)	Large groups	\$0.17	\$0.34	\$0.32	\$0.42	\$0.44	\$0.48
MED504L	Enhanced Eyewear Benefit (80% upto \$160)	Large groups	\$0.27	\$0.54	\$0.52	\$0.68	\$0.70	\$0.76
MED510L	\$240 Inpatient Hospitalization Copayment	Large groups where IP schedule copay is \$500 per stay	\$0.49	\$0.98	\$0.93	\$1.22	\$1.27	\$1.37
MED513L	External Prosthetic Devices, Ostomy Supplies & Durable Medical Equipment 80%	Large groups	\$0.16	\$0.32	\$0.30	\$0.40	\$0.41	\$0.45
MED515L	Disposable Medical Supplies w/ 20% Coinsurance	Large groups	\$0.15	\$0.30	\$0.29	\$0.38	\$0.39	\$0.42
MED517L	120 Days Skilled Nursing Facility	Large groups	\$0.02	\$0.04	\$0.04	\$0.05	\$0.05	\$0.05
MED528L	Hearing Aids for Kids	Large groups	\$0.02	\$0.04	\$0.04	\$0.05	\$0.05	\$0.06
MED533	Member Discount	Large groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
MED535L	Care Advantage Rider	Large groups	\$0.35	\$0.70	\$0.67	\$0.88	\$0.91	\$0.98
MED538L-a	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 2/20L	-\$0.31	-\$0.62	-\$0.59	-\$0.78	-\$0.80	-\$0.87
MED538L-b	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10L	-\$0.25	-\$0.50	-\$0.47	-\$0.63	-\$0.65	-\$0.70
MED538L-c	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10+L	-\$0.23	-\$0.46	-\$0.44	-\$0.58	-\$0.60	-\$0.64
MED538L-d	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15L	-\$0.34	-\$0.68	-\$0.65	-\$0.85	-\$0.89	-\$0.95
MED538L-e	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15+L	-\$0.31	-\$0.62	-\$0.59	-\$0.77	-\$0.81	-\$0.87
MED538L-f	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20L	-\$0.42	-\$0.84	-\$0.80	-\$1.05	-\$1.09	-\$1.17
MED538L-g	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20+L	-\$0.40	-\$0.80	-\$0.76	-\$1.00	-\$1.04	-\$1.12

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Rider Name	Benefit Description	Available To	Third Quarter					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
MED500L	Exclusion of Preventative Dental from Subscriber Contract	Large groups	-\$0.21	-\$0.42	-\$0.40	-\$0.53	-\$0.55	-\$0.59
MED503L	Eyewear Benefits (50% upto \$75)	Large groups	\$0.18	\$0.36	\$0.35	\$0.45	\$0.47	\$0.50
MED504L	Enhanced Eyewear Benefit (80% upto \$160)	Large groups	\$0.29	\$0.58	\$0.55	\$0.72	\$0.75	\$0.81
MED510L	\$240 Inpatient Hospitalization Copayment	Large groups where IP schedule copay is \$500 per stay	\$0.51	\$1.02	\$0.97	\$1.27	\$1.33	\$1.42
MED513L	External Prosthetic Devices, Ostomy Supplies & Durable Medical Equipment 80%	Large groups	\$0.17	\$0.34	\$0.32	\$0.42	\$0.44	\$0.48
MED515L	Disposable Medical Supplies w/ 20% Coinsurance	Large groups	\$0.15	\$0.30	\$0.29	\$0.38	\$0.39	\$0.42
MED517L	120 Days Skilled Nursing Facility	Large groups	\$0.02	\$0.04	\$0.04	\$0.05	\$0.05	\$0.06
MED528L	Hearing Aids for Kids	Large groups	\$0.02	\$0.04	\$0.04	\$0.05	\$0.05	\$0.06
MED533	Member Discount	Large groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
MED535L	Care Advantage Rider	Large groups	\$0.37	\$0.74	\$0.70	\$0.93	\$0.97	\$1.04
MED538L-a	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 2/20L	-\$0.32	-\$0.64	-\$0.61	-\$0.80	-\$0.83	-\$0.89
MED538L-b	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10L	-\$0.26	-\$0.52	-\$0.50	-\$0.65	-\$0.68	-\$0.72
MED538L-c	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10+L	-\$0.24	-\$0.48	-\$0.45	-\$0.60	-\$0.62	-\$0.68
MED538L-d	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15L	-\$0.36	-\$0.72	-\$0.68	-\$0.90	-\$0.93	-\$1.01
MED538L-e	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15+L	-\$0.32	-\$0.64	-\$0.61	-\$0.80	-\$0.83	-\$0.90
MED538L-f	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20L	-\$0.44	-\$0.88	-\$0.84	-\$1.10	-\$1.14	-\$1.23
MED538L-g	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20+L	-\$0.42	-\$0.84	-\$0.80	-\$1.05	-\$1.09	-\$1.18

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Medical Riders Change In Dollars

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Rider Name	Benefit Description	Available To	Fourth Quarter					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
MED500L	Exclusion of Preventative Dental from Subscriber Contract	Large groups	-\$0.21	-\$0.42	-\$0.40	-\$0.52	-\$0.54	-\$0.59
MED503L	Eyewear Benefits (50% upto \$75)	Large groups	\$0.19	\$0.38	\$0.36	\$0.47	\$0.50	\$0.53
MED504L	Enhanced Eyewear Benefit (80% upto \$160)	Large groups	\$0.31	\$0.62	\$0.59	\$0.78	\$0.81	\$0.87
MED510L	\$240 Inpatient Hospitalization Copayment	Large groups where IP schedule copay is \$500 per stay	\$0.54	\$1.08	\$1.02	\$1.35	\$1.40	\$1.52
MED513L	External Prosthetic Devices, Ostomy Supplies & Durable Medical Equipment 80%	Large groups	\$0.18	\$0.36	\$0.35	\$0.45	\$0.47	\$0.50
MED515L	Disposable Medical Supplies w/ 20% Coinsurance	Large groups	\$0.15	\$0.30	\$0.28	\$0.38	\$0.39	\$0.42
MED517L	120 Days Skilled Nursing Facility	Large groups	\$0.02	\$0.04	\$0.04	\$0.05	\$0.05	\$0.06
MED528L	Hearing Aids for Kids	Large groups	\$0.02	\$0.04	\$0.04	\$0.05	\$0.05	\$0.06
MED533	Member Discount	Large groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
MED535L	Care Advantage Rider	Large groups	\$0.39	\$0.78	\$0.74	\$0.98	\$1.01	\$1.10
MED538L-a	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 2/20L	-\$0.33	-\$0.66	-\$0.63	-\$0.83	-\$0.85	-\$0.92
MED538L-b	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10L	-\$0.27	-\$0.54	-\$0.51	-\$0.68	-\$0.70	-\$0.76
MED538L-c	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10+L	-\$0.25	-\$0.50	-\$0.48	-\$0.63	-\$0.65	-\$0.70
MED538L-d	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15L	-\$0.38	-\$0.76	-\$0.72	-\$0.95	-\$0.99	-\$1.06
MED538L-e	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15+L	-\$0.33	-\$0.66	-\$0.63	-\$0.82	-\$0.86	-\$0.92
MED538L-f	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20L	-\$0.46	-\$0.92	-\$0.87	-\$1.15	-\$1.19	-\$1.29
MED538L-g	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20+L	-\$0.44	-\$0.88	-\$0.83	-\$1.10	-\$1.14	-\$1.23

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Rider Name	Benefit Description	Available To	Change Over Previous Quarter					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
MED500L	Exclusion of Preventative Dental from Subscriber Contract	Large groups	5.63%	5.63%	5.68%	5.63%	5.60%	5.70%
MED503L	Eyewear Benefits (50% upto \$75)	Large groups	5.59%	5.59%	5.59%	5.58%	5.59%	5.59%
MED504L	Enhanced Eyewear Benefit (80% upto \$160)	Large groups	5.63%	5.63%	5.56%	5.63%	5.69%	5.66%
MED510L	\$240 Inpatient Hospitalization Copayment	Large groups where IP schedule copay is \$500 per stay	5.54%	5.54%	5.53%	5.50%	5.51%	5.60%
MED513L	External Prosthetic Devices, Ostomy Supplies & Durable Medical Equipment 80%	Large groups	5.39%	5.39%	5.36%	5.26%	5.53%	5.34%
MED515L	Disposable Medical Supplies w/ 20% Coinsurance	Large groups	5.92%	5.92%	5.88%	6.05%	6.08%	5.87%
MED517L	120 Days Skilled Nursing Facility	Large groups	4.35%	4.35%	4.55%	3.45%	3.33%	4.69%
MED528L	Hearing Aids for Kids	Large groups	7.14%	7.14%	7.55%	7.14%	6.85%	7.69%
MED533	Member Discount	Large groups	N/A	N/A	N/A	N/A	N/A	N/A
MED535L	Care Advantage Rider	Large groups	5.71%	5.71%	5.72%	5.76%	5.64%	5.73%
MED538L-a	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 2/20L	5.70%	5.70%	5.83%	5.70%	5.60%	5.65%
MED538L-b	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10L	5.56%	5.56%	5.65%	5.63%	5.56%	5.56%
MED538L-c	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10+L	5.75%	5.75%	5.83%	5.84%	5.61%	5.69%
MED538L-d	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15L	5.48%	5.48%	5.48%	5.48%	5.48%	5.48%
MED538L-e	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15+L	5.50%	5.50%	5.64%	5.50%	5.53%	5.46%
MED538L-f	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20L	5.54%	5.54%	5.48%	5.50%	5.54%	5.54%
MED538L-g	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20+L	5.54%	5.54%	5.45%	5.49%	5.56%	5.51%

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Rider Name	Benefit Description	Available To	Change Over Previous Quarter					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
MED538L-h	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25L	5.62%	5.62%	5.62%	5.65%	5.64%	5.56%
MED538L-j	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25/40L	5.61%	5.61%	5.64%	5.65%	5.62%	5.65%
MED538L-k	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 30/50L	5.61%	5.61%	5.61%	5.61%	5.61%	5.61%
MED538L-m	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOCBasixL	5.62%	5.62%	5.64%	5.62%	5.68%	5.65%
MED538L-q	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25/40L-3	5.61%	5.61%	5.64%	5.65%	5.62%	5.65%
MED538L-s	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25L-2 CA	5.62%	5.62%	5.62%	5.65%	5.64%	5.56%
MED538L-u	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 30/50L-2 CA	5.60%	5.60%	5.60%	5.60%	5.60%	5.60%
DP500L	Domestic Partner Benefits (B/12/12)	Large groups	N/A	N/A	N/A	N/A	N/A	N/A
DP501L	Domestic Partner Benefits (B/6/6)	Large groups	N/A	N/A	N/A	N/A	N/A	N/A
DP502L	Domestic Partner Benefits (S/12/12)	Large groups	N/A	N/A	N/A	N/A	N/A	N/A
SD512L	Unmarried Dependent Children - Other	Large groups	N/A	N/A	0.00%	0.00%	0.00%	0.00%
SD514L	NYSHIP Eligibility	Group Specific	N/A	N/A	N/A	N/A	N/A	N/A
SD518L	Changes the eligibility definition for dependent to 26 for grandfathered groups	Large groups	N/A	N/A	N/A	N/A	N/A	N/A
07AM1L-A	Mental Health Parity & SED	Large groups; Except 25/40	N/A	N/A	N/A	N/A	N/A	N/A
07AM1L-B	Mental Health Parity & SED	Large groups HMOCOC 25/40L	N/A	N/A	N/A	N/A	N/A	N/A
07AM2L	Mental Health Parity & SED	Large groups HMOCOC BasixL	N/A	N/A	N/A	N/A	N/A	N/A

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Rider Name	Benefit Description	Available To	First Quarter					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
MED538L-h	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25L	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
MED538L-j	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25/40L	9.5%	9.5%	9.6%	9.5%	9.6%	9.5%
MED538L-k	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 30/50L	9.3%	9.3%	9.3%	9.3%	9.3%	9.3%
MED538L-m	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOCBasixL	9.7%	9.7%	9.7%	9.7%	9.7%	9.7%
MED538L-q	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25/40L-3	9.5%	9.5%	9.6%	9.5%	9.6%	9.5%
MED538L-s	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25L-2 CA	9.4%	9.4%	9.4%	9.4%	9.4%	9.4%
MED538L-u	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 30/50L-2 CA	9.3%	9.3%	9.3%	9.3%	9.3%	9.3%
DP500L	Domestic Partner Benefits (B/12/12)	Large groups	N/A	N/A	N/A	N/A	N/A	N/A
DP501L	Domestic Partner Benefits (B/6/6)	Large groups	N/A	N/A	N/A	N/A	N/A	N/A
DP502L	Domestic Partner Benefits (S/12/12)	Large groups	N/A	N/A	N/A	N/A	N/A	N/A
SD512L	Unmarried Dependent Children - Other	Large groups	N/A	N/A	0.0%	0.0%	0.0%	0.0%
SD514L	NYSHIP Eligibility	Group Specific	N/A	N/A	N/A	N/A	N/A	N/A
SD518L	Changes the eligibility definition for dependent to 26 for grandfathered groups	Large groups	N/A	N/A	N/A	N/A	N/A	N/A
07AM1L-A	Mental Health Parity & SED	Large groups; Except 25/40	N/A	N/A	N/A	N/A	N/A	N/A
07AM1L-B	Mental Health Parity & SED	Large groups HMOCOC 25/40L	N/A	N/A	N/A	N/A	N/A	N/A
07AM2L	Mental Health Parity & SED	Large groups HMOCOC BasixL	N/A	N/A	N/A	N/A	N/A	N/A

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Medical Riders Percent Change

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Rider Name	Benefit Description	Available To	Second Quarter					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
MED538L-h	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25L	9.8%	9.8%	9.9%	9.8%	9.9%	9.9%
MED538L-j	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25/40L	9.8%	9.8%	9.7%	9.8%	9.8%	9.8%
MED538L-k	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 30/50L	9.6%	9.6%	9.7%	9.6%	9.6%	9.6%
MED538L-m	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOCBasixL	9.9%	9.9%	9.9%	9.9%	9.9%	9.9%
MED538L-q	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25/40L-3	9.8%	9.8%	9.7%	9.8%	9.8%	9.8%
MED538L-s	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25L-2 CA	9.8%	9.8%	9.9%	9.8%	9.9%	9.9%
MED538L-u	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 30/50L-2 CA	9.6%	9.6%	9.7%	9.6%	9.6%	9.6%
DP500L	Domestic Partner Benefits (B/12/12)	Large groups	N/A	N/A	N/A	N/A	N/A	N/A
DP501L	Domestic Partner Benefits (B/6/6)	Large groups	N/A	N/A	N/A	N/A	N/A	N/A
DP502L	Domestic Partner Benefits (S/12/12)	Large groups	N/A	N/A	N/A	N/A	N/A	N/A
SD512L	Unmarried Dependent Children - Other	Large groups	N/A	N/A	0.0%	0.0%	0.0%	0.0%
SD514L	NYSHIP Eligibility	Group Specific	N/A	N/A	N/A	N/A	N/A	N/A
SD518L	Changes the eligibility definition for dependent to 26 for grandfathered groups	Large groups	N/A	N/A	N/A	N/A	N/A	N/A
07AM1L-A	Mental Health Parity & SED	Large groups; Except 25/40	N/A	N/A	N/A	N/A	N/A	N/A
07AM1L-B	Mental Health Parity & SED	Large groups HMOCOC 25/40L	N/A	N/A	N/A	N/A	N/A	N/A
07AM2L	Mental Health Parity & SED	Large groups HMOCOC BasixL	N/A	N/A	N/A	N/A	N/A	N/A

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Rider Name	Benefit Description	Available To	Third Quarter					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
MED500L	Exclusion of Preventative Dental from Subscriber Contract	Large groups	10.0%	10.0%	10.0%	10.1%	10.1%	10.0%
MED503L	Eyewear Benefits (50% upto \$75)	Large groups	10.2%	10.2%	10.4%	10.2%	10.2%	10.1%
MED504L	Enhanced Eyewear Benefit (80% upto \$160)	Large groups	10.3%	10.3%	10.3%	10.2%	10.3%	10.3%
MED510L	\$240 Inpatient Hospitalization Copayment	Large groups where IP schedule copay is \$500 per stay	9.9%	9.9%	9.9%	9.8%	9.9%	9.8%
MED513L	External Prosthetic Devices, Ostomy Supplies & Durable Medical Equipment 80%	Large groups	10.3%	10.3%	10.2%	10.2%	10.3%	10.4%
MED515L	Disposable Medical Supplies w/ 20% Coinsurance	Large groups	10.0%	10.0%	10.2%	10.1%	10.0%	10.0%
MED517L	120 Days Skilled Nursing Facility	Large groups	8.7%	8.7%	9.1%	8.6%	8.3%	9.4%
MED528L	Hearing Aids for Kids	Large groups	7.1%	7.1%	7.5%	7.1%	6.8%	7.7%
MED533	Member Discount	Large groups	N/A	N/A	N/A	N/A	N/A	N/A
MED535L	Care Advantage Rider	Large groups	10.2%	10.2%	10.1%	10.2%	10.3%	10.2%
MED538L-a	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 2/20L	10.3%	10.3%	10.3%	10.3%	10.2%	10.2%
MED538L-b	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10L	9.7%	9.7%	9.9%	9.7%	9.8%	9.6%
MED538L-c	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10+L	10.8%	10.8%	10.6%	10.8%	10.7%	10.9%
MED538L-d	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15L	10.0%	10.0%	9.9%	10.0%	9.9%	10.0%
MED538L-e	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15+L	9.9%	9.9%	9.9%	9.9%	9.9%	10.0%
MED538L-f	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20L	9.9%	9.9%	9.9%	9.9%	9.8%	9.8%
MED538L-g	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20+L	10.2%	10.2%	10.3%	10.2%	10.2%	10.3%

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Rider Name	Benefit Description	Available To	Third Quarter					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
MED538L-h	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25L	10.3%	10.3%	10.2%	10.3%	10.3%	10.3%
MED538L-j	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25/40L	10.0%	10.0%	10.0%	10.0%	9.9%	10.0%
MED538L-k	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 30/50L	9.9%	9.9%	9.9%	9.9%	9.9%	9.9%
MED538L-m	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOCBasixL	10.1%	10.1%	10.1%	10.2%	10.1%	10.1%
MED538L-q	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25/40L-3	10.0%	10.0%	10.0%	10.0%	9.9%	10.0%
MED538L-s	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25L-2 CA	10.3%	10.3%	10.2%	10.3%	10.3%	10.3%
MED538L-u	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 30/50L-2 CA	9.9%	9.9%	9.9%	9.9%	9.9%	9.9%
DP500L	Domestic Partner Benefits (B/12/12)	Large groups	N/A	N/A	N/A	N/A	N/A	N/A
DP501L	Domestic Partner Benefits (B/6/6)	Large groups	N/A	N/A	N/A	N/A	N/A	N/A
DP502L	Domestic Partner Benefits (S/12/12)	Large groups	N/A	N/A	N/A	N/A	N/A	N/A
SD512L	Unmarried Dependent Children - Other	Large groups	N/A	N/A	0.0%	0.0%	0.0%	0.0%
SD514L	NYSHIP Eligibility	Group Specific	N/A	N/A	N/A	N/A	N/A	N/A
SD518L	Changes the eligibility definition for dependent to 26 for grandfathered groups	Large groups	N/A	N/A	N/A	N/A	N/A	N/A
07AM1L-A	Mental Health Parity & SED	Large groups; Except 25/40	N/A	N/A	N/A	N/A	N/A	N/A
07AM1L-B	Mental Health Parity & SED	Large groups HMOCOC 25/40L	N/A	N/A	N/A	N/A	N/A	N/A
07AM2L	Mental Health Parity & SED	Large groups HMOCOC BasixL	N/A	N/A	N/A	N/A	N/A	N/A

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Rider Name	Benefit Description	Available To	Fourth Quarter					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
MED500L	Exclusion of Preventative Dental from Subscriber Contract	Large groups	9.9%	9.9%	9.9%	9.8%	9.7%	9.9%
MED503L	Eyewear Benefits (50% upto \$75)	Large groups	10.6%	10.6%	10.6%	10.5%	10.8%	10.6%
MED504L	Enhanced Eyewear Benefit (80% upto \$160)	Large groups	10.9%	10.9%	10.9%	11.0%	11.0%	10.9%
MED510L	\$240 Inpatient Hospitalization Copayment	Large groups where IP schedule copay is \$500 per stay	10.3%	10.3%	10.3%	10.3%	10.3%	10.4%
MED513L	External Prosthetic Devices, Ostomy Supplies & Durable Medical Equipment 80%	Large groups	10.8%	10.8%	11.0%	10.8%	10.8%	10.7%
MED515L	Disposable Medical Supplies w/ 20% Coinsurance	Large groups	9.9%	9.9%	9.7%	10.0%	9.9%	9.9%
MED517L	120 Days Skilled Nursing Facility	Large groups	8.7%	8.7%	9.1%	8.6%	8.3%	9.4%
MED528L	Hearing Aids for Kids	Large groups	7.1%	7.1%	7.5%	7.1%	6.8%	7.7%
MED533	Member Discount	Large groups	N/A	N/A	N/A	N/A	N/A	N/A
MED535L	Care Advantage Rider	Large groups	10.6%	10.6%	10.6%	10.7%	10.6%	10.7%
MED538L-a	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 2/20L	10.4%	10.4%	10.5%	10.5%	10.3%	10.4%
MED538L-b	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10L	10.0%	10.0%	9.9%	10.1%	10.0%	10.1%
MED538L-c	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 10+L	11.1%	11.1%	11.2%	11.2%	11.1%	11.1%
MED538L-d	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15L	10.4%	10.4%	10.4%	10.4%	10.4%	10.4%
MED538L-e	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 15+L	10.1%	10.1%	10.1%	10.0%	10.1%	10.0%
MED538L-f	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20L	10.2%	10.2%	10.2%	10.2%	10.1%	10.2%
MED538L-g	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 20+L	10.6%	10.6%	10.5%	10.6%	10.6%	10.6%

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Medical Riders Percent Change

Exhibit
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7/18/2014

Rider Name	Benefit Description	Available To	Fourth Quarter					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
MED538L-h	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25L	10.5%	10.5%	10.5%	10.5%	10.5%	10.5%
MED538L-j	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25/40L	10.4%	10.4%	10.4%	10.4%	10.3%	10.4%
MED538L-k	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 30/50L	10.4%	10.4%	10.3%	10.4%	10.4%	10.4%
MED538L-m	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOCBasixL	10.4%	10.4%	10.4%	10.3%	10.4%	10.4%
MED538L-q	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25/40L-3	10.4%	10.4%	10.4%	10.4%	10.3%	10.4%
MED538L-s	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 25L-2 CA	10.5%	10.5%	10.5%	10.5%	10.5%	10.5%
MED538L-u	Removes the changes to emergency services and to preventive services due to the PPACA amendment for large grandfathered groups	HMOCOC 30/50L-2 CA	10.4%	10.4%	10.3%	10.4%	10.4%	10.4%
DP500L	Domestic Partner Benefits (B/12/12)	Large groups	N/A	N/A	N/A	N/A	N/A	N/A
DP501L	Domestic Partner Benefits (B/6/6)	Large groups	N/A	N/A	N/A	N/A	N/A	N/A
DP502L	Domestic Partner Benefits (S/12/12)	Large groups	N/A	N/A	N/A	N/A	N/A	N/A
SD512L	Unmarried Dependent Children - Other	Large groups	N/A	N/A	0.0%	0.0%	0.0%	0.0%
SD514L	NYSHIP Eligibility	Group Specific	N/A	N/A	N/A	N/A	N/A	N/A
SD518L	Changes the eligibility definition for dependent to 26 for grandfathered groups	Large groups	N/A	N/A	N/A	N/A	N/A	N/A
07AM1L-A	Mental Health Parity & SED	Large groups; Except 25/40	N/A	N/A	N/A	N/A	N/A	N/A
07AM1L-B	Mental Health Parity & SED	Large groups HMOCOC 25/40L	N/A	N/A	N/A	N/A	N/A	N/A
07AM2L	Mental Health Parity & SED	Large groups HMOCOC BasixL	N/A	N/A	N/A	N/A	N/A	N/A

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Pharmacy Riders Current Year

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Rider Name	Product Line	Available To	First Quarter Rates 2015					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
RX502L	HMO	Large Groups	\$134.27	\$268.54	\$255.11	\$335.68	\$349.10	\$375.96
RX504L	HMO	Large Groups	\$122.42	\$244.84	\$232.60	\$306.05	\$318.29	\$342.78
RX505L	HMO	Large Groups	\$71.95	\$143.90	\$136.71	\$179.88	\$187.07	\$201.46
RX506L	HMO	Large Groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
RX507L on RX504L	HMO	Large Groups	-\$8.15	-\$16.30	-\$15.49	-\$20.38	-\$21.19	-\$22.82
RX512L	HMO	Large Groups	\$19.73	\$39.46	\$37.49	\$49.33	\$51.30	\$55.24
RX515L	HMO	Large Groups	\$0.36	\$0.72	\$0.68	\$0.90	\$0.94	\$1.01
RX550L	HMO	Large Groups	\$1.31	\$2.62	\$2.49	\$3.28	\$3.41	\$3.67
RX551L	HMO	Large Groups	\$0.95	\$1.90	\$1.81	\$2.38	\$2.47	\$2.66
RX605L	HMO	Large Groups	\$108.47	\$216.94	\$206.09	\$271.18	\$282.02	\$303.72

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Rider Name	Product Line	Available To	Second Quarter Rates 2015					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
RX502L	HMO	Large Groups	\$136.28	\$272.56	\$258.93	\$340.70	\$354.33	\$381.58
RX504L	HMO	Large Groups	\$124.26	\$248.52	\$236.09	\$310.65	\$323.08	\$347.93
RX505L	HMO	Large Groups	\$73.03	\$146.06	\$138.76	\$182.58	\$189.88	\$204.48
RX506L	HMO	Large Groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
RX507L on RX504L	HMO	Large Groups	-\$8.27	-\$16.54	-\$15.71	-\$20.68	-\$21.50	-\$23.16
RX512L	HMO	Large Groups	\$20.03	\$40.06	\$38.06	\$50.08	\$52.08	\$56.08
RX515L	HMO	Large Groups	\$0.37	\$0.74	\$0.70	\$0.93	\$0.96	\$1.04
RX550L	HMO	Large Groups	\$1.33	\$2.66	\$2.53	\$3.33	\$3.46	\$3.72
RX551L	HMO	Large Groups	\$0.96	\$1.92	\$1.82	\$2.40	\$2.50	\$2.69
RX605L	HMO	Large Groups	\$110.10	\$220.20	\$209.19	\$275.25	\$286.26	\$308.28

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Rider Name	Product Line	Available To	Third Quarter Rates 2015					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
RX502L	HMO	Large Groups	\$138.32	\$276.64	\$262.81	\$345.80	\$359.63	\$387.30
RX504L	HMO	Large Groups	\$126.12	\$252.24	\$239.63	\$315.30	\$327.91	\$353.14
RX505L	HMO	Large Groups	\$74.13	\$148.26	\$140.85	\$185.33	\$192.74	\$207.56
RX506L	HMO	Large Groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
RX507L on RX504L	HMO	Large Groups	-\$8.39	-\$16.78	-\$15.94	-\$20.98	-\$21.81	-\$23.49
RX512L	HMO	Large Groups	\$20.33	\$40.66	\$38.63	\$50.83	\$52.86	\$56.92
RX515L	HMO	Large Groups	\$0.38	\$0.76	\$0.72	\$0.95	\$0.99	\$1.06
RX550L	HMO	Large Groups	\$1.35	\$2.70	\$2.57	\$3.38	\$3.51	\$3.78
RX551L	HMO	Large Groups	\$0.97	\$1.94	\$1.84	\$2.43	\$2.52	\$2.72
RX605L	HMO	Large Groups	\$111.75	\$223.50	\$212.33	\$279.38	\$290.55	\$312.90

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Rider Name	Product Line	Available To	Fourth Quarter Rates 2015					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
RX502L	HMO	Large Groups	\$140.39	\$280.78	\$266.74	\$350.98	\$365.01	\$393.09
RX504L	HMO	Large Groups	\$128.01	\$256.02	\$243.22	\$320.03	\$332.83	\$358.43
RX505L	HMO	Large Groups	\$75.24	\$150.48	\$142.96	\$188.10	\$195.62	\$210.67
RX506L	HMO	Large Groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
RX507L on RX504L	HMO	Large Groups	-\$8.52	-\$17.04	-\$16.19	-\$21.30	-\$22.15	-\$23.86
RX512L	HMO	Large Groups	\$20.63	\$41.26	\$39.20	\$51.58	\$53.64	\$57.76
RX515L	HMO	Large Groups	\$0.39	\$0.78	\$0.74	\$0.98	\$1.01	\$1.09
RX550L	HMO	Large Groups	\$1.37	\$2.74	\$2.60	\$3.43	\$3.56	\$3.84
RX551L	HMO	Large Groups	\$0.98	\$1.96	\$1.86	\$2.45	\$2.55	\$2.74
RX605L	HMO	Large Groups	\$113.43	\$226.86	\$215.52	\$283.58	\$294.92	\$317.60

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Rider Name	Product Line	Available To	First Quarter Rates 2014					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
RX502L	HMO	Large Groups	\$122.67	\$245.34	\$233.07	\$306.68	\$318.94	\$343.48
RX504L	HMO	Large Groups	\$111.85	\$223.70	\$212.52	\$279.63	\$290.81	\$313.18
RX505L	HMO	Large Groups	\$65.73	\$131.46	\$124.89	\$164.33	\$170.90	\$184.04
RX506L	HMO	Large Groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
RX507L on RX504L	HMO	Large Groups	-\$7.45	-\$14.90	-\$14.16	-\$18.63	-\$19.37	-\$20.86
RX512L	HMO	Large Groups	\$18.02	\$36.04	\$34.24	\$45.05	\$46.85	\$50.46
RX515L	HMO	Large Groups	\$0.34	\$0.68	\$0.65	\$0.85	\$0.88	\$0.95
RX550L	HMO	Large Groups	\$1.21	\$2.42	\$2.30	\$3.03	\$3.15	\$3.39
RX551L	HMO	Large Groups	\$0.87	\$1.74	\$1.65	\$2.18	\$2.26	\$2.44
RX605L	HMO	Large Groups	\$99.10	\$198.20	\$188.29	\$247.75	\$257.66	\$277.48

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Rider Name	Product Line	Available To	Second Quarter Rates 2014					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
RX502L	HMO	Large Groups	\$124.14	\$248.28	\$235.87	\$310.35	\$322.76	\$347.59
RX504L	HMO	Large Groups	\$113.19	\$226.38	\$215.06	\$282.98	\$294.29	\$316.93
RX505L	HMO	Large Groups	\$66.52	\$133.04	\$126.39	\$166.30	\$172.95	\$186.26
RX506L	HMO	Large Groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
RX507L on RX504L	HMO	Large Groups	-\$7.54	-\$15.08	-\$14.33	-\$18.85	-\$19.60	-\$21.11
RX512L	HMO	Large Groups	\$18.24	\$36.48	\$34.66	\$45.60	\$47.42	\$51.07
RX515L	HMO	Large Groups	\$0.34	\$0.68	\$0.65	\$0.85	\$0.88	\$0.95
RX550L	HMO	Large Groups	\$1.22	\$2.44	\$2.32	\$3.05	\$3.17	\$3.42
RX551L	HMO	Large Groups	\$0.88	\$1.76	\$1.67	\$2.20	\$2.29	\$2.46
RX605L	HMO	Large Groups	\$100.29	\$200.58	\$190.55	\$250.73	\$260.75	\$280.81

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Rider Name	Product Line	Available To	Third Quarter Rates 2014					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
RX502L	HMO	Large Groups	\$125.63	\$251.26	\$238.70	\$314.08	\$326.64	\$351.76
RX504L	HMO	Large Groups	\$114.55	\$229.10	\$217.65	\$286.38	\$297.83	\$320.74
RX505L	HMO	Large Groups	\$67.32	\$134.64	\$127.91	\$168.30	\$175.03	\$188.50
RX506L	HMO	Large Groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
RX507L on RX504L	HMO	Large Groups	-\$7.63	-\$15.26	-\$14.50	-\$19.08	-\$19.84	-\$21.36
RX512L	HMO	Large Groups	\$18.46	\$36.92	\$35.07	\$46.15	\$48.00	\$51.69
RX515L	HMO	Large Groups	\$0.34	\$0.68	\$0.65	\$0.85	\$0.88	\$0.95
RX550L	HMO	Large Groups	\$1.23	\$2.46	\$2.34	\$3.08	\$3.20	\$3.44
RX551L	HMO	Large Groups	\$0.89	\$1.78	\$1.69	\$2.23	\$2.31	\$2.49
RX605L	HMO	Large Groups	\$101.49	\$202.98	\$192.83	\$253.73	\$263.87	\$284.17

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Rider Name	Product Line	Available To	Fourth Quarter Rates 2014					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
RX502L	HMO	Large Groups	\$127.14	\$254.28	\$241.57	\$317.85	\$330.56	\$355.99
RX504L	HMO	Large Groups	\$115.92	\$231.84	\$220.25	\$289.80	\$301.39	\$324.58
RX505L	HMO	Large Groups	\$68.13	\$136.26	\$129.45	\$170.33	\$177.14	\$190.76
RX506L	HMO	Large Groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
RX507L on RX504L	HMO	Large Groups	-\$7.72	-\$15.44	-\$14.67	-\$19.30	-\$20.07	-\$21.62
RX512L	HMO	Large Groups	\$18.68	\$37.36	\$35.49	\$46.70	\$48.57	\$52.30
RX515L	HMO	Large Groups	\$0.34	\$0.68	\$0.65	\$0.85	\$0.88	\$0.95
RX550L	HMO	Large Groups	\$1.24	\$2.48	\$2.36	\$3.10	\$3.22	\$3.47
RX551L	HMO	Large Groups	\$0.90	\$1.80	\$1.71	\$2.25	\$2.34	\$2.52
RX605L	HMO	Large Groups	\$102.71	\$205.42	\$195.15	\$256.78	\$267.05	\$287.59

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Pharmacy Riders Change in Dollars

Exhibit

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Rider Name	Product Line	Available To	First Quarter					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
RX502L	HMO	Large Groups	\$11.60	\$23.20	\$22.04	\$29.00	\$30.16	\$32.48
RX504L	HMO	Large Groups	\$10.57	\$21.14	\$20.08	\$26.42	\$27.48	\$29.60
RX505L	HMO	Large Groups	\$6.22	\$12.44	\$11.82	\$15.55	\$16.17	\$17.42
RX506L	HMO	Large Groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
RX507L on RX504L	HMO	Large Groups	-\$0.70	-\$1.40	-\$1.33	-\$1.75	-\$1.82	-\$1.96
RX512L	HMO	Large Groups	\$1.71	\$3.42	\$3.25	\$4.28	\$4.45	\$4.78
RX515L	HMO	Large Groups	\$0.02	\$0.04	\$0.03	\$0.05	\$0.06	\$0.06
RX550L	HMO	Large Groups	\$0.10	\$0.20	\$0.19	\$0.25	\$0.26	\$0.28
RX551L	HMO	Large Groups	\$0.08	\$0.16	\$0.16	\$0.20	\$0.21	\$0.22
RX605L	HMO	Large Groups	\$9.37	\$18.74	\$17.80	\$23.43	\$24.36	\$26.24

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Pharmacy Riders Change in Dollars

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Rider Name	Product Line	Available To	Second Quarter					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
RX502L	HMO	Large Groups	\$12.14	\$24.28	\$23.06	\$30.35	\$31.57	\$33.99
RX504L	HMO	Large Groups	\$11.07	\$22.14	\$21.03	\$27.67	\$28.79	\$31.00
RX505L	HMO	Large Groups	\$6.51	\$13.02	\$12.37	\$16.28	\$16.93	\$18.22
RX506L	HMO	Large Groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
RX507L on RX504L	HMO	Large Groups	-\$0.73	-\$1.46	-\$1.38	-\$1.83	-\$1.90	-\$2.05
RX512L	HMO	Large Groups	\$1.79	\$3.58	\$3.40	\$4.48	\$4.66	\$5.01
RX515L	HMO	Large Groups	\$0.03	\$0.06	\$0.05	\$0.08	\$0.08	\$0.09
RX550L	HMO	Large Groups	\$0.11	\$0.22	\$0.21	\$0.28	\$0.29	\$0.30
RX551L	HMO	Large Groups	\$0.08	\$0.16	\$0.15	\$0.20	\$0.21	\$0.23
RX605L	HMO	Large Groups	\$9.81	\$19.62	\$18.64	\$24.52	\$25.51	\$27.47

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Rider Name	Product Line	Available To	Third Quarter					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
RX502L	HMO	Large Groups	\$12.69	\$25.38	\$24.11	\$31.72	\$32.99	\$35.54
RX504L	HMO	Large Groups	\$11.57	\$23.14	\$21.98	\$28.92	\$30.08	\$32.40
RX505L	HMO	Large Groups	\$6.81	\$13.62	\$12.94	\$17.03	\$17.71	\$19.06
RX506L	HMO	Large Groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
RX507L on RX504L	HMO	Large Groups	-\$0.76	-\$1.52	-\$1.44	-\$1.90	-\$1.97	-\$2.13
RX512L	HMO	Large Groups	\$1.87	\$3.74	\$3.56	\$4.68	\$4.86	\$5.23
RX515L	HMO	Large Groups	\$0.04	\$0.08	\$0.07	\$0.10	\$0.11	\$0.11
RX550L	HMO	Large Groups	\$0.12	\$0.24	\$0.23	\$0.30	\$0.31	\$0.34
RX551L	HMO	Large Groups	\$0.08	\$0.16	\$0.15	\$0.20	\$0.21	\$0.23
RX605L	HMO	Large Groups	\$10.26	\$20.52	\$19.50	\$25.65	\$26.68	\$28.73

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Rider Name	Product Line	Available To	Fourth Quarter					
			Single	Double	Parent Child	Family 2T	Family 3T	Family 4T
RX502L	HMO	Large Groups	\$13.25	\$26.50	\$25.17	\$33.13	\$34.45	\$37.10
RX504L	HMO	Large Groups	\$12.09	\$24.18	\$22.97	\$30.23	\$31.44	\$33.85
RX505L	HMO	Large Groups	\$7.11	\$14.22	\$13.51	\$17.77	\$18.48	\$19.91
RX506L	HMO	Large Groups	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
RX507L on RX504L	HMO	Large Groups	-\$0.80	-\$1.60	-\$1.52	-\$2.00	-\$2.08	-\$2.24
RX512L	HMO	Large Groups	\$1.95	\$3.90	\$3.71	\$4.88	\$5.07	\$5.46
RX515L	HMO	Large Groups	\$0.05	\$0.10	\$0.09	\$0.13	\$0.13	\$0.14
RX550L	HMO	Large Groups	\$0.13	\$0.26	\$0.24	\$0.33	\$0.34	\$0.37
RX551L	HMO	Large Groups	\$0.08	\$0.16	\$0.15	\$0.20	\$0.21	\$0.22
RX605L	HMO	Large Groups	\$10.72	\$21.44	\$20.37	\$26.80	\$27.87	\$30.01

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Rate Regions

Exhibit
VersionO
7/18/2014**LARGE GROUPS**

Central I	Central II	Central III	East I	East II	Mid-Hudson East	Mid-Hudson West	NY Metro	North Country	Rochester
Delaware	Cayuga	Broome	Albany	Fulton	Dutchess	Orange	Rockland	Clinton	Genesee
Herkimer	Jefferson	Chenango	Columbia	Hamilton	Putnam	Sullivan	Westchester *	Essex	Livingston
Lewis	Onondaga	Cortland	Greene	Montgomery		Ulster		Franklin	Monroe
Madison	Oswego	Tioga	Rensselaer	Schoharie				St. Lawrence	Ontario
Oneida		Tompkins	Saratoga	Warren					Orleans
Otsego			Schenectady	Washington					Seneca
									Steuben
									Wayne
									Wyoming
									Yates

* Pending approval

MVP Health Plan, Inc.

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Jan 1, 2015

Example of Premium Calculation with Rider

Exhibit P
Version 7/18/2014**Quarter 1**

MVP Form ID		HMOCOC 25/40L	HMOCOC 25/40L	HMOCOC 25L
Rate Region		East I	East II	Central I
Contract Type		Single	Family 2T	Family 4T
Example of Optional Med Rider 1 (MEDxxx)		MED504L		MED503L
Example of Optional Med Rider 2 (MEDxxx)				MED500L
Example of Optional Dependent Rider 1 (SDxxx)				SD512L
Example of Optional Rx Rider 1 (RXxxx)		RX504L	RX605L	RX504L
Example of Optional Rx Rider 2 (RXxxx)		RX515L		
First Quarter 2015 Coplan Premium	A	\$525.57	\$1,407.13	\$1,693.66
Premium for Optional Med Rider 1	B	\$3.00		\$5.29
Premium for Optional Med Rider 2	C			(\$6.30)
Premium for Optional Dependent Rider 1	D			0.1%
Premium for Optional Rx Rider 1	E	\$122.42	\$271.18	\$342.78
Premium for Optional Rx Rider 2	F	\$0.36		0.00%
2015 Gross Premium, after Rider(s)				
= [A + B + C] * [1 + D] + [E + F]		\$651.35	\$1,678.31	\$2,037.12

Rider combinations above are illustrative only. A group may purchase more or fewer riders.

NY OFF-EXCHANGE BASE COMMISSION PROGRAM

.....

SMALL GROUP (2-50)

4% of paid premium

INDIVIDUAL/FAMILY MARKETPLACE

3% of paid premium

NOTE: Pediatric Dental commission is paid by Delta Dental.

LARGE GROUP (51+)

EPO/PPO

4% of paid premium for the first \$1 million in premiums for all products

2.5% of paid premium thereafter

Unless otherwise negotiated at the time of the quote

HDHP

5% of paid premium for the first \$1 million in premiums for all products

2.5% of paid premium thereafter

Unless otherwise negotiated at the time of the quote

HMO/POS

4% of paid premium for the first \$1 million in premiums for all products

2.5% of paid premium thereafter

GROUP MEDICARE ADVANTAGE (3 CONTRACT MINIMUM)

Gold HMO/Gold Anywhere PPO/USA Care PPO

\$12.50 per contract per month

RXCare Stand Alone PDP

\$3.50 per contract per month

NOTE: Contract must be in force for 3 months before payment is made, i.e. commission for contracts written in January will be paid in April. Pursuant to the CMS Medicare Guidelines, in the event that a Medicare enrollee disenrolls within less than ninety (90) days after enrollment, any payment paid or accrued to broker will be returned to or withheld by MVP. Brokers must be MVP Medicare certified.

MVP DENTAL (FULLY INSURED)

Small Group (2-50) 10%

Large Group (51+) 10%

General provisions regarding MVP's base and bonus compensation program are outlined under the GENERAL PROVISIONS section of this document, located on the back page.

NY OFF-EXCHANGE BASE PROGRAM

GENERAL PROVISIONS

- All groups must meet MVP's eligibility and participation requirement.
- Large group commissions will be paid according to the Schedule unless negotiated.
- Once the annual premiums accumulated for all large group medical products (EPO/PPO, HDHP, HMO/POS) combined reach \$1 million for the calendar year, the commissions will drop to the lower payout amount the first of the next month.
- Any group with annualized premium over \$30 million will pay at \$5.00 per contract per month from first dollar.
- Brokers are paid commission based on the amount of monthly premium paid by each of the broker's group/individual/family contracts.
- Commissions are paid monthly, with the exception of the Bonus Program.
- Negotiated commissions (EPO/PPO, HDHP products only) can range from 0-8% of paid premium. The in-force Broker of Record (BOR) sets the commission rate for the contract year for renewals. For new MVP business, the first broker to quote sets the commission rate for the initial contract year.
- MVP reserves the right, in its sole discretion, to alter or void the compensation programs at any time in response to issues and conditions that affect the corporation, business, marketplace or economy. Entitlement to commission and bonuses is subject to terms and conditions contained in the Broker Agreement. MVP reserves the right to make the final determination of eligibility for case (group/member) credit, premium credit and commission/bonus payments. The forgoing commission rates may be changed at MVP's option on thirty (30) days notice to brokers.



2014 Broker Commission Schedule
Effective January 1, 2014

NEW YORK BROKER BONUS PROGRAM

.....

BONUS ON NET GROWTH

200 member net growth:	\$4,000
500 member net growth:	\$10,000
1,000 member net growth:	\$25,000
1,500 member net growth:	\$40,000
2,000 member net growth:	\$75,000
2,500 member net growth:	\$100,000
3,000+ member net growth:	\$150,000

TO QUALIFY FOR NET GROWTH BONUS

1. An agency with a book of business of 200 or more MVP members (large group HMO/EPO/PPO/HDHP membership) as of 1/1/2014 must maintain 75% retention with existing business. Retention will be based on a membership comparison of book of business on 12/31/2013 (large group HMO/EPO/PPO/HDHP membership) compared to 12/31/2014 book of business (large group HMO/EPO/PPO/HDHP).

OR

2. Agencies with less than 200 MVP members (large group HMO/EPO/PPO/HDHP membership) as of 1/1/2014 can become eligible for net growth bonus after they meet the 200 MVP membership (large group HMO/EPO/PPO/HDHP membership) minimum. Minimum membership requirement must be met by 12/31/14.

BONUS PROVISIONS:

1. Net growth bonus payment will be based on a membership comparison of book of business on 12/31/2013 (large group EPO/PPO/HDHP membership) compared to 12/31/2014 book of business (large group EPO/PPO/HDHP and new small group Off-Exchange). MVP's HMO, Medicare Advantage, HNY Group, Chamber, Association, ASO, NY State of Health™ SHOP and individual On-Exchange and individual Off-Exchange membership are excluded from this bonus program.
2. If a broker loses a group due to a BOR transfer and the group remains enrolled until December 31, the group will be removed entirely from the bonus calculation of the original broker. Neither broker will lose or gain from a midyear Broker of Record change as long as group remains active with MVP as of 12/31/14.
3. Business transfer from non-applicable product lines (ASO, HMO, etc.) is excluded from net growth calculation.

GROUP MEDICARE ADVANTAGE BONUS

51-99 enrolled contracts	\$5,000 per group
100-249 enrolled contracts	\$10,000 per group
250-499 enrolled contracts	\$25,000 per group
500+ enrolled contracts	\$50,000 per group

NOTES:

1. Bonus is based on enrolled contracts for groups with effective dates through 7/1/14.

GENERAL PROVISIONS

- Commissions are paid monthly, with the exception of the Bonus Program.
- Annual bonus payments will be made by April 30, 2015.
- MVP reserves the right, in its sole discretion, to alter or void the compensation programs at any time in response to issues and conditions that affect the corporation, business, marketplace or economy. Entitlement to commission and bonuses is subject to terms and conditions contained in the Broker Agreement. MVP reserves the right to make the final determination of eligibility for case (group/member) credit, premium credit and commission/ bonus payments. The forgoing commission rates may be changed at MVP's option on thirty (30) days notice to brokers.

SERFF Tracking #:

MVPH-129596770

State Tracking #:

2014070116

Company Tracking #:

State:

New York

Filing Company:

MVP Health Plan, Inc.

TOI/Sub-TOI:

HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.003C Large Group Only - HMO

Product Name:

2015 NY Large HMO Rate Submission

Project Name/Number:

/

Supporting Document Schedules

Satisfied - Item:	Actuarial Memorandum/Actuarial Certification
Comments:	Please see attached.
Attachment(s):	2015 MVPHP HMO Rate Filing Actuarial Memo.pdf 2015 Appendix I Derivation of Required Qtrly Inc v2.pdf 2015 Appendix II - SP factor example.pdf
Item Status:	
Status Date:	
Satisfied - Item:	Checklist-Rate Adj Filings per 3231(e)(1) or 4308(c)
Comments:	Please see attached.
Attachment(s):	PA_Rate_Adjustment_Filing_Checklist-20140721.pdf
Item Status:	
Status Date:	
Satisfied - Item:	Consumer Disclosure Form
Comments:	Please refer to the Narrative Summary contained in Standard Exhibit 3.
Attachment(s):	
Item Status:	
Status Date:	
Satisfied - Item:	Final Notice of Proposed Rate Adjustment
Comments:	Please see attached.
Attachment(s):	LARGE NY HMO renewal letter_7-17-14.pdf
Item Status:	
Status Date:	
Satisfied - Item:	Initial Notice of Proposed Rate Adjustment
Comments:	Please see attached.
Attachment(s):	MVPHP Large Group Certificate Holder Template - Rate adjustment notice - initial_v4.pdf MVPHP Large Group Policyholder Template - Rate adjustment notice - initial_v4.pdf
Item Status:	
Status Date:	
Satisfied - Item:	Redacted Documents for Web Posting
Comments:	Please see attached.

SERFF Tracking #:

MVPH-129596770

State Tracking #:

2014070116

Company Tracking #:

State:

New York

Filing Company:

MVP Health Plan, Inc.

TOI/Sub-TOI:

HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.003C Large Group Only - HMO

Product Name:

2015 NY Large HMO Rate Submission

Project Name/Number:

/

Attachment(s):	REDACTED_2015 MVPHP HMO Rate Filing Actuarial Memo.pdf REDACTED_PA_Standard_Exhibit_1-20140721.pdf REDACTED_PA_Standard_Exhibit_1-20140721.xls
Item Status:	
Status Date:	

Satisfied - Item:	Standard Exhibit 1 - General Information
Comments:	Please see attached.
Attachment(s):	PA_Standard_Exhibit_1-20140721.pdf PA_Standard_Exhibit_1-20140721.xls
Item Status:	
Status Date:	

Satisfied - Item:	Standard Exhibit 2 - Summary of Average Claim Trend and Administrative Expenses
Comments:	Please see attached.
Attachment(s):	PA_Standard_Exhibit_2-20140718.pdf PA_Standard_Exhibit_2-20140718.xls
Item Status:	
Status Date:	

Satisfied - Item:	Standard Exhibit 3 - Narrative Summary
Comments:	Please see attached.
Attachment(s):	PA_Standard_Exhibit_3_LargeHMO-20140721.pdf
Item Status:	
Status Date:	

Satisfied - Item:	Standard Exhibit 4 - Part B - Summary of Proposed Percentage Rate Changes
Comments:	Please see attached.
Attachment(s):	PA_Standard_Exhibit_4B-20140721.pdf PA_Standard_Exhibit_4B-20140721.xls
Item Status:	
Status Date:	

Satisfied - Item:	Standard Exhibit 4 - Part D - Summary of Proposed Percentage Rate Changes
Comments:	Please see attached.
Attachment(s):	PA_Standard_Exhibit_4D-20140718.pdf PA_Standard_Exhibit_4D-20140718.xls
Item Status:	
Status Date:	

SERFF Tracking #:

MVPH-129596770

State Tracking #:

2014070116

Company Tracking #:**State:**

New York

Filing Company:

MVP Health Plan, Inc.

TOI/Sub-TOI:

HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.003C Large Group Only - HMO

Product Name:

2015 NY Large HMO Rate Submission

Project Name/Number:

/

Satisfied - Item:	Standard Exhibit 5 - Part B - Distribution of Contracts Affected by Proposed Rate Adjustments
Comments:	Please see attached.
Attachment(s):	PA_Standard_Exhibit_5B-20140721.pdf PA_Standard_Exhibit_5B-20140721.xls
Item Status:	
Status Date:	
Satisfied - Item:	Standard Exhibit 6 - Summary of Policy Form and Product Changes
Comments:	Please see attached.
Attachment(s):	PA_Standard_Exhibit_6-20140708.pdf PA_Standard_Exhibit_6-20140708.xls
Item Status:	
Status Date:	
Satisfied - Item:	Standard Exhibit 7 - Historical Data
Comments:	Please see attached.
Attachment(s):	2015 Lg HMO Standard_Exhibit_7 - 20140721.pdf 2015 Lg HMO Standard_Exhibit_7 - 20140721.xls
Item Status:	
Status Date:	

MVP Health Plan, Inc.
Actuarial Memorandum
Large Group HMO
Policy Forms: 44-CERT-HMO (7/05), CERT-NYSHIP (09/03)

Purpose

The purpose of this rate filing is to request premium rate adjustments to the 2014 premium rates on file for MVP Health Plan's (MVP) HMO product portfolio offered to large employer groups enrolled in "grandfathered" products. The "non grandfathered" products offered in 2014 are being discontinued because they are not compliant with the Federal ACA Out of Pocket benefit mandate effective January 1, 2015. MVP will be filing a new set of non grandfathered products effective January 1, 2015 in a separate policy form and rate filing. The premium rates for the new portfolio will be based on the proposed increases in this filing adjusted for the value of the benefit changes. The requested rate adjustments will take effect beginning on January 1, 2015 upon renewal.

Summary of weighted average proposed rate changes

Market Segment/ Renewal cohort	Avg. 2015 annual change	Avg. 2014 annual change (from 2014 prior approval)	Avg. 2013 annual change (from 2013 prior approval)
Large 1Q15	9.5%	3.1%	5.9%
Large 2Q15	9.8%	2.7%	5.7%
Large 3Q15	10.1%	2.3%	6.7%
Large 4Q15	10.4%	1.9%	5.5%

Market Segment	Avg. quarterly change	Min. quarterly change	Max. quarterly change
Large 1Q15/4Q14	5.61%	5.57%	16.75%
Large 2Q15/1Q15	1.5%	1.5%	1.5%
Large 3Q15/2Q15	1.5%	1.5%	1.5%
Large 4Q15/3Q15	1.5%	1.5%	1.5%

Historical Quarterly rate changes from prior 24 month period

Market Segment	Quarterly Rate Changes
Large 1Q13/4Q12	0%
Large 2Q13/1Q13	1.6%
Large 3Q13/2Q13	1.6%
Large 4Q13/3Q13	1.6%
Large 1Q14/4Q13	-1.7%
Large 2Q14/1Q14	1.2%
Large 3Q14/2Q14	1.2%
Large 4Q14/3Q14	1.2%

Reasons for Rate Changes

Target Loss Ratio

The assumed target loss ratio is one component in the derivation of the premium rates. The target loss ratio reflects the expected percentage of the premium dollar used to pay member's medical and prescription drug claims. The remainder of the premium dollar is used to cover the cost of selling and administering health insurance products as well applicable state and federal taxes and assessments and a risk charge to fund statutory minimum reserve requirements.

The target loss ratio assumed in the premium rate development for the proposed 2015 rates as well as the implied target loss ratio in the previously approved 2014 rates are:

	2014 approved by DFS- Large HMO	Proposed 2015-Large HMO
General Administration/Broker Expense	11.00%	11.00%
Risk Charge	2.00%	2.00%
NYS 332 Assessment	0.70%	0.70%
Federal Taxes/Fees	3.08%	2.70%
Total	16.78%	16.40%
Target Loss Ratio- Traditional definition	83.22%	83.60%

The impact on the requested rate adjustments as a result of this change in the target loss ratio is equal to (0.45%).

Premium Rate Tier Structure and Single Conversion Factor

No changes were made to MVP's premium tier structure.

Variance in projected claim costs from prior rates

Included in the proposed rate adjustment is a component that reflects the adequacy of the current (2014) approved rates relative to the most current projection of 2014 claim expenses for the experience period insured population. Each year premium rates are established based on best estimate projections of future claim costs. Because these are estimates, they will change over time as more information becomes available. Claim costs are difficult to predict with certainty due to the changing composition of the insured population and the uncertainty of how the utilization of health care services will change from year to year. The following table illustrates the estimated impact these variances have on the rate adjustment filing.

2014 approved target loss ratio	83.22%
2014 projected claim expense	438,400,503
2014 Required Revenue based on approved target loss ratio	526,779,662
2013 Earned Premium Standardized to 1Q14	509,223,285
Rating Variance in 2014 Rates contributing to 2015 Rate Increase	3.4%

Regional premium relativity change

MVP is not changing the defined rating regions however we do have a pending service area expansion application to add Westchester County to MVP Health Plan's service area effective January 1, 2015. MVP expects to receive approval of this expansion application. Westchester County will become part of MVP's current New York Metro rating region for large employer group products.

Included in this rate adjustment filing is an increase in the regional premium factor for this region. Premium rates in this region will increase by an additional 10.6%. To maintain a revenue neutral increase across all rating regions the other regions increases will be reduced by 0.04%.

The 10.6% factor increase represents the additional increase needed to restore the New York Metro regional premiums to levels that are aligned with MVP Health Insurance Companies regional factor for this region which reflect the expected higher costs associated with the providers in this region.

Prior to 2013, MVP Health Plan had one Mid-Hudson rate region that combined the current Mid-Hudson East, Mid-Hudson West and New York Metro regions. At the time of the 2013 rate filing, the New York Metro premium rates were increased 5% above the Mid-Hudson factor when they should have been increased by 16.3%; this was done to mitigate the premium increases for the few groups in that region. However, MVP Health Plan may see significant membership growth in this region with the expansion into Westchester County so it is now important to factor in the rest of the correction to this region's premium rates.

Derivation of Required Rate Adjustments

Standardized Premium Development

Standardized Premiums were developed for the reported earned premium as required to by DFS to derive the required rate increase. In addition, Standardized Premiums were computed for the prior 2 experience periods as required for Standard Exhibit 7. The Standardized Premiums were computed using a database of membership and earned premium data for every benefit plan inforce in each of the 3 historical periods. The data was grouped by benefit plan, renewal month and rate region in order to apply the appropriate standardized premium adjustment factors to the earned premium. The premium data was split between pre renewal months and post renewal months. Standardized premium factors by benefit plan by rate region were calculated for every possible cumulative projection period and applied to the earned premium detail. For example, the standardized premium factor to adjust 2011 recorded earned premium for January renewals is equal to the product of all of the filed quarterly increases beginning with 2Q2011 through 4Q2014. For April renewals, the 2011 pre renewal earned premium (Jan - Mar) was multiplied by the cumulative quarterly rate increases beginning with 3Q2010 through 4Q2014. The 2011 post renewal earned premium (April-Dec) was multiplied by the cumulative quarterly rate increases beginning with 3Q2011 through 4Q2014. The earned and computed standardized premiums were rolled up to the policy form level for reporting in Exhibit 7 as well as for the rate development shown in Appendix I. An example of this calculation is illustrated in Appendix II.

Source Data for Claim Projections

Large Group community rated HMO calendar year 2013 fee for service incurred claims paid through March 2014 and completed using IBNR was the basis for the premium rate development. In addition, medical expenses such as capitation payments, New York State claim based taxes and covered life assessments, member based wellness incentives, provider based incentives and other miscellaneous medical expenses associated with calendar year 2013 dates of service for this block of business were included.

The source data for this large group rating pool was considered fully credible with 1,013,535 member months of claim data. The only adjustment made to the experience period claim data was to reflect the PPACA mandate to cover contraceptive drugs in full effective 10/1/12. The rate adjustment for this mandate has already been implemented and is reflected in the 2014 approved rates but the cost of the mandate is not fully reflected in the experience period data.

Appendix I illustrates the derivation of the proposed quarterly rate action for this block of business based on a projection of these historical claims to the 1Q2015 rolling rate period. The projected claim expense was converted to a required premium amount based on the 2015 target loss ratio illustrated above. Comparing this required premium to the computed 4Q2014 standardized premium amount derives the proposed 1Q2015/4Q2014 quarterly rate increase.

Annual Claim Trend Assumptions

Total composite trend factors used to project historical claim date to the rating period of the first quarter rolling rate table are illustrated in Appendix I. Prescription pharmacy rider expense was trended separately from the base policy and associated medical benefit rider claim expense. Medical benefit trend rates reflect both actual and expected increases in hospital and provider reimbursement rates across MVP's entire service area as well as projected increases in the utilization of medical services. Pharmacy trend rates are based on projections from our pharmacy vendor, CVS Caremark.

Rolling Rate Table adjustments for 2Q2015 - 4Q2015

The 1.5% quarterly rate increases assumed for the derivation of the 2Q, 3Q and 4Q rate tables reflect one quarter of the annual fee-for-service medical trend assumed in the claim projection.

Non Claim Expense Components

Standard Exhibit 2 illustrates the current year and prior year non claim expense assumptions included in MVP's proposed rate filings. There is a decrease in the "Other state and federal taxes and assessments" load reflected in 2015 rates. This is due to a reduction in the Federal Temporary Reinsurance Pool assessment from 2014 to 2015. In 2014, this assessment equaled \$5.25 PMPM, and it will equal \$3.67 PMPM in 2015.

Broker expense assumptions are based on MVP's broker modeling projections. It should be noted that for large HMO premium rate development, the assumed broker expense included in the filed community rates reflects the fact that MVP is not permitted to charge the Federal Employee Health Benefit Plan (FEHBP) for this socialized broker expense.

As a result, the portion of premium anticipated to be collected from the FEHBP group is excluded from the computation of the required broker rate load.

Rate Tables

The current year, prior year and percentage change impact for all active products by rate region are illustrated in the separately included rate manual.

Standard Exhibit 7

This exhibit reports on the membership, premium and claim data for the current experience period as well as for the prior 2 experience periods. The source data for the current experience period is based on the same data used in Appendix I to determine the proposed rate adjustment. The source data for the prior 2 experience periods is based on membership, premium and claims as reported in the prior rate adjustment filing Standard Exhibit 7 with updated calculated Standardized Premiums based on current rates on file.

Benefit Schedules Retired Since 2014 Prior approval rate filing

The following grandfathered schedules are being retired effective 01/01/2015 as there is no longer membership enrolled in them: HMOCOC 15L-2, HMOCOC 20L-3, HMOCOC 25/40L-4, HMOCOC 25/40L-5 CA, HMOCOC 25/40L-8HC.

The following non-grandfathered schedules will be retired: HMO COC 2/20 14L, HMO COC 10 14L, HMO COC 10+ 14L, HMO COC 15 14L, HMO COC 15+ 14L, HMO COC 20 14L, HMO COC 20+ 14L, HMO COC 25 14L, HMO COC 25/40 14L, HMO COC 30/50 14L, HMO BASIX 25-40 14L, NDH25/40L14, HMO COC 15-2 14L, HMO COC 20-3 14L, HMOCOC 25/40-3 14L, HMOCOC 25/40-4 14L, HMOCOC 25-2 14L CA, HMO COC 25-40-5 14L CA, HMO COC 30-50-2 14L CA, HMOCOC 30-50 14L-RX, HMOCOC 25 14L-RX. A new portfolio of similar products will be filed to replace them which meet the Federal OOP Max benefit mandate effective 01/01/2015

The riders being retired are as follows: MED501L, MED502L, MED509L, MED511L, MED512, MED514L, MED519F, MED521F, MED522F, MED523L, MED526L, MED527L, MED531L, MED539F, MED540L, MED541L, MED542L, MED543L, MED544L, MED399, DP503L, SD517L, RX516L, RX602L, RX604L, RX606L, RX609L, RX612L, RX613L, RX614L.

Actuarial Certification

This filing is in compliance with all applicable laws and regulations of the State of New York. It is in compliance with ASOP No. 8. The expected loss ratio incorporated into the proposed rate tables meets the minimum requirement of the State of New York by permitted aggregation of policy forms within each permitted aggregation of rating regions. The benefits are reasonable in relation to the premiums charged and the rates are not unfairly discriminatory. The expected loss ratio incorporated into these rate tables is 83.6%.

If you have any questions regarding this filing please contact [REDACTED] or [REDACTED] at [REDACTED]. Thank you.

[REDACTED]

July 21, 2014
Date

MVP Health Care, Inc.

MVP Health Plan, Inc.

Large Group Community Rated HMO

Derivation of Required Quarterly Rate Increase effective 1st Q 2015

Appendix I

		Medical	Rx	Total
Member Months		1,013,535	986,234	1,013,535
2013 Earned Premium	A	\$406,048,695	\$87,495,427	\$493,544,122
Standardized 2013 Earned Premium (4Q2014)	B	\$434,318,753	\$93,457,434	\$527,776,187
Factor Adjustment*		1.070	1.068	1.069
2013 Incurred and paid through March 2014 FFS Incurred Claim Expense	C	322,195,366	\$60,086,972	\$382,282,338
2013 Other Claim Expense	D	28,076,749		\$28,076,749
2013 Total Incurred Medical Expense	E=C+D	\$350,272,115	\$60,086,972	\$410,359,086
Average Annualized Trend Factor (FFS Expense)	F1	6.3%	8.4%	6.6%
Average Annual Trend Factor (Other Claim Expense)	F2	1.3%		1.3%
Projection Period Months	G	25	25	25
2015 Projected Total Incurred Claim Expense	$H=C*(1+F1)^{(G/12)}$	\$366,085,396	\$71,053,248	\$437,138,644
2015 Projected Other Claim Expense	$I=D*(1+F2)^{(G/12)}$	28,844,067		\$28,844,067
2015 Final Projected Total Incurred Claim Expense	J=(H+I)	\$394,929,463	\$71,053,248	\$465,982,711
2015 Federal ACA taxes (PMPM Based)	K			\$3,891,974
2015 Percent Premium Non Claim Expenses	L			15.7%
Projected Required Premium 1Q2015	$M=(J+K)/(1-L)$			\$557,383,968
Target Loss Ratio (Traditional)	N=J/M			83.6%
Target Loss Ratio (Federal)				86.6%
1Q2015/4Q2014 Average Quarterly Increase Required to meet Target Loss Ratio	N=M/B			5.61%

Area Factor Adjustment to account for M2 Regional premium relativity correction

Standardized Premium Example Calculation

Coplan	Rate Region	Renewal Month	Period Year	Pre Members	Pre-Renewal Premium	Pre-Renewal Quarter	Post-Renewal Members	Post-Renewal Prem	Post-Renewal Quarter	Standard Premium
HMOCCOC 10+L	East II	7	2011	3,676	\$1,462,919.21	3Q2010	3,561	\$1,546,985.73	3Q2011	\$3,586,483
HMOCCOC 10+L	East II	7	2012	3,413	\$1,505,208.35	3Q2011	2,482	\$983,171.22	3Q2012	\$2,783,520
HMOCCOC 10+L	East II	7	2013	2,349	\$930,032.70	3Q2012	2,185	\$865,444.10	3Q2013	\$1,917,363

Coplan COC-10+L Historical Rate Change w/ 4Q 2014 Aggregate Change

Quarterly Change	Quarterly Increase	Contract	Aggregate Change
2Q 10 / 1Q 10	1.020	1Q2010	1.305
3Q 10 / 2Q 10	1.020	2Q2010	1.280
4Q 10 / 3Q 10	1.020	3Q2010	1.255
1Q 11 / 4Q 10	1.045	4Q2010	1.230
2Q 11 / 1Q 11	1.020	1Q2011	1.178
3Q 11 / 2Q 11	1.020	2Q2011	1.154
4Q 11 / 3Q 11	1.020	3Q2011	1.132
1Q 12 / 4Q 11	0.971	4Q2011	1.110
2Q 12 / 1Q 12	1.020	1Q2012	1.143
3Q 12 / 2Q 12	1.020	2Q2012	1.120
4Q 12 / 3Q 12	1.028	3Q2012	1.098
1Q 13 / 4Q 12	1.000	4Q2012	1.069
2Q 13 / 1Q 13	1.016	1Q2013	1.069
3Q 13 / 2Q 13	1.016	2Q2013	1.052
4Q 13 / 3Q 13	1.016	3Q2013	1.035
1Q 14 / 4Q 13	0.983	4Q2013	1.019
2Q 14 / 1Q 14	1.012	1Q2014	1.036
3Q 14 / 2Q 14	1.012	2Q2014	1.024
4Q 14 / 3Q 14	1.012	3Q2014	1.012

Explanation of Methodology

Standard Premium for Period Year 2011 $(1,462,919.21 * 1.255) + (1,546,985.73 * 1.132)$
Standard Premium for Period Year 2012 $(1,505,208.35 * 1.132) + (983,171.22 * 1.098)$
Standard Premium for Period Year 2013 $(930,032.7 * 1.098) + (865,444.1 * 1.035)$



625 State Street
 Schenectady, NY 12305
 mvphhealthcare.com

<<DATE>>

HBA Name
 Group Name
 Street
 City, State, Zip

**Re: Notice of <<year>> Premium Rates
 Group ID: <<Group Number>>**

Dear HBA Name:

Thank you for choosing MVP Health Care® to serve you and your employees with high-quality health benefits.

In accordance with requirements set forth by the New York State Department of Financial Services (DFS), MVP Health Care must, upon approval from the DFS, provide written notification of any applicable premium rate changes within 60 days of a group's renewal.

This letter is to inform you that the new premium rates listed below have been approved by DFS, and will be effective beginning <<RENEWAL DATE>>. These benefits **do/do not** meet the Minimum Value requirements of 60% as outlined by the Affordable Care Act (ACA).

CoPlan: COC \$xx/XXL				
Riders				
RXXXX \$XX Generic/\$XX Brand/\$XX Non Formulary				
	Single	Double	Parent/Child(ren)	Family
Current Rates	\$ xxx.xx	n/a	n/a	\$ xxx.xx
New Rates Beginning <<RENEWAL DATE>>	\$ xxx.xx	n/a	n/a	\$ xxx.xx

Please communicate this information to the individual subscribers who receive coverage through this group policy. If you wish to have MVP notify your subscribers directly, you must notify your account representative within three (3) days of receiving this notice.

If you have any questions about your benefits, please call (Account Manager name, number).

Sincerely,

Tracy Tadaro-Ott
 Vice President, Account Management
 MVP Health Plan, Inc.

Enclosure



625 State Street
Schenectady, NY 12305
mvphealthcare.com

Additional Information About Your Group's Upcoming Renewal

The rates on the enclosed renewal letter replace Exhibit E of your contract for the period noted in your letter. If your group has other MVP products, you will receive those rates in a separate letter and they will be in addition to the above.

Your plan is just one of the many available from MVP Health Care. MVP offers a full range of plans—from high-deductible options to EPO and PPO solutions (including TriVantage). Please contact me to discuss your options further.

IMPORTANT: New York State Insurance Law requires that all subscribers must receive written notice of annual premium rate increases, at least 60 days prior to the coverage effective date. Because you decide your employee's contribution levels, MVP is delegating this responsibility to you. This notice must include the specific amount that subscribers will be required to contribute for coverage for the rate period specified.

The Patient Protection and Affordable Care Act ("ACA") includes provisions for the grandfathering of existing health insurance plans which allows groups the opportunity to maintain their existing coverage without being subject to certain provisions of ACA. A grandfathered plan generally is an existing group health plan or health insurance coverage which was in effect on March 23, 2010, as long as the plan has not been changed since that date. Your group health benefit plan might be considered a grandfathered plan. If your plan is a grandfathered plan, changes to the plan could cause it to lose its grandfather status. Please consult your broker or professional counsel (for example attorney or tax advisor) for additional information on whether your health benefit plan is a grandfathered plan, and if so, how changes to your plan could affect your grandfather status.

Thank you for your continued confidence in MVP Health Care. We appreciate the opportunity to help you and your employees take on life and live well! I look forward to hearing from you.



625 State Street, PO Box 2207
 Schenectady, NY 12301-2207
 .mvphealthcare.com

[Date]

[Contact Name]

[Group Name]

[Address]

[City State Zip]

RE: Notice of Proposed Premium Rate Change

Coverage: [Insert Product Name + CoPlan]

Dear [Name]:

MVP Health Plan, Inc. is filing a request with the New York State Department of Financial Services (DFS) to approve a change to your group premium rates for 2015. New York Insurance Law requires that we provide a notice to you when we submit requests for premium rate changes to DFS.

DFS is required by law to review our requested rate change. DFS may approve, modify or disapprove the requested rate change.

Proposed Premium Rate Changes

If approved, the percentage change to your group’s premium is illustrated in the following table:

Policy Effective Date	Filed Premium Rate Adjustment
January 1 - March 31	A%
April 1 - June 30	B%
July 1 - September 30	C%
October 1 - December 31	D%

Please note that while we try to provide you with the most accurate information possible, the final rate may differ based on the benefit plan design and other features that your group policyholder selects on renewal. Also, the final, approved rate may differ because DFS may modify the proposed rate.

If your group’s rate anniversary date is during October, November or December, please note that the proposed increases shown in this letter are for October, November and December **2015**. Groups with renewal dates in October, November and December 2014 will receive a separate notification for your 2014 renewal rate shortly.

Why We Are Requesting a Rate Change

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.

30-day Comment Period

You can contact us or DFS to ask for more information or submit comments to DFS about the proposed rate changes. The comments must be made within 30 days from the date of this notice.

You can contact MVP Health Plan, Inc. for additional information at:

Contact information for employers:

Please contact your MVP Account
Representative or broker
www.mvphealthcare.com

Contact information for members:

MVP Health Plan, Inc.
625 State Street, P.O. Box 2207
Schenectady, NY 12301-2207
1-888-687-6277
1-800-662-1220 (TTY)
www.mvphealthcare.com

Comments or requests for more information on the proposed rate change may be submitted to:

NYS Department of Financial Services
Health Bureau – Premium Rate Adjustments
1 State Street
New York, NY, 10004
Email: **premiumrateincreases@dfs.ny.gov**
DFS Website: **www.dfs.ny.gov/healthinsurancepremiums**

If you choose to submit comments to DFS, please include that your insurer is MVP Health Plan, Inc. and indicate your large group coverage, which is listed in the subject line of this letter. Written comments submitted to DFS will be posted on the DFS website with all your personal information removed.

Plain English Summary of Rate Change

We have prepared a plain-English summary that provides a more detailed explanation of the reasons why a premium rate change is being requested. You can find this information at the following websites:

MVP Health Plan, Inc. website: **www.mvphealthcare.com**
Click *Privacy and Compliance*
at the bottom of the homepage

DFS website: **www.dfs.ny.gov/healthinsurancepremiums**

Notice of Approved Premium Rate

After DFS approves the final premium rate, you will receive final rate information at least 60 days before your 2015 renewal date.

ACTION REQUIRED

All certificate holders (covered employees/retirees) must receive written notice of the proposed rate change described above. It could be confusing for certificate holders to receive the proposed rate adjustment without additional information. For example, the above information does not explain how the rate adjustment could affect employee contribution levels. Because employers determine the employee contribution levels, MVP is delegating the sending of the proposed change notice to you. When sending the notice, you agree to include the proposed

rate change as listed above, along with the above contact information for both the New York State Department of Financial Services and the member contact information for MVP.

If you do not agree to this delegation, please notify us within three (3) business days by emailing us at nysratefilingnotice@mvphealthcare.com so that we may notify your employees directly. Please be sure to include your group name, MVP group billing number and contact information within the email message so that we may do so.

We appreciate your business and look forward to serving you in the future.

Sincerely,

A handwritten signature in black ink that reads "Tracy Tadaró-Ott". The signature is written in a cursive style with a horizontal line extending from the end.

Tracy Tadaró-Ott
Vice President, Account Management
MVP Health Plan, Inc.



625 State Street, PO Box 2207
 Schenectady, NY 12301-2207
 .mvphealthcare.com

[Date]

[Subscriber Name]

[Address]

[City State Zip]

RE: Notice of Proposed Premium Rate Change

Coverage: [Insert Product Name + CoPlan]

Dear [Name],

MVP Health Plan, Inc. is filing a request with the New York State Department of Financial Services (DFS) to approve a change to your premium rates for 2015. New York Insurance Law requires that we provide a notice to you when we submit requests for premium rate changes to DFS.

DFS is required by law to review our requested rate change. DFS may approve, modify or disapprove the requested rate change.

Proposed Premium Rate Changes

If approved, the percentage change to your premium is illustrated in the following table:

Policy Effective Date	Filed Premium Rate Adjustment
January 1 – March 31	A%
April 1 – June 30	B%
July 1 – September 30	C%
October 1 – December 31	D%

Please note that while we try to provide you with the most accurate information possible, the final rate may differ based on the benefit plan design and other features you select on renewal. Also, the final, approved rate may differ because DFS may modify the proposed rate.

If your group’s rate anniversary date is during October, November or December, please note that the proposed increases shown in this letter are for October, November and December **2015**. Groups with renewal dates in October, November and December 2014 will receive a separate notification for your 2014 renewal rate shortly.

Why We Are Requesting a Rate Change

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.

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MVP Health Plan, Inc.
625 State Street, P.O. Box 2207
Schenectady, NY 12301-2207
1-888-687-6277
1-800-662-1220 (TTY)
www.mvphealthcare.com

Comments or requests for more information on the proposed rate change may be submitted to:

NYS Department of Financial Services
Health Bureau – Premium Rate Adjustments
1 State Street
New York, NY, 10004
Email: **premiumrateincreases@dfs.ny.gov**
DFS Website: **www.dfs.ny.gov/healthinsurancepremiums**

If you choose to submit comments to DFS, please include that your insurer is MVP Health Plan, Inc. and indicate your large group coverage, which is listed in the subject line of this letter. Written comments submitted to DFS will be posted on the DFS website with all your personal information removed.

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Plain English Summary of Rate Change

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MVP Health Plan, Inc. website: **www.mvphealthcare.com**
Click *Privacy and Compliance*
at the bottom of the homepage

DFS website: **www.dfs.ny.gov/healthinsurancepremiums**

Notice of Approved Premium Rate

After DFS approves the final premium rate, you will receive final rate information at least 60 days before your 2015 renewal date.

Sincerely,



Tracy Tadar-Ott
Vice President, Account Management
MVP Health Plan, Inc.

MVP Health Plan, Inc.
Actuarial Memorandum
Large Group HMO
Policy Forms: 44-CERT-HMO (7/05), CERT-NYSHIP (09/03)

Purpose

The purpose of this rate filing is to request premium rate adjustments to the 2014 premium rates on file for MVP Health Plan's (MVP) HMO product portfolio offered to large employer groups enrolled in "grandfathered" products. The "non grandfathered" products offered in 2014 are being discontinued because they are not compliant with the Federal ACA Out of Pocket benefit mandate effective January 1, 2015. MVP will be filing a new set of non grandfathered products effective January 1, 2015 in a separate policy form and rate filing. The premium rates for the new portfolio will be based on the proposed increases in this filing adjusted for the value of the benefit changes. The requested rate adjustments will take effect beginning on January 1, 2015 upon renewal.

Summary of weighted average proposed rate changes

Market Segment/ Renewal cohort	Avg. 2015 annual change	Avg. 2014 annual change (from 2014 prior approval)	Avg. 2013 annual change (from 2013 prior approval)
Large 1Q15	9.5%	3.1%	5.9%
Large 2Q15	9.8%	2.7%	5.7%
Large 3Q15	10.1%	2.3%	6.7%
Large 4Q15	10.4%	1.9%	5.5%

Market Segment	Avg. quarterly change	Min. quarterly change	Max. quarterly change
Large 1Q15/4Q14	5.61%	5.57%	16.75%
Large 2Q15/1Q15	1.5%	1.5%	1.5%
Large 3Q15/2Q15	1.5%	1.5%	1.5%
Large 4Q15/3Q15	1.5%	1.5%	1.5%

Historical Quarterly rate changes from prior 24 month period

Market Segment	Quarterly Rate Changes
Large 1Q13/4Q12	0%
Large 2Q13/1Q13	1.6%
Large 3Q13/2Q13	1.6%
Large 4Q13/3Q13	1.6%
Large 1Q14/4Q13	-1.7%
Large 2Q14/1Q14	1.2%
Large 3Q14/2Q14	1.2%
Large 4Q14/3Q14	1.2%

Reasons for Rate Changes

Target Loss Ratio

The assumed target loss ratio is one component in the derivation of the premium rates. The target loss ratio reflects the expected percentage of the premium dollar used to pay member's medical and prescription drug claims. The remainder of the premium dollar is used to cover the cost of selling and administering health insurance products as well applicable state and federal taxes and assessments and a risk charge to fund statutory minimum reserve requirements.

The target loss ratio assumed in the premium rate development for the proposed 2015 rates as well as the implied target loss ratio in the previously approved 2014 rates are:

	2014 approved by DFS- Large HMO	Proposed 2015-Large HMO
General Administration/Broker Expense	11.00%	11.00%
Risk Charge	2.00%	2.00%
NYS 332 Assessment	0.70%	0.70%
Federal Taxes/Fees	3.08%	2.70%
Total	16.78%	16.40%
Target Loss Ratio- Traditional definition	83.22%	83.60%

The impact on the requested rate adjustments as a result of this change in the target loss ratio is equal to (0.45%).

Premium Rate Tier Structure and Single Conversion Factor

No changes were made to MVP's premium tier structure.

Variance in projected claim costs from prior rates

Included in the proposed rate adjustment is a component that reflects the adequacy of the current (2014) approved rates relative to the most current projection of 2014 claim expenses for the experience period insured population. Each year premium rates are established based on best estimate projections of future claim costs. Because these are estimates, they will change over time as more information becomes available. Claim costs are difficult to predict with certainty due to the changing composition of the insured population and the uncertainty of how the utilization of health care services will change from year to year. The following table illustrates the estimated impact these variances have on the rate adjustment filing.

2014 approved target loss ratio	83.22%
2014 projected claim expense	438,400,503
2014 Required Revenue based on approved target loss ratio	526,779,662
2013 Earned Premium Standardized to 1Q14	509,223,285
Rating Variance in 2014 Rates contributing to 2015 Rate Increase	3.4%

Regional premium relativity change

MVP is not changing the defined rating regions however we do have a pending service area expansion application to add Westchester County to MVP Health Plan's service area effective January 1, 2015. MVP expects to receive approval of this expansion application. Westchester County will become part of MVP's current New York Metro rating region for large employer group products.

Included in this rate adjustment filing is an increase in the regional premium factor for this region. Premium rates in this region will increase by an additional 10.6%. To maintain a revenue neutral increase across all rating regions the other regions increases will be reduced by 0.04%.

The 10.6% factor increase represents the additional increase needed to restore the New York Metro regional premiums to levels that are aligned with MVP Health Insurance Companies regional factor for this region which reflect the expected higher costs associated with the providers in this region.

Prior to 2013, MVP Health Plan had one Mid-Hudson rate region that combined the current Mid-Hudson East, Mid-Hudson West and New York Metro regions. At the time of the 2013 rate filing, the New York Metro premium rates were increased 5% above the Mid-Hudson factor when they should have been increased by 16.3%; this was done to mitigate the premium increases for the few groups in that region. However, MVP Health Plan may see significant membership growth in this region with the expansion into Westchester County so it is now important to factor in the rest of the correction to this region's premium rates.

Derivation of Required Rate Adjustments

Standardized Premium Development

Standardized Premiums were developed for the reported earned premium as required to by DFS to derive the required rate increase. In addition, Standardized Premiums were computed for the prior 2 experience periods as required for Standard Exhibit 7. The Standardized Premiums were computed using a database of membership and earned premium data for every benefit plan inforce in each of the 3 historical periods. The data was grouped by benefit plan, renewal month and rate region in order to apply the appropriate standardized premium adjustment factors to the earned premium. The premium data was split between pre renewal months and post renewal months. Standardized premium factors by benefit plan by rate region were calculated for every possible cumulative projection period and applied to the earned premium detail. For example, the standardized premium factor to adjust 2011 recorded earned premium for January renewals is equal to the product of all of the filed quarterly increases beginning with 2Q2011 through 4Q2014. For April renewals, the 2011 pre renewal earned premium (Jan - Mar) was multiplied by the cumulative quarterly rate increases beginning with 3Q2010 through 4Q2014. The 2011 post renewal earned premium (April-Dec) was multiplied by the cumulative quarterly rate increases beginning with 3Q2011 through 4Q2014. The earned and computed standardized premiums were rolled up to the policy form level for reporting in Exhibit 7 as well as for the rate development shown in Appendix I. An example of this calculation is illustrated in Appendix II.

Source Data for Claim Projections

Large Group community rated HMO calendar year 2013 fee for service incurred claims paid through March 2014 and completed using IBNR was the basis for the premium rate development. In addition, medical expenses such as capitation payments, New York State claim based taxes and covered life assessments, member based wellness incentives, provider based incentives and other miscellaneous medical expenses associated with calendar year 2013 dates of service for this block of business were included.

The source data for this large group rating pool was considered fully credible with 1,013,535 member months of claim data. The only adjustment made to the experience period claim data was to reflect the PPACA mandate to cover contraceptive drugs in full effective 10/1/12. The rate adjustment for this mandate has already been implemented and is reflected in the 2014 approved rates but the cost of the mandate is not fully reflected in the experience period data.

Appendix I illustrates the derivation of the proposed quarterly rate action for this block of business based on a projection of these historical claims to the 1Q2015 rolling rate period. The projected claim expense was converted to a required premium amount based on the 2015 target loss ratio illustrated above. Comparing this required premium to the computed 4Q2014 standardized premium amount derives the proposed 1Q2015/4Q2014 quarterly rate increase.

Annual Claim Trend Assumptions

Total composite trend factors used to project historical claim date to the rating period of the first quarter rolling rate table are illustrated in Appendix I. Prescription pharmacy rider expense was trended separately from the base policy and associated medical benefit rider claim expense. Medical benefit trend rates reflect both actual and expected increases in hospital and provider reimbursement rates across MVP's entire service area as well as projected increases in the utilization of medical services. Pharmacy trend rates are based on projections from our pharmacy vendor, CVS Caremark.

Rolling Rate Table adjustments for 2Q2015 - 4Q2015

The 1.5% quarterly rate increases assumed for the derivation of the 2Q, 3Q and 4Q rate tables reflect one quarter of the annual fee-for-service medical trend assumed in the claim projection.

Non Claim Expense Components

Standard Exhibit 2 illustrates the current year and prior year non claim expense assumptions included in MVP's proposed rate filings. There is a decrease in the "Other state and federal taxes and assessments" load reflected in 2015 rates. This is due to a reduction in the Federal Temporary Reinsurance Pool assessment from 2014 to 2015. In 2014, this assessment equaled \$5.25 PMPM, and it will equal \$3.67 PMPM in 2015.

Broker expense assumptions are based on MVP's broker modeling projections. It should be noted that for large HMO premium rate development, the assumed broker expense included in the filed community rates reflects the fact that MVP is not permitted to charge the Federal Employee Health Benefit Plan (FEHBP) for this socialized broker expense.

As a result, the portion of premium anticipated to be collected from the FEHBP group is excluded from the computation of the required broker rate load.

Rate Tables

The current year, prior year and percentage change impact for all active products by rate region are illustrated in the separately included rate manual.

Standard Exhibit 7

This exhibit reports on the membership, premium and claim data for the current experience period as well as for the prior 2 experience periods. The source data for the current experience period is based on the same data used in Appendix I to determine the proposed rate adjustment. The source data for the prior 2 experience periods is based on membership, premium and claims as reported in the prior rate adjustment filing Standard Exhibit 7 with updated calculated Standardized Premiums based on current rates on file.

Benefit Schedules Retired Since 2014 Prior approval rate filing

The following grandfathered schedules are being retired effective 01/01/2015 as there is no longer membership enrolled in them: HMOCOC 15L-2, HMOCOC 20L-3, HMOCOC 25/40L-4, HMOCOC 25/40L-5 CA, HMOCOC 25/40L-8HC.

The following non-grandfathered schedules will be retired: HMO COC 2/20 14L, HMO COC 10 14L, HMO COC 10+ 14L, HMO COC 15 14L, HMO COC 15+ 14L, HMO COC 20 14L, HMO COC 20+ 14L, HMO COC 25 14L, HMO COC 25/40 14L, HMO COC 30/50 14L, HMO BASIX 25-40 14L, NDH25/40L14, HMO COC 15-2 14L, HMO COC 20-3 14L, HMOCOC 25/40-3 14L, HMOCOC 25/40-4 14L, HMOCOC 25-2 14L CA, HMO COC 25-40-5 14L CA, HMO COC 30-50-2 14L CA, HMOCOC 30-50 14L-RX, HMOCOC 25 14L-RX. A new portfolio of similar products will be filed to replace them which meet the Federal OOP Max benefit mandate effective 01/01/2015

The riders being retired are as follows: MED501L, MED502L, MED509L, MED511L, MED512, MED514L, MED519F, MED521F, MED522F, MED523L, MED526L, MED527L, MED531L, MED539F, MED540L, MED541L, MED542L, MED543L, MED544L, MED399, DP503L, SD517L, RX516L, RX602L, RX604L, RX606L, RX609L, RX612L, RX613L, RX614L.

Actuarial Certification

This filing is in compliance with all applicable laws and regulations of the State of New York. It is in compliance with ASOP No. 8. The expected loss ratio incorporated into the proposed rate tables meets the minimum requirement of the State of New York by permitted aggregation of policy forms within each permitted aggregation of rating regions. The benefits are reasonable in relation to the premiums charged and the rates are not unfairly discriminatory. The expected loss ratio incorporated into these rate tables is 83.6%.

If you have any questions regarding this filing please contact [REDACTED] at [REDACTED] or [REDACTED] at [REDACTED]. Thank you.

[REDACTED], FSA, MAAA
Director of Actuarial
MVP Health Care, Inc.

July 21, 2014
Date

EXHIBIT 1: GENERAL INFORMATION ABOUT THE RATE ADJUSTMENT SUBMISSION

A. Insurer Information:	MVP Health Plan, Inc. <small>Company submitting the rate adjustment request</small>	HMO - 44 <small>Company Type</small>	Not-for-Profit <small>Org. Type</small>	95521 <small>Company NAIC Code</small>
	625 State Street, Schenectady, NY 12305 <small>Company mailing address</small>			
B. Contact Person:	[REDACTED] <small>Rate filing contact person name, title</small>	[REDACTED] <small>Contact phone number</small>	[REDACTED] <small>Contact Email address</small>	
C. Actuarial Contact (If different from above):	[REDACTED] <small>Actuary name, title</small>	[REDACTED] <small>Actuary phone number</small>	[REDACTED] <small>Actuary Email address</small>	
D. New Rate Information (See Note #1):	Jan 1 - Dec 31, 2015 <small>New rate applicability period</small>	1/1/2015 <small>New rate effective date</small>	MVPH-129596770 <small>SERFF Tracking Number</small>	
E. Market segments included in filing (e.g., Large Group, Small Group, Sole Proprietors, Individual, Healthy NY, Medicare Supplement):	Large Group			
F. Provide responses for the following questions:	Response			
1. Does this filing include any revision to contract language that is not yet approved? See note (2).	No.			
2. Are there any rate filings submitted and not yet approved that if approved would affect the rate tables included in this rate filing?	No.			
3. Have the initial notices already been sent to all policyholders and contract holders affected by this rate submission? Indicate what cohort of policyholders received the initial notice and the mailing date when the initial notice was sent. See note (3).	Initial notices were sent to groups on 7/21/2014.			
4. Have all the required exhibits been submitted with this rate application? If any exhibit is not applicable, has an explanation been provided why such exhibit is not applicable?	Yes.			
5. Did the company submit a "Prior Approval Prefiling" containing a draft of the initial notice and a draft of the narrative summary associated with this rate filing? Indicate Yes or No, and if Yes, please provide the SERFF number of the prefilling.	Yes. The SERFF ID is MVPH-129622467.			

Notes:

- (1) It is recommended that a rate filing application subject to §3231(e)(1) or §4308(c) of the New York Insurance Law be submitted at least 150 days before the proposed effective date. It is recommended that a rate adjustment application not be submitted more than 180 days prior to the proposed effective date. It is recommended that a rate adjustment application not be submitted less than 125 days prior to the proposed effective date since there is a high probability that a decision on such a filing will not occur in time for the company to send the required final notice to the first renewal cohort affected by the rate adjustment filing.
- (2) A rate adjustment filing submitted pursuant to §3231(e)(1) or §4308(c) of the New York Insurance Law should **not** include any revision to existing contract language or include new contract language. Any rate filing in connection with a form filing, a new form or a revision to an existing form, must be a separate filing from the rate adjustment filing.
Use the following SERFF filing types for rate adjustment filings:
 - * For a rate adjustment filing pursuant to §3231(e)(1): Rate Adjustment pursuant to §3231(e)(1)
 - * For a rate adjustment filing pursuant to §4308(c): Rate Adjustment pursuant to §4308(c)
 - * For all other prior approval filings: Normal Pre-Approval
- (3) §3231(e)(1) and §4308(c) of the New York Insurance Law require that the initial notice to policyholders/subscribers/contract holders be sent on or before the date the rate adjustment application is submitted to the Insurance Department.

EXHIBIT 2: SUMMARY OF AVERAGE CLAIM TREND AND ADMINISTRATIVE EXPENSES INCLUDED IN CURRENT AND PRIOR RATE ADJUSTMENT FILINGS

EXHIBIT 2: SUMMARY OF AVERAGE CLAIM TREND AND ADMINISTRATIVE EXPENSES INCLUDED IN CURRENT AND PRIOR RATE ADJUSTMENT FILINGS

Company Name: MVP Health Plan, Inc.

NAIC Code: 95521

SERFF Number: MVPH-129596770

- A. Complete a separate ROW for each market segment/rating pool combination included in the current rate adjustment filing:
 - Information should be for medical base plans and associated riders combined.
 - Indicate the market segment the rating pool belongs to by using the drop down list. Market segment refers to Individual (IND), Small Group (SG), Sole Proprietor (SP), Large Group (LG), Individual Healthy NY (HNY-IND), Small Group Healthy NY (HNY-SG), Individual Medicare Supplement (MS-IND), Small Group Medicare Supplement (MS-SG), and Large Group Medicare Supplement (MS-LG). If the proposed percentage rate change for Sole Proprietor is different from Small Group, then a separate market segment of Sole Proprietor (SP) is to be reported; otherwise, use small group.
 - Enter a description of the rating pool within the indicated market segment. If the rating pools vary by rating region, the rating pool description should include a region identifier (eg., SG HMO Downstate, SG HMO Upstate).
 - Use a separate row for each market segment/rating pool combination included in the current rate adjustment filing.
 - Append additional rows to the end of the existing rows as needed. Only use the first tab for data entry.
- B. The average claim trend is the average annualized claim trend for that market segment/rating pool used in the applicable rate adjustment filing to project the source data forward to the applicable rating period (eg 10.0%).
- C. Enter the required information for the new rate period included in this rate adjustment filing. This refers to the various expense components included in the proposed rates and the average annual claim trend assumed.
- D. Enter the corresponding information requested for the immediately prior rate adjustment filing. This refers to the various expense components included in the proposed rates submitted with the immediately prior rate adjustment filing and the average claim trend assumed. If there is no immediately prior rate adjustment filing, enter the data from the initial form and rate filing.
- E. This form must be submitted as an Excel file and as a PDF file.

Data Item for Specified Rating Pool																						
For the period included in this rate adjustment filing																						
1. Market Segment	2. Description of rating pool within the market segment	3. Period assumed beginning date (MM/DD/YYYY)	4. Period assumed ending date (MM/DD/YYYY)	5. Average annual claim trend assumed	6.1 Regulatory authority licenses and fees, including New York State 332 assessment expenses as a % of gross premium	Administrative expenses for activities that improve health care quality as defined in the NAIC Annual Statement Supplement Health	6.3 Commissions and broker fees - as a % of gross premium	6.4 Premium Taxes - as a % of gross premium	Other state and federal taxes and assessments (other than income taxes and covered lives assessment) - as a % of gross premium	6.6 Other administrative expenses as a % of gross premium	6.7 Subtotal columns 6.1 through 6.6	7. After tax underwriting margin (profit/contribution to surplus) - as a % of gross premium	8. State income tax component - as a % of gross premium	8.1 State income tax rate assumed (eg 3%)	9. Federal income tax component - as a % of gross premium	9.1 Federal income tax rate assumed (eg 30%)	10. Reduction for assumed net investment income - as a % of gross premium (enter as a negative value)	11. Subtotal columns 6.7 + 7 + 8 + 9 + 10	12.1 New York State 332 assessment expenses - as \$mpm	12.2 Administrative expenses for activities that improve health care quality as defined in the NAIC Annual Statement Supplement Health Care Exhibit - as \$mpm	12.3 Commissions and broker fees - as \$mpm	
LG	Large Group HMO	XX 01/01/15	12/31/15	6.6%	0.7%	0.7%	2.0%	0.0%	2.7%	8.3%	14.40%	2.0%	0.00%	0.00%	0.00%	0.00%	0.00%	16.40%	3.85	3.85	11.00	
		XX									0.00%							0.00%				

EXHIBIT 2: SUMMARY OF AVERAGE CLAIM TREND AND ADMINISTRATIVE EXPENSES INCLUDED IN CURRENT AND PRIOR RATE ADJUSTMENT FILINGS

EXHIBIT 2: SUMMARY (

Company Name
 NAIC Code
 SERFF Number

- A. Complete a separate form for each rating pool.
 - Information should be provided for each rating pool.
 - Indicate the market segment (HNY-IND), Small Group (SMALL), or Large Group (LARGE) percentage rate class.
 - Enter a descriptive title for the rating pool (e.g., "Upstate").
 - Use a separate form for each rating pool.
 - Append additional information to the form.
- B. The average claim trend should be based on the most recent filing to project.
- C. Enter the required information for each rating pool included in the filing.
- D. Enter the corresponding information for each rating pool included in the filing immediately prior to the current filing.
- E. This form must be filed with the rate adjustment filing.

1. Market Segment	2. Description of rating pool within the market segment	12.4 Premium Taxes - as \$mpm	12.5 Other state and federal taxes and assessments (other than income taxes and covered lives assessment) - as \$mpm	12.6 Other administrative expenses - as \$mpm	12.7 Subtotal columns 12.1 through 12.6	13. After tax underwriting margin (profit/contribution to surplus) - as \$mpm	14. State income tax component - as \$mpm	15. Federal income tax component - as \$mpm	16. Reduction for assumed net investment income - as \$mpm (enter as a negative value)	17. Subtotal columns 12.7 through 16
LG	Large Group HMO	0.00	14.84	45.65	79.18	11.00	0.00	0.00	0.00	90.18
					0.00					0.00

EXHIBIT 2: SUMMARY OF AVERAGE CLAIM TREND AND ADMINISTRATIVE EXPENSES INCLUDED IN CURRENT AND PRIOR RATE ADJUSTMENT FILINGS

EXHIBIT 2: SUMMARY (

Company Name
 NAIC Code
 SERFF Number

- A. Complete a separate form for each rating pool.
 - Information should be provided for each rating pool.
 - Indicate the market segment (HNY-IND), Small Business (SMALL), or Percentage Rate Change (PERCENTAGE RATE CHANGE).
 - Enter a descriptive title for the rating pool (e.g., Upstate).
 - Use a separate number for each rating pool.
 - Append additional information to the end of the form.
- B. The average claim trend and administrative expenses included in the immediately prior rate adjustment filing to project the current rate adjustment filing.
- C. Enter the required information for the current rate adjustment filing included in the immediately prior rate adjustment filing.
- D. Enter the corresponding information for the immediately prior rate adjustment filing included in the immediately prior rate adjustment filing.
- E. This form must be completed for each rating pool.

		Data Item for Specified Rating Pool																		
		For the rate period included in the immediately prior rate adjustment filing (or initial form & rate filing)																		
1. Market Segment	2. Description of rating pool within the market segment	18. Period assumed - beginning date (MM/DD/YYYY)	19. Period assumed - ending date (MM/DD/YYYY)	20. Average annual claim trend assumed	21.1 Regulatory authority licenses and fees, including New York State 332 assessment expenses - as a % of gross premium	Administrative expenses for activities that improve health care quality as defined in the NAIC Supplemental Health	21.3 Commissions and broker fees - as a % of gross premium	21.4 Premium Taxes - as a % of gross premium	Other state and federal taxes and assessments (other than income taxes and covered lives assessment) - as a % of gross premium	21.6 Other administrative expenses - as a % of gross premium	21.7 Subtotal columns 21.1 through 21.6	22. After tax underwriting margin (profit/contribution to surplus) - as a % of gross premium	23. State income tax component - as a % of gross premium	23.1 State income tax rate assumed (eg 3%)	24. Federal income tax component - as a % of gross premium	24.1 Federal income tax rate assumed (eg 30%)	25. Reduction for assumed net investment income - as a % of gross premium (enter as a negative value)	26. Subtotal lines 21.7 + 22 + 23 + 24 + 25	27.1 Regulatory authority licenses and fees, including New York State 332 assessment expenses - as \$mpm	Administrative expenses for activities that improve health care quality as defined in the NAIC Annual Statement Supplemental Health Care Exhibit - as \$mpm
LG	Large Group HMO	XX 01/01/14	XX 12/31/14	4.62%	0.7%	0.7%	2.0%	0.0%	3.08%	8.3%	14.78%	2.0%	0.0%	0.0%	0.0%	0.0%	0.0%	16.78%	3.52	3.52
											0.00%							0.00%		

EXHIBIT 2: SUMMARY OF AVERAGE CLAIM TREND AND ADMINISTRATIVE EXPENSES INCLUDED IN CURRENT AND PRIOR RATE ADJUSTMENT FILINGS

EXHIBIT 2: SUMMARY (

Company Name
 NAIC Code
 SERFF Number

- A. Complete a separate form for each rating pool within the market segment.
 - Information should be provided for each rating pool.
 - Indicate the market segment (HNY-IND), Small Business (SMB), or Other (percentage rate of 10% or less).
 - Enter a descriptive name for the rating pool (Upstate).
 - Use a separate name for each rating pool.
 - Append additional information to the form as needed.
- B. The average claim trend should be based on the most recent filing to project the future trend.
- C. Enter the required information for the rating pool included in the filing.
- D. Enter the corresponding information for the rating pool included in the filing immediately prior to the current filing.
- E. This form must be filed with the rate filing.

1. Market Segment	2. Description of rating pool within the market segment	27.3 Commissions and broker fees - as \$mpm	27.4 Premium Taxes - as \$mpm	27.5 Other state and federal taxes and assessments (other than income taxes and covered lives assessments) - as \$mpm	27.6 Other administrative expenses - as \$mpm	27.7 Subtotal lines 27.1 through 27.6	28. After tax underwriting margin (profit/contribution to surplus) - as \$mpm	29. State income tax component - as \$mpm	30. Federal income tax component - as \$mpm	31. Reduction for assumed net investment income - as \$mpm (enter as a negative value)	32. Subtotal columns 27.7 through 31
LG	Large Group HMO	10.05	0.00	15.46	41.70	74.24	10.05	0.00	0.00	0.00	84.29
						0.00					0.00

Exhibit 3 – Narrative Summary

Company Name: MVP Health Plan, Inc.

NAIC Code: 95521

SERFF Tracking #: MVPH-129596770

Market Segment: Large Groups

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.

Claim costs are difficult to predict with certainty due to the changing composition of the insured population and the uncertainty of how the utilization of health care services will change from year to year. As a result, these estimates change over time as more information becomes available. The estimated rating variance in the 2014 rates contributing to the 2015 rate increase is 3.4%.

To project the expected claim expense for the 2015 policy effective dates MVP starts with calendar year 2013 historical claim data and make assumptions regarding the anticipated rise in the unit cost and use of medical services. The expected increase in the unit cost of services is generally known and based on MVP's contract negotiations with the Hospitals and Providers in our network. MVP expects an average annual increase in the unit cost of services equal to approximately 4.2%. For the anticipated increase in the use and intensity of services, MVP assumed an average annual increase of approximately 1.9%.

MVP Health Care will continue to offer a full range of HMO products to large employer groups in 2015 through MVP Health Plan, Inc. MVP has filed with the New York State Department of Financial Services a request to change the current premium rates it charges for these products for policy effective dates between 1/1/2015 and 12/31/15. The requested annual renewal rate increases are 9.4%, 9.7%, 10.1% and 10.4% for the First, Second, Third and Fourth Quarter renewals respectively for all rate regions with the exception of NY Metro. The requested annual renewal rate increases for NY Metro are 21.0%, 21.4%, 21.7% and 22.1% for the First, Second, Third and Fourth Quarter renewals respectively.

The total number of covered members affected by this rate adjustment filing is approximately 16,735. Of these members, only 133 are in the NY Metro rate region and they are all First quarter renewals.

EXHIBIT 4 - PART B: SUMMARY OF PROPOSED PERCENTAGE RATE CHANGE TO EXISTING RATE

-- for Base Medical Plan with ROLLING Rate Structure

MVP Health Plan, Inc.
Company submitting the rate adjustment request

95521
Company NAIC
Code

MVPH-129596770
SERFF tracking number

- => Use this Exhibit for the base medical plan type policy forms/products with ROLLING rate structure that are included in the rate adjustment
- => This form must be submitted as an Excel file and as a PDF file.
- => The format of this exhibit is discussed below. Insert more rows as needed. Only use the first tab for data entry.
- => Group Healthy NY (HNY-SG), Individual Medicare Supplement (MS-INS), and Group Medicare Supplement (MS-GRP). If the proposed percentage rate change for Sole Proprietor is different from Small Group, then a separate market segment of Sole Proprietor (SP) is to be reported; otherwise, use small group. Use the drop down list to enter the market segment.
- => The proposed percentage rate change reflects the expected change in premium rate that would apply to the contract holder on that contract holder's next rate change date for each contract holder with the indicated base medical plan.
- => The effective date is the earliest date that the proposed new rate would become effective if approved. The effective period of a new rolling rate may vary depending on the rolling rate structure (e.g., Q1 2013 for a quarterly rolling rate structure.)
- => The product street name is the product name as advertised to consumers (i.e., as consumers are likely to refer to this product/policy form when communicating with the Department).
- => Provide a list of proposed rate changes for each base medical plan type, by product name/street name. If one policy form is used for more than one product, then a separate row should be entered for each policy form/product name/product street name combination.
- => The "proposed rate change" is just for the base medical product, excluding the impact of any riders.
 - Lowest should be the smallest percentage change that could affect any contract holder due to the proposed rate filing with that base medical product; the impact of riders is not included.
 - Highest should be the largest percentage change that could affect any contract holder due to the proposed rate filing with that base medical product; the impact of riders is not included.
 - The weighted average percentage should be developed based on annualized premium volume for that market segment/rating region/base medical product; the impact of riders is not included.

Base Medical Plan Rolling Rate Products

SERFF# MVPH-129596770

Policy Form #	Market Segment	Rating Region	Product Name	Product Street Name	Effective Date of New Rate	Effective Period of New Rate	Proposed Percentage Rate Change		
							Lowest	Highest	Weighted Avg
44-CERT-HMO (7/05)	Lg	Central I	HMO	HMO	1/1/2015	1Q 2015	9.4%	9.4%	9.4%
44-CERT-HMO (7/05)	Lg	Central II	HMO	HMO	1/1/2015	1Q 2015	9.4%	9.4%	9.4%
44-CERT-HMO (7/05)	Lg	Central III	HMO	HMO	1/1/2015	1Q 2015	9.4%	9.4%	9.4%
44-CERT-HMO (7/05)	Lg	East I	HMO	HMO	1/1/2015	1Q 2015	9.4%	9.4%	9.4%
44-CERT-HMO (7/05)	Lg	East II	HMO	HMO	1/1/2015	1Q 2015	9.4%	9.4%	9.4%
44-CERT-HMO (7/05)	Lg	Mid-Hudson East	HMO	HMO	1/1/2015	1Q 2015	9.4%	9.4%	9.4%
44-CERT-HMO (7/05)	Lg	Mid-Hudson West	HMO	HMO	1/1/2015	1Q 2015	9.4%	9.4%	9.4%
44-CERT-HMO (7/05)	Lg	NY Metro	HMO	HMO	1/1/2015	1Q 2015	21.0%	21.0%	21.0%
44-CERT-HMO (7/05)	Lg	North Country	HMO	HMO	1/1/2015	1Q 2015	9.4%	9.4%	9.4%
44-CERT-HMO (7/05)	Lg	Rochester	HMO	HMO	1/1/2015	1Q 2015	9.4%	9.4%	9.4%
44-CERT-HMO (7/05)	Lg	Central I	HMO	HMO	4/1/2015	2Q 2015	9.7%	9.7%	9.7%
44-CERT-HMO (7/05)	Lg	Central II	HMO	HMO	4/1/2015	2Q 2015	9.7%	9.7%	0.0%
44-CERT-HMO (7/05)	Lg	Central III	HMO	HMO	4/1/2015	2Q 2015	9.7%	9.7%	0.0%
44-CERT-HMO (7/05)	Lg	East I	HMO	HMO	4/1/2015	2Q 2015	9.7%	9.7%	9.7%
44-CERT-HMO (7/05)	Lg	East II	HMO	HMO	4/1/2015	2Q 2015	9.7%	9.7%	9.7%
44-CERT-HMO (7/05)	Lg	Mid-Hudson East	HMO	HMO	4/1/2015	2Q 2015	9.7%	9.7%	0.0%
44-CERT-HMO (7/05)	Lg	Mid-Hudson West	HMO	HMO	4/1/2015	2Q 2015	9.7%	9.7%	9.7%
44-CERT-HMO (7/05)	Lg	NY Metro	HMO	HMO	4/1/2015	2Q 2015	21.4%	21.4%	0.0%

Base Medical Plan Rolling Rate Products

SERFF# MVPH-129596770

Policy Form #	Market Segment	Rating Region	Product Name	Product Street Name	Effective Date of New Rate	Effective Period of New Rate	Proposed Percentage Rate Change		
							Lowest	Highest	Weighted Avg
44-CERT-HMO (7/05)	Lg	North Country	HMO	HMO	4/1/2015	2Q 2015	9.7%	9.7%	0.0%
44-CERT-HMO (7/05)	Lg	Rochester	HMO	HMO	4/1/2015	2Q 2015	9.7%	9.7%	9.7%
44-CERT-HMO (7/05)	Lg	Central I	HMO	HMO	7/1/2015	3Q 2015	10.1%	10.1%	10.1%
44-CERT-HMO (7/05)	Lg	Central II	HMO	HMO	7/1/2015	3Q 2015	10.1%	10.1%	10.1%
44-CERT-HMO (7/05)	Lg	Central III	HMO	HMO	7/1/2015	3Q 2015	10.1%	10.1%	10.1%
44-CERT-HMO (7/05)	Lg	East I	HMO	HMO	7/1/2015	3Q 2015	10.1%	10.1%	10.1%
44-CERT-HMO (7/05)	Lg	East II	HMO	HMO	7/1/2015	3Q 2015	10.1%	10.1%	10.1%
44-CERT-HMO (7/05)	Lg	Mid-Hudson East	HMO	HMO	7/1/2015	3Q 2015	10.1%	10.1%	10.1%
44-CERT-HMO (7/05)	Lg	Mid-Hudson West	HMO	HMO	7/1/2015	3Q 2015	10.1%	10.1%	10.1%
44-CERT-HMO (7/05)	Lg	NY Metro	HMO	HMO	7/1/2015	3Q 2015	21.7%	21.7%	0.0%
44-CERT-HMO (7/05)	Lg	North Country	HMO	HMO	7/1/2015	3Q 2015	10.1%	10.1%	0.0%
44-CERT-HMO (7/05)	Lg	Rochester	HMO	HMO	7/1/2015	3Q 2015	10.1%	10.1%	0.0%
44-CERT-HMO (7/05)	Lg	Central I	HMO	HMO	10/1/2015	4Q 2015	10.4%	10.4%	10.4%
44-CERT-HMO (7/05)	Lg	Central II	HMO	HMO	10/1/2015	4Q 2015	10.4%	10.4%	0.0%
44-CERT-HMO (7/05)	Lg	Central III	HMO	HMO	10/1/2015	4Q 2015	10.4%	10.4%	0.0%
44-CERT-HMO (7/05)	Lg	East I	HMO	HMO	10/1/2015	4Q 2015	10.4%	10.4%	10.4%
44-CERT-HMO (7/05)	Lg	East II	HMO	HMO	10/1/2015	4Q 2015	10.4%	10.4%	0.0%
44-CERT-HMO (7/05)	Lg	Mid-Hudson East	HMO	HMO	10/1/2015	4Q 2015	10.4%	10.4%	10.4%

Base Medical Plan Rolling Rate Products

SERFF# MVPH-129596770

Policy Form #	Market Segment	Rating Region	Product Name	Product Street Name	Effective Date of New Rate	Effective Period of New Rate	Proposed Percentage Rate Change		
							Lowest	Highest	Weighted Avg
44-CERT-HMO (7/05)	Lg	Mid-Hudson West	HMO	HMO	10/1/2015	4Q 2015	10.4%	10.4%	10.4%
44-CERT-HMO (7/05)	Lg	NY Metro	HMO	HMO	10/1/2015	4Q 2015	22.1%	22.1%	0.0%
44-CERT-HMO (7/05)	Lg	North Country	HMO	HMO	10/1/2015	4Q 2015	10.4%	10.4%	0.0%
44-CERT-HMO (7/05)	Lg	Rochester	HMO	HMO	10/1/2015	4Q 2015	10.4%	10.4%	0.0%

EXHIBIT 4 - PART D: SUMMARY OF PROPOSED PERCENTAGE RATE CHANGE TO EXISTING RATE

- for Drug Riders Available with Base Medical Products (ROLLING Rate Structure)

MVP Health Plan, Inc.
 Company submitting the rate adjustment request

95521
 Company NAIC
 Code

MVPH-129596770
 SERFF tracking number

- => Use this Exhibit for the Drug Riders that are available for the base medical plan type policy forms/products with a ROLLING rate structure included in the rate adjustment submission.
- => The format of this exhibit is discussed below. Add more rows as needed. Only use the first tab for data entry.
- => This form must be submitted as an Excel file and as a PDF file.
- => Market segment refers to Individual (IND), Small Group (SG), Sole Proprietor (SP), Large Group (LG), Individual Healthy NY (HNY-IND), Small Group Healthy NY (HNY-SG), Individual Medicare Supplement (MS-INS), and Group Medicare Supplement (MS-GRP). If the proposed percentage rate change for Sole Proprietor is different from Small Group, then a separate market segment of Sole Proprietor (SP) is to be reported; otherwise, use small group. Use the drop down list to enter the market segment.
- => The proposed percentage rate change reflects the expected change in premium rate that would apply to the contract holder on that contract holder's next rate change date for each contract holder with the indicated base medical plan. The effective date is the earliest date that proposed rate change will become effective. The effective period of a new rolling rate may vary depending on the rolling rate structure (e.g., Q1 2013 for a quarterly rolling
- => The product street name is the product name as advertised to consumers (i.e., as consumers are likely to refer to this product/policy form when communicating with the Department).
- => Provide a list of proposed rate changes for drug riders available with rolling rate base medical products. If one policy form is used for more than one product, then a separate row should be entered for each policy form/product name/product street name combination.
- => The "proposed percentage rate change" is just for the drug riders available with the indicated base medical product and excludes the impact of the base medical plan rates and non-drug riders.
 The lowest, highest, and weighted average are just among the drug riders available to the indicated base medical product.
- => This is for the traditional drug riders, but not for minor drug related riders such as the inclusion of oral contraceptives.

Drug Riders Available With Rolling Rate Base Medical Products

SERFF:

MVPH-129596770

Base Medical Policy Form #	Market Segment	Rating Region	Drug Rider	Base Medical Product Name	Effective Date of New Rate	Effective Period of New Rate	Proposed Percentage Rate Change		
							Lowest	Highest	Weighted Avg
44-CERT-HMO (7/05)	LG	All Rate Regions	RX502L, RX504L, RX505L, RX512L, RX605L	HMO	1/1/2015	1Q 2015	9.5%	9.5%	9.5%
44-CERT-HMO (7/05)	LG	All Rate Regions	RX502L, RX504L, RX505L, RX512L, RX605L	HMO	4/1/2015	2Q 2015	9.8%	9.8%	9.8%
44-CERT-HMO (7/05)	LG	All Rate Regions	RX502L, RX504L, RX505L, RX512L, RX605L	HMO	7/1/2015	3Q 2015	10.1%	10.1%	10.1%
44-CERT-HMO (7/05)	LG	All Rate Regions	RX502L, RX504L, RX505L, RX512L, RX605L	HMO	10/1/2015	4Q 2015	10.4%	10.4%	10.4%

EXHIBIT 5 - PART B: DISTRIBUTION OF CONTRACTS AFFECTED BY PROPOS

Company Name: MVP Health Plan, Inc.
NAIC Code: 95521
SERFF Tracking #: MVPH-129596770

Instructions:

- 1) The percentage rate change reflects the impact of all riders that apply to the contracts. The percentage rate change reflects the expected change.
- 2) The effective date is the earliest date that the proposed new rate would become effective if approved. The effective period of a new rolling rate is the period of time that the rate is in effect.
- 3) The distribution is by number of members or number of contracts. The Company should fill in the appropriate column below (members or contracts).
- 4) The Weighted Average Percentage should be developed based on the distribution of annualized premiums for that Market Segment/Rating Region.
- 5) Market segment refers to Individual (IND), Small Group (SG), Sole Proprietor (SP), Large Group (LG), Individual Healthy NY (HNY-IND), Small Group (SG). If the percentage rate change for Sole Proprietor is different from Small Group, then a separate market segment of Sole Proprietor (SP) is to be reported.
- 6) Under each market segment, the table should provide the distribution by broad product type (e.g., HMO, POS, EPO, PPO, Indemnity, High Deductible). If a contract is affected by more than one product type, it should be reported in each applicable product type.
- 7) Provide distribution information for each rolling rate cohort of a rolling rate structure contract affected by this rate submission (e.g., by quarter of year).
- 8) Edit the worksheet to add more rows as needed. Only use the first tab for data entry.
- 9) After each effective period/market segment combination there should be a market segment total row. Enter Total in the "Product" column, the sum of the weighted average percentage, the sum of the annualized premiums, the sum of the total number of members, and the sum of the total number of contracts.
- 10) This exhibit must be submitted as an Excel file and a PDF file.

FOR ROLLING RATE STRUCTURE PRODUCTS - Distribution of Rolling Rate Contracts by Proposed Rate Adjustment by Each Rolling Rate Cohort

Effective Date	Effective Period	Market Segment	Rating Region	Product	Weighted Avg %	Annualized Premiums as of	Total # of Members as of	Total # of Contracts as of	Decrease	No Change
						6/15/2014				
1/1/2015	1Q 2015	LG	Central I	HMO	9.4%	\$ 1,405,077	200	103		
1/1/2015	1Q 2015	LG	Central II	HMO	9.4%	\$ 5,479,642	784	509		
1/1/2015	1Q 2015	LG	Central III	HMO	9.4%	\$ 4,364,259	676	298		
1/1/2015	1Q 2015	LG	East I	HMO	9.4%	\$ 8,734,792	1,341	679		
1/1/2015	1Q 2015	LG	East II	HMO	9.4%	\$ 8,586,256	1,295	607		
1/1/2015	1Q 2015	LG	NY Metro	HMO	19.1%	\$ 989,485	133	52		
1/1/2015	1Q 2015	LG	Mid-Hudson East	HMO	9.4%	\$ 27,460,368	3,527	1,621		
1/1/2015	1Q 2015	LG	Mid-Hudson West	HMO	9.4%	\$ 12,343,745	1,800	893		
1/1/2015	1Q 2015	LG	North Country	HMO	9.4%	\$ 8,360	1	1		
1/1/2015	1Q 2015	LG	Rochester	HMO	9.4%	\$ 2,836,037	503	277		
		Market Segment Total:			9.6%	\$ 72,208,020	10,260	5,040	0	0

FOR ROLLING RATE STRUCTURE PRODUCTS - Distribution of Rolling Rate Contracts by Proposed Rate Adjustment by Each Rolling Rate Cohort

Effective Date	Effective Period	Market Segment	Rating Region	Product	Weighted Avg %	Annualized Premiums as of	Total # of Members as of	Total # of Contracts as of	Decrease	No Change
						6/15/2014				
4/1/2015	2Q 2015	LG	Central I	HMO	9.8%	\$ 166,519	18	18		
4/1/2015	2Q 2015	LG	Central II	HMO	0.0%	\$ -	0	0		
4/1/2015	2Q 2015	LG	Central III	HMO	0.0%	\$ -	0	0		
4/1/2015	2Q 2015	LG	East I	HMO	9.8%	\$ 933,431	133	70		
4/1/2015	2Q 2015	LG	East II	HMO	9.7%	\$ 17,555	4	1		
4/1/2015	2Q 2015	LG	NY Metro	HMO	0.0%	\$ -	0	0		
4/1/2015	2Q 2015	LG	Mid-Hudson East	HMO	0.0%	\$ -	0	0		
4/1/2015	2Q 2015	LG	Mid-Hudson West	HMO	9.8%	\$ 172,551	20	14		
4/1/2015	2Q 2015	LG	North Country	HMO	0.0%	\$ -	0	0		
4/1/2015	2Q 2015	LG	Rochester	HMO	9.8%	\$ 2,176,645	398	202		
		Market Segment Total:			9.7%	\$ 3,466,700	573	305	0	0
7/1/2015	3Q 2015	LG	Central I	HMO	10.1%	\$ 2,599,216	379	198		
7/1/2015	3Q 2015	LG	Central II	HMO	10.1%	\$ 1,158,174	168	102		
7/1/2015	3Q 2015	LG	Central III	HMO	10.1%	\$ 573,709	83	50		
7/1/2015	3Q 2015	LG	East I	HMO	10.1%	\$ 8,712,645	1,322	555		
7/1/2015	3Q 2015	LG	East II	HMO	10.1%	\$ 3,404,440	497	177		
7/1/2015	3Q 2015	LG	NY Metro	HMO	0.0%	\$ -	0	0		
7/1/2015	3Q 2015	LG	Mid-Hudson East	HMO	10.1%	\$ 18,104,540	2,181	1,041		
7/1/2015	3Q 2015	LG	Mid-Hudson West	HMO	10.1%	\$ 9,137,166	1,205	551		
7/1/2015	3Q 2015	LG	North Country	HMO	0.0%	\$ -	0	0		
7/1/2015	3Q 2015	LG	Rochester	HMO	0.0%	\$ -	0	0		
		Market Segment Total:			10.1%	\$ 43,689,891	5,835	2,674	0	0
12/1/2015	4Q 2015	LG	Central I	HMO	10.4%	\$ 24,393	5	1		
12/1/2015	4Q 2015	LG	Central II	HMO	0.0%	\$ -	0	0		
12/1/2015	4Q 2015	LG	Central III	HMO	0.0%	\$ -	0	0		
12/1/2015	4Q 2015	LG	East I	HMO	10.4%	\$ 8,586	1	1		
12/1/2015	4Q 2015	LG	East II	HMO	0.0%	\$ -	0	0		
12/1/2015	4Q 2015	LG	NY Metro	HMO	0.0%	\$ -	0	0		
12/1/2015	4Q 2015	LG	Mid-Hudson East	HMO	10.4%	\$ 75,888	11	3		
12/1/2015	4Q 2015	LG	Mid-Hudson West	HMO	10.4%	\$ 315,113	50	19		
12/1/2015	4Q 2015	LG	North Country	HMO	0.0%	\$ -	0	0		
12/1/2015	4Q 2015	LG	Rochester	HMO	0.0%	\$ -	0	0		
		Market Segment Total:			10.4%	\$ 423,980	67	24	0	0

ED RATE ADJUSTMENTS for ROLLING Rate Structured Products

je in premium that would apply to the contract holder on that contract holder's next rate change date.

may vary depending on the rolling rate structure (e.g., Q1 2013 for a quarterly rolling rate structure)

icts) and replace the mm/dd/yy placeholder with the applicable as of date.

on/Product and for the market segment in total.

Group Healthy NY (HNY-SG), Individual Medicare Supplement (MS-INS), and Group Medicare Supplement (MS-GRP). If the proposed ed;otherwise, use small group. Use the drop down list to enter the market segment.

ctible/Consumer Driven, Medicare Supplement, etc.).

renewal for a quarterly rolling rate structure).

m of the counts in the various columns, and the market segment weighted avg %.

SERFF#: MVPH-129596770

Number of Contracts with Proposed Percentage Rate Change at Renewal								
0.1% - 4.9%	5.0% - 9.9%	10.0% - 14.9%	15.0% - 19.9%	20.0% - 24.9%	25.0% - 29.9%	30.0% - 39.9%	40.0% - 49.9%	50.0% or higher
	103							
	509							
	298							
	679							
	607							
			52					
	1,621							
	893							
	1							
	277							
0	4,988	0	52	0	0	0	0	0

Number of Contracts with Proposed Percentage Rate Change at Renewal								
0.1% - 4.9%	5.0% - 9.9%	10.0% - 14.9%	15.0% - 19.9%	20.0% - 24.9%	25.0% - 29.9%	30.0% - 39.9%	40.0% - 49.9%	50.0% or higher
	18							
	70							
	1							
	14							
	202							
0	305	0						
		198						
		102						
		50						
		555						
		177						
		1,041						
		551						
0	0	2,674	0	0	0	0	0	0
		1						
		1						
		3						
		19						
0	0	24	0	0	0	0	0	0

EXHIBIT 6: SUMMARY OF POLICY FORM AND PRODUCT CHANGES

Company Name: MVP Health Plan, Inc.

NAIC Code: 95521

SERFF Number: MVPH-129596770

Instructions:

- This Exhibit summarizes all benefit/rate changes filed under sections other than §3231(e)(1)/4308(c) that impact the rate tables in this filing.
- The product street name is the product name as advertised to consumers (i.e., as consumers are likely to refer to this product/policy form when communicating with the Department).
- Enter filing status (approved or pending) using the drop down list. For pending files leave the approval date blank.
- Extend the worksheet to add more rows as needed. Only use the first tab for data entry.

List of rate filings that have been approved since the prior §3231(e)(1) or §4308(c) rate filing or are currently pending with the Department, which impact the rate tables in this filing.

Filing Status	SERFF #	NY State Tracking #	Date of Submission	Policy Form #	Product Name (including Street Name)	Brief Description of Benefit/Rate Change	Approval Date
	None						

EXHIBIT 7: HISTORICAL DATA BY EACH POLICY FORM INCLUDED IN RATE ADJUSTMENT FILING

EXHIBIT 7: HISTORICAL DATA BY EACH POLICY FORM INCLUDED IN RATE ADJUSTMENT FILING

Company Name: MVP Health Plan, Inc.

NAIC Code: 95521

SERFF Number: MVPH-129596770

- A. Complete a separate ROW for each base medical policy form included in the rate adjustment filing, even if no rate adjustment is proposed for that base medical policy form.
 - Information requested applies to New York State business only.
 - Include riders that may be available with that policy form in each policy form response.
 - Insert additional rows as needed to include all base medical policy forms included in a particular rating pool.
 - Add a row with the aggregate values for that entire rating pool and enter an appropriate identifier in column 1a. Skip a row between the different rating pools.
- B. In Column 2 enter a Rating Pool Identifier for the rating pool the policy form belongs to, such as SG HMO, or SG HMO Upstate if rating pools vary by rating region.
- C. Market segment refers to Individual (IND), Small Group (SG), Sole Proprietor (SP), Large Group (LG), Individual Healthy NY (HNY-IND), Small Group Healthy NY (HSG-IND), Medicare Supplement (MS-GRP). If the proposed percentage rate change for Sole Proprietor is different from Small Group, then a separate market segment of Sole P is required. Use the drop down list to enter the market segment.
- D. Product type is HMO, HMO based POS, POS-OON, EPO, PPO, Comprehensive Major Medical, Non-HMO based POS, Consumer Health Plans, Hospital Only, Medical Limited Benefit, Medicare Supplement (A, B, C, D, E, F Basic, F High, G, H, I, J Basic, J High, K, L, M, N, or Other - indicate appropriate designation for policy form), etc
- E. The product street name is the product name as advertised to consumers (i.e., as consumers are likely to refer to this product/policy form when communicating with the consumer).
- F. Note that many cells include a drop down list. Use the drop down list for entries.
- G. If members, covered lives or member months are not known, use reasonable estimates (note methodology used in the actuarial memorandum).
- H. This form must be submitted as an Excel file and as a PDF file. Only use the first tab for data entry.

EXHIBIT 7: HISTORICAL DATA BY EACH POLICY FORM INCLUDED IN RATE ADJUSTMENT FILING

Data Item for Specified Base Medical Policy Form										
1a. Base medical policy form number	1b. Product Name as in Rate Manual	1c. Product Street Name as indicated to consumers	2. Rating Pool Identifier	3. Effective date of rate change (MM/DD/YY)	4. Market Segment [drop down menu]	5. Product type (see above for examples) [drop down menu]	6. Is a rolling rate structure used for this base medical policy form? (Yes or No) [drop down menu]	7. Has base medical policy form aggregation changed from previous filing? (Yes or No) [drop down menu]	8. Is base medical policy form open (new sales allowed) or closed (no new sales) [drop down menu]	9. Rate guarantee period incorporated into rate tables (months) (e.g., 12, for a 12 month rate guarantee period; or 0, if no rate guarantee period.)
44-CERT-HMO (7/05), CERT- NYSHIP(09/03)	HMO	HMO	LG HMO	01/01/15	LG	HMO	Yes	No	Closed	12

EXHIBIT 7: HISTORICAL DATA BY EACH POLICY FORM INCLUDED IN RATE ADJUSTMENT FILING

EXHIBIT 7:

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- C. Market segmer(NY-SG), Individual Medicare Supplement (MS-IND), and Group Medicare Supproprietor (SP) is to be reported; otherwise, use small group. Use the drop down l
- D. Product type is Only, Base+Supplemental, Supplementary Major Medical, Other Limited Benefit,.
- E. The product strDepartment). Include a region identifier in this column if needed.
- F. Note that many
- G. If members, co
- H. This form must

EXHIBIT 7: HISTORICAL DATA BY EACH POLICY FORM INCLUDED IN RATE ADJUSTMENT FILING

1a. Base medical policy form number	1b. Product Name as in Rate Manual	10. Weighted average rate change % proposed across base medical policy form from current rate charged policyholder (including all associated riders)	11. Number of policyholders affected by rate change. (For group business this is number of groups.)	12. Number of covered lives affected by rate change	13. Expected NY statewide loss ratio for base medical policy form including associated riders
44-CERT-HMO (7/05), CERT- NYSHIP(09/03)	HMO	9.46%	120	16,735	83.6%

EXHIBIT 7: HISTORICAL DATA BY EACH POLICY FORM INCLUDED IN RATE ADJUSTMENT FILING

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EXHIBIT 7: HISTORICAL DATA BY EACH POLICY FORM INCLUDED IN RATE ADJUSTMENT FILING

			Most R (NY statewide experience, b								
1a. Base medical policy form number	1b. Product Name as in Rate Manual		14.1 Beginning Date of the experience period (MM/DD/YY)	14.2 Ending Date of the experience period (MM/DD/YY)	14.3 Member months for experience period	14.4 Earned premiums for experience period (\$)	14.5 Standardized earned premiums for experience period (\$)	14.6 Paid claims for experience period - before any adjustment for amounts received from the standard direct pay and Healthy NY stop loss pools and before any adjustment for receipts from or payments to the Regulation 146 pool (\$)	14.7 Incurred claims for experience period - before any adjustment for amounts received from the standard direct pay and Healthy NY stop loss pools and before any adjustment for receipts from or payments to the Regulation 146 pool (\$)	14.8 Adjustment to the incurred claims for the period due to receipts from the standard direct pay or Healthy NY stop loss pools (enter receipts from the pool as a negative value) (\$)	14.9 Adjustment to the incurred claims for the period due to receipts from or payments to the Regulation 146 pool (enter receipts as a negative value and payments to the pool as a positive value) (\$)
44-CERT-HMO (7/05), CERT- NYSHIP(09/03)	HMO		01/01/13	12/31/13	1,013,535	\$493,544,122	\$527,776,187	\$409,558,556	\$418,515,094	0	0

EXHIBIT 7: HISTORICAL DATA BY EACH POLICY FORM INCLUDED IN RATE ADJUSTMENT FILING

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EXHIBIT 7: HISTORICAL DATA BY EACH POLICY FORM INCLUDED IN RATE ADJUSTMENT FILING

Recent Experience Period (Base medical policy form + associated riders)													
1a. Base medical policy form number	1b. Product Name as in Rate Manual	14.10 Administrative expenses for experience period (including commissions and premium taxes, but excluding federal and state income taxes) (\$)	14.11 Earned premiums for experience period (\$mpm)	14.12 Standardi zed premiums for experience period (\$mpm)	14.13 Paid claims for experience period - before any adjustment for amounts received from the standard direct pay and Healthy NY stop loss pools and before any adjustment for receipts from or payments to the Regulation 146 pool (\$mpm)	14.14 Incurred claims for experience period - before any adjustment for amounts received from the standard direct pay and Healthy NY stop loss pools and before any adjustment for receipts from or payments to the Regulation 146 pool (\$mpm)	14.15 Adjustment to the incurred claims for the period due to receipts from the standard direct pay or Healthy NY stop loss pools (enter receipts from the pool as a negative value) (\$mpm)	14.16 Adjustment to the incurred claims for the period due to receipts from or payments to the Regulation 146 pool (enter receipts as a negative value and payments to the pool as a positive value) (\$mpm)	14.17 Administrativ e expenses for experience period (including commissions and premium taxes, but excluding federal and state income taxes) (\$mpm)	14.18 Ratio: Col 14.7/ Col 14.4 (Incurred Claims / Earned Premiums)	14.19 Ratio: Col 14.7/ Col 14.5 (Incurred Claims / Standardiz ed Earned Premiums)	14.20 Ratio:Col 14.10/ Col 14.4 (Administrat ion Expenses / Earned Premiums)	14.21 Ratio: (Col 14.7 + Col 14.8 + Col 14.9 + Col 14.10) / Col 14.4
44-CERT-HMO (7/05), CERT- NYSHIP(09/03)	HMO	\$51,467,028	486.95	520.73	404.09	412.93	0.00	0.00	50.78	0.848	0.793	0.104	0.952

EXHIBIT 7: HISTORICAL DATA BY EACH POLICY FORM INCLUDED IN RATE ADJUSTMENT FILING

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EXHIBIT 7: HISTORICAL DATA BY EACH POLICY FORM INCLUDED IN RATE ADJUSTMENT FILING

		First Prior Exper (NY statewide experience, base medic									
1a. Base medical policy form number	1b. Product Name as in Rate Manual	15.1 Beginning date of the experience period (MM/DD/YY)	15.2 Ending Date of the experience period (MM/DD/YY)	15.3 Member months for experience period	15.4 Earned premiums for experience period (\$)	15.5 Standardized earned premiums for experience period (\$)	15.6 Paid claims for experience period - before any adjustment for amounts received from the standard direct pay and Healthy NY stop loss pools and before any adjustment for receipts from or payments to the Regulation 146 pool (\$)	15.7 Incurred claims for experience period - before any adjustment for amounts received from the standard direct pay and Healthy NY stop loss pools and before any adjustment for receipts from or payments to the Regulation 146 pool (\$)	15.8 Adjustment to the incurred claims for the period due to receipts from the standard direct pay or Healthy NY stop loss pools (enter receipts from the pool as a negative value) (\$)	15.9 Adjustment to the incurred claims for the period due to receipts from or payments to the Regulation 146 pool (enter receipts as a negative value and payments to the pool as a positive value) (\$)	15.10 Administrati ve expenses for experience period (including commissio ns and premium taxes, but excluding federal and state income taxes) (\$)
44-CERT-HMO (7/05), CERT- NYSHIP(09/03)	HMO	01/01/12	12/31/12	1,096,830	\$511,005,750.99	\$582,324,888.76	\$432,274,581	\$428,621,387	0	0	49,495,356

EXHIBIT 7: HISTORICAL DATA BY EACH POLICY FORM INCLUDED IN RATE ADJUSTMENT FILING

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EXHIBIT 7: HISTORICAL DATA BY EACH POLICY FORM INCLUDED IN RATE ADJUSTMENT FILING

ience Period al policy form + associated riders)												
1a. Base medical policy form number	1b. Product Name as in Rate Manual	15.11 Earned premiums for experienc e period (\$pmpm)	15.12 Standardi zed premiums for experienc e period (\$pmpm)	15.13 Paid claims for experience period - before any adjustment for amounts received from the standard direct pay and Healthy NY stop loss pools and before any adjustment for receipts from or payments to the Regulation 146 pool (\$pmpm)	15.14 Incurred claims for experience period before any adjustment for amounts received from the standard direct pay and Healthy NY stop loss pools and before any adjustment for receipts from or payments to the Regulation 146 pool (\$pmpm)	15.15 Adjustment to the incurred claims for the period due to receipts from the standard direct pay or Healthy NY stop loss pools (enter receipts from the pool as a negative value) (\$pmpm)	15.16 Adjustment to the incurred claims for the period due to receipts from or payments to the Regulation 146 pool (enter receipts as a negative value and payments to the pool as a positive value) (\$pmpm)	15.17 Administrative expenses for experience period (including commissions and premium taxes, but excluding federal and state income taxes) (\$pmpm)	15.18 Ratio: Col 15.7/ Col 15.4 (Incurred Claims / Earned Premiums)	15.19 Ratio: Col 15.7/ Col 15.5 (Incurred Claims / Standardize d Earned Premiums)	15.20 Ratio: Col 15.10/ Col 15.4 (Administrati on Expenses / Earned Premiums)	15.21 Ratio: (Col 15.7 + Col 15.8 + Col 15.9 + Col 15.10) / Col 15.4
44-CERT-HMO (7/05), CERT- NYSHIP(09/03)	HMO	465.89	530.92	394.11	390.78	0.00	0.00	45.13	0.839	0.736	0.097	0.936

EXHIBIT 7: HISTORICAL DATA BY EACH POLICY FORM INCLUDED IN RATE ADJUSTMENT FILING

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		Secor (NY statewide experience,									
1a. Base medical policy form number	1b. Product Name as in Rate Manual		16.1 Beginning date of the experie nce period (MM/DD/Y Y)	16.2 Ending Date of the experience period (MM/DD/YY)	16.3 Member months for experience period	16.4 Earned premiums for experience period (\$)	16.5 Standardized earned premiums for experience period (\$)	16.6 Paid claims for experience period - before any adjustment for amounts received from the standard direct pay and Healthy NY stop loss pools and before any adjustment for receipts from or payments to the Regulation 146 pool (\$)	16.7 Incurred claims for experience period - before any adjustment for amounts received from the standard direct pay and Healthy NY stop loss pools and before any adjustment for receipts from or payments to the Regulation 146 pool (\$)	16.8 Adjustment to the incurred claims for the period due to receipts from the standard direct pay or Healthy NY stop loss pools (enter receipts from the pool as a negative value) (\$)	16.9 Adjustment to the incurred claims for the period due to receipts from or payments to the Regulation 146 pool (enter receipts as a negative value and payments to the pool as a positive value) (\$)
44-CERT-HMO (7/05), CERT- NYSHIP(09/03)	HMO		01/01/11	12/31/11	1,063,919.00	\$474,099,333.00	\$618,115,852.47	\$412,454,828.00	\$400,953,932.00	0	0

EXHIBIT 7: HISTORICAL DATA BY EACH POLICY FORM INCLUDED IN RATE ADJUSTMENT FILING

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EXHIBIT 7: HISTORICAL DATA BY EACH POLICY FORM INCLUDED IN RATE ADJUSTMENT FILING

id Prior Experience Period base medical policy form + associated riders)													
1a. Base medical policy form number	1b. Product Name as in Rate Manual	16.10 Administrative expenses for experience period (including commissions and premium taxes, but excluding federal and state income taxes) (\$)	16.11 Earned premiums for experienc e period (\$mpm)	16.12 Standardi zed premiums for experienc e period (\$mpm)	16.13 Paid claims for experience period - before any adjustment for amounts received from the standard direct pay and Healthy NY stop loss pools and before any adjustment for receipts from or payments to the Regulation 146 pool (\$mpm)	16.14 Incurred claims for experience period - before any adjustment for amounts received from the standard direct pay and Healthy NY stop loss pools and before any adjustment for receipts from or payments to the Regulation 146 pool (\$mpm)	16.15 Adjustment to the incurred claims for the period due to receipts from the standard direct pay or Healthy NY stop loss pools (enter receipts from the pool as a negative value) (\$mpm)	16.16 Adjustment to the incurred claims for the period due to receipts from or payments to the Regulation 146 pool (enter receipts as a negative value and payments to the pool as a positive value) (\$mpm)	16.17 Administrative expenses for experience period (including commissions and premium taxes, but excluding federal and state income taxes) (\$mpm)	16.18 Ratio: Col 16.7/ Col 16.4 (Incurred Claims / Earned Premiums)	16.19 Ratio: Col 16.7/ Col16.5 (Incurred Claims / Standardi zed Earned Premiums)	16.20 Ratio:Col 16.10/ Col16.4 (Administr ation Expenses / Earned Premiums)	16.21 Ratio: (Col 16.7 + Col 16.8 + Col 16.9 +Col 16.10) /Col 16.4
44-CERT-HMO (7/05), CERT- NYSHIP(09/03)	HMO	\$45,345,796.08	445.62	580.98	387.68	376.87	0.00	0.00	42.62	0.846	0.649	0.096	0.941

EXHIBIT 7: HISTORICAL DATA BY EACH POLICY FORM INCLUDED IN RATE ADJUSTMENT FILING

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EXHIBIT 7: HISTORICAL DATA BY EACH POLICY FORM INCLUDED IN RATE ADJUSTMENT FILING

		Annualized Medical Trend Factors Assumed in Rate Development (%)				Ratios: Most Recent Experience Period to First Prior Period						Ratios: First Prior		
1a. Base medical policy form number	1b. Product Name as in Rate Manual	17.1 All benefits combined, composite	17.2 Due to utilization	17.3 Due to unit cost	17.4 Due to case mix/intensity/other	18.1 Member months	18.2 Earned premiums (\$mpm)	18.3 Standardized premiums (\$mpm)	18.4 Paid claims for experience period before any adjustment for amounts received from the standard direct pay and Healthy NY stop loss pools and before any adjustment for receipts from or payments to the Regulation 146 pool (\$mpm)	18.5 Incurred claims for experience period before any adjustment for amounts received from the standard direct pay and Healthy NY stop loss pools and before any adjustment for receipts from or payments to the Regulation 146 pool (\$mpm)	18.6 Administrative expenses (including commissions and premium taxes, but excluding federal and state income taxes) (\$mpm)	19.1 Member months	19.2 Earned premiums (\$mpm)	19.3 Standardized premiums (\$mpm)
44-CERT-HMO (7/05), CERT-NYSHIP(09/03)	HMO	6.13%	1.86%	4.20%	0.00%	0.924	1.045	0.981	1.025	1.057	1.125	1.031	1.046	0.914

EXHIBIT 7: HISTORICAL DATA BY EACH POLICY FORM INCLUDED IN RATE ADJUSTMENT FILING

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EXHIBIT 7: HISTORICAL DATA BY EACH POLICY FORM INCLUDED IN RATE ADJUSTMENT FILING

r Period to Second Prior Period					Ratio: Standard Premium to Earned Premium		
1a. Base medical policy form number	1b. Product Name as in Rate Manual	19.4 Paid claims for experience period before any adjustment for amounts received from the standard direct pay and Healthy NY stop loss pools and before any adjustment for receipts from or payments to the Regulation 146 pool (\$pmpm)	19.5 Incurred claims for experience period - before any adjustment for amounts received from the standard direct pay and Healthy NY stop loss pools and before any adjustment for receipts from or payments to the Regulation 146 pool (\$pmpm)	19.6 Administrative expenses (including commissions and premium taxes, but excluding federal and state income taxes) (\$pmpm)	20.1 Most Recent Experience Period	20.2 First Prior Experience Period	20.3 Second Prior Experience Period
44-CERT-HMO (7/05), CERT-NYSHIP(09/03)	HMO	1.017	1.037	1.059	1.069	1.140	1.304