

# MVP Health Plan, Inc.

Effective January 1, 2015

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**MVP Health Plan, Inc.**  
Benefit Descriptions  
Effective January 1, 2015  
Version 9/26/14

**Exhibit A**

MVP Form ID	Form Description	Plan Type	Small vs Individual	Standard vs Non-Standard	Metal Level	Form Applies to: On vs Off Exchange	Available to "Child Only"
		QHDHP HMO					
NY-HMOH-DB-001-S (2015)	Standard Bronze	(Emb)	Individual	Standard	Bronze	Off	No
NY-HMO-DS-001-S (2015)	Standard Silver	HMO	Individual	Standard	Silver	Off	No
NY-HMO-DG-001-S (2015)	Standard Gold	HMO	Individual	Standard	Gold	Off	No
NY-HMO-DP-001-S (2015)	Standard Platinum	HMO	Individual	Standard	Platinum	Off	No
NY-HMO-DB-001-N (2015)	Non-Standard Bronze 1	HMO	Individual	Non-Standard	Bronze	Off	No
NY-HMO-DB-002-N (2015)	Non-Standard Bronze 2	HMO	Individual	Non-Standard	Bronze	Off	No
		QHDHP HMO					
NY-HMOH-DB-003-N (2015)	Non-Standard Bronze 3	(Emb)	Individual	Non-Standard	Bronze	Off	No
		QHDHP HMO					
NY-HMOH-DB-004-N (2015)	Non-Standard Bronze 4	(Emb)	Individual	Non-Standard	Bronze	Off	No
		QHDHP HMO					
NY-HMOH-DB-005-N (2015)	Non-Standard Bronze 5	(Emb)	Individual	Non-Standard	Bronze	Off	No
NY-HMO-DS-001-N (2015)	Non-Standard Silver 1	HMO	Individual	Non-Standard	Silver	Off	No
NY-HMO-DS-002-N (2015)	Non-Standard Silver 2	HMO	Individual	Non-Standard	Silver	Off	No
		QHDHP HMO					
NY-HMOH-DS-003-N (2015)	Non-Standard Silver 3	(Agg)	Individual	Non-Standard	Silver	Off	No
		QHDHP HMO					
NY-HMOH-DS-005-N (2015)	Non-Standard Silver 5 Off	(Agg)	Individual	Non-Standard	Silver	Off	No
NY-HMO-DS-006-N (2015)	Non-Standard Silver 6 Off	HMO	Individual	Non-Standard	Silver	Off	No
NY-HMO-DG-001-N (2015)	Non-Standard Gold 1	HMO	Individual	Non-Standard	Gold	Off	No
		QHDHP HMO					
NY-HMOH-DG-002-N (2015)	Non-Standard Gold 2	(Agg)	Individual	Non-Standard	Gold	Off	No
NY-HMO-DG-003-N (2015)	Non-Standard Gold 3	HMO	Individual	Non-Standard	Gold	Off	No
NY-HMO-DG-004-N (2015)	Non-Standard Gold 4	HMO	Individual	Non-Standard	Gold	Off	No
NY-HMO-DG-005-N (2015)	Non-Standard Gold 5	HMO	Individual	Non-Standard	Gold	Off	No
NY-HMO-DP-001-N (2015)	Non-Standard Platinum 1	HMO	Individual	Non-Standard	Platinum	Off	No
NY-HMO-DP-002-N (2015)	Non-Standard Platinum 2	HMO	Individual	Non-Standard	Platinum	Off	No
NY-POS-DP-001-S (2015)	CompCare POS Replacement	POS	Individual	Standard	Platinum	Off	No
		QHDHP HMO					
NY-HMOH-DB-001-S-CO (2015)	Standard Bronze	(Emb)	Individual	Standard	Bronze	Off	Yes
NY-HMO-DS-001-S-CO (2015)	Standard Silver	HMO	Individual	Standard	Silver	Off	Yes
NY-HMO-DG-001-S-CO (2015)	Standard Gold	HMO	Individual	Standard	Gold	Off	Yes
NY-HMO-DP-001-S-CO (2015)	Standard Platinum	HMO	Individual	Standard	Platinum	Off	Yes

**NOTE:**

All cost sharing after Deductible unless otherwise noted by "no DD"

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**Exhibit A**

MVP Form ID	Marketing Name	Single Deductible Medical	Family Deductible Medical	Single OOP Maximum	Family OOP Maximum	Emergency Room	Inpatient Stay/SNF
NY-HMOH-DB-001-S (2015)	MVP Premier	\$3,000	\$6,000	\$6,350	\$12,700	50%	50%
NY-HMO-DS-001-S (2015)	MVP Premier	\$2,000	\$4,000	\$5,500	\$11,000	\$150	\$1,500
NY-HMO-DG-001-S (2015)	MVP Premier	\$600	\$1,200	\$4,000	\$8,000	\$150	\$1,000
NY-HMO-DP-001-S (2015)	MVP Premier	\$0	\$0	\$2,000	\$4,000	\$100	\$500
NY-HMO-DB-001-N (2015)	MVP Premier Plus	\$3,500	\$7,000	\$6,350	\$12,700	50%	50%
NY-HMO-DB-002-N (2015)	MVP Premier Plus	\$4,000	\$8,000	\$6,350	\$12,700	\$350 no DD	30%
NY-HMOH-DB-003-N (2015)	MVP Premier Plus HDHP	\$4,000	\$8,000	\$6,350	\$12,700	\$300	30%
NY-HMOH-DB-004-N (2015)	MVP Premier Plus HDHP	\$5,000	\$10,000	\$6,350	\$12,700	30%	30%
NY-HMOH-DB-005-N (2015)	MVP Premier Plus HDHP	\$3,000	\$6,000	\$6,350	\$12,700	\$100	50%
NY-HMO-DS-001-N (2015)	MVP Premier Plus	\$1,900	\$3,800	\$6,350	\$12,700	\$350	20%
NY-HMO-DS-002-N (2015)	MVP Premier Plus	\$1,500	\$3,000	\$6,350	\$12,700	\$350 no DD	20%
NY-HMOH-DS-003-N (2015)	MVP Premier Plus HDHP	\$1,500	\$3,000	\$6,350	\$12,700	\$300	\$500
NY-HMOH-DS-005-N (2015)	MVP Premier Plus HDHP	\$2,000	\$4,000	\$4,000	\$8,000	\$300	\$500
NY-HMO-DS-006-N (2015)	MVP Premier Plus	\$1,300	\$2,600	\$6,350	\$12,700	\$300 no DD	20%
NY-HMO-DG-001-N (2015)	MVP Premier Plus	\$850	\$1,700	\$6,350	\$12,700	\$300 no DD	\$500
NY-HMOH-DG-002-N (2015)	MVP Premier Plus HDHP	\$1,400	\$2,800	\$6,350	\$12,700	\$75	\$200
NY-HMO-DG-003-N (2015)	MVP Premier Plus	\$600	\$1,200	\$4,000	\$8,000	\$250	\$800
NY-HMO-DG-004-N (2015)	MVP Premier Plus	\$0	\$0	\$6,350	\$12,700	\$300	\$500
NY-HMO-DG-005-N (2015)	MVP Premier Plus	\$1,000	\$2,000	\$4,500	\$9,000	\$300 no DD	20%
NY-HMO-DP-001-N (2015)	MVP Premier Plus	\$0	\$0	\$3,000	\$6,000	\$100	\$300
NY-HMO-DP-002-N (2015)	MVP Premier Plus	\$0	\$0	\$2,500	\$5,000	\$100	\$300
NY-POS-DP-001-S (2015)	MVP Premier	\$0	\$0	\$2,000	\$4,000	\$100	\$500
NY-HMOH-DB-001-S-CO (2015)	MVP Premier	\$3,000	\$6,000	\$6,350	\$12,700	50%	50%
NY-HMO-DS-001-S-CO (2015)	MVP Premier	\$2,000	\$4,000	\$5,500	\$11,000	\$150	\$1,500
NY-HMO-DG-001-S-CO (2015)	MVP Premier	\$600	\$1,200	\$4,000	\$8,000	\$150	\$1,000
NY-HMO-DP-001-S-CO (2015)	MVP Premier	\$0	\$0	\$2,000	\$4,000	\$100	\$500

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**Exhibit A**

MVP Form ID	Outpatient Facility	Physician Surgery	Primary Care Office	Specialist Office	Mental Health Office	High Tech Imaging	Diagnostic Imaging	PT/OT/ST
NY-HMOH-DB-001-S (2015)	50%	50%	50%	50%	50%	50%	50%	50%
NY-HMO-DS-001-S (2015)	\$100	\$100	\$30	\$50	\$30	\$50	\$50	\$30
NY-HMO-DG-001-S (2015)	\$100	\$100	\$25	\$40	\$25	\$40	\$40	\$30
NY-HMO-DP-001-S (2015)	\$100	\$100	\$15	\$35	\$15	\$35	\$35	\$25
NY-HMO-DB-001-N (2015)	\$300	\$300	\$35	\$80	\$80	\$200	\$100	\$80
NY-HMO-DB-002-N (2015)	\$300	\$300	3 visits at \$0, then \$35 no DD	\$60	\$60	\$200	\$100	\$60
NY-HMOH-DB-003-N (2015)	\$100	\$100	\$30	\$50	\$50	\$200	\$100	\$50
NY-HMOH-DB-004-N (2015)	30%	30%	\$10	30%	30%	30%	30%	30%
NY-HMOH-DB-005-N (2015)	50%	50%	\$5	50%	50%	50%	50%	50%
NY-HMO-DS-001-N (2015)	\$300	\$200	\$30 no DD	\$50	\$50	\$225	\$125	\$50
NY-HMO-DS-002-N (2015)	\$200	\$200	3 visits at \$0, then \$35 no DD	\$60	\$60	\$225	\$125	\$60
NY-HMOH-DS-003-N (2015)	\$200	\$100	\$25	\$50	\$50	\$150	\$50	\$50
NY-HMOH-DS-005-N (2015)	\$200	\$100	\$20	\$40	\$40	\$150	\$50	\$40
NY-HMO-DS-006-N (2015)	20%	20%	\$25 no DD	\$50 no DD	\$25 no DD	\$200 no DD	\$100 no DD	\$50 no DD
NY-HMO-DG-001-N (2015)	\$200	\$100	3 visits at \$0, then \$15 no DD	\$45	\$45	\$100	\$60	\$45
NY-HMOH-DG-002-N (2015)	\$100	\$25	\$5	\$15	\$15	\$75	\$15	\$15
NY-HMO-DG-003-N (2015)	\$100	\$50	\$10	\$40	\$40	\$150	\$50	\$40
NY-HMO-DG-004-N (2015)	\$300	\$0	\$25	\$40	\$40	\$150	\$150	\$40
NY-HMO-DG-005-N (2015)	20%	20%	\$30 no DD	\$50 no DD	\$30 no DD	\$100 no DD	\$50 no DD	\$50 no DD
NY-HMO-DP-001-N (2015)	\$100	\$100	3 visits at \$0, then \$5	\$40	\$40	\$100	\$40	\$40
NY-HMO-DP-002-N (2015)	\$100	\$50	\$5	\$30	\$30	\$100	\$30	\$30
NY-POS-DP-001-S (2015)	\$100	\$100	\$15	\$35	\$15	\$35	\$35	\$25
NY-HMOH-DB-001-S-CO (2015)	50%	50%	50%	50%	50%	50%	50%	50%
NY-HMO-DS-001-S-CO (2015)	\$100	\$100	\$30	\$50	\$30	\$50	\$50	\$30
NY-HMO-DG-001-S-CO (2015)	\$100	\$100	\$25	\$40	\$25	\$40	\$40	\$30
NY-HMO-DP-001-S-CO (2015)	\$100	\$100	\$15	\$35	\$15	\$35	\$35	\$25

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## Exhibit A

MVP Form ID	Lab	Dep Thru 29 Coverage	Pediatric Dental Available Via	Tier 1 Prescription	Tier 2 Prescription	Tier 3 Prescription	Prescription Deductible
NY-HMOH-DB-001-S (2015)		50% Optional Rider	Stand Alone Dental Carrier	\$10	\$35	\$70	Integrated with Med
NY-HMO-DS-001-S (2015)		\$50 Optional Rider	Stand Alone Dental Carrier	\$10	\$35	\$70	\$0
NY-HMO-DG-001-S (2015)		\$40 Optional Rider	Stand Alone Dental Carrier	\$10	\$35	\$70	\$0
NY-HMO-DP-001-S (2015)		\$35 Optional Rider	Stand Alone Dental Carrier	\$10	\$30	\$60	\$0
NY-HMO-DB-001-N (2015)		\$80 Optional Rider	Stand Alone Dental Carrier	\$10	\$40	50%	\$200
NY-HMO-DB-002-N (2015)		\$60 Optional Rider	Stand Alone Dental Carrier	\$8	\$40	\$60	Integrated with Med
NY-HMOH-DB-003-N (2015)		\$50 Optional Rider	Stand Alone Dental Carrier	\$5	\$40	\$60	Integrated with Med
NY-HMOH-DB-004-N (2015)		30% Optional Rider	Stand Alone Dental Carrier	\$5	\$40	30%	Integrated with Med
NY-HMOH-DB-005-N (2015)		50% Optional Rider	Stand Alone Dental Carrier	\$5	\$30	50%	Integrated with Med
NY-HMO-DS-001-N (2015)		\$50 Optional Rider	Stand Alone Dental Carrier	\$8	\$35	\$70	\$100 Brand Only
NY-HMO-DS-002-N (2015)		\$60 Optional Rider	Stand Alone Dental Carrier	\$8	\$35	\$70	Integrated with Med
NY-HMOH-DS-003-N (2015)		\$50 Optional Rider	Stand Alone Dental Carrier	\$10	\$40	\$60	Integrated with Med
NY-HMOH-DS-005-N (2015)		\$40 Optional Rider	Stand Alone Dental Carrier	\$10	\$40	\$60	Integrated with Med
NY-HMO-DS-006-N (2015)	\$50 no DD	Optional Rider	Stand Alone Dental Carrier	\$10	\$40	\$60	\$0
NY-HMO-DG-001-N (2015)		\$45 Optional Rider	Stand Alone Dental Carrier	\$5	\$35	\$70	\$100 Brand Only
NY-HMOH-DG-002-N (2015)		\$15 Optional Rider	Stand Alone Dental Carrier	\$5	\$15	\$25	Integrated with Med
NY-HMO-DG-003-N (2015)		\$40 Optional Rider	Stand Alone Dental Carrier	\$10	\$35	50%	\$0
NY-HMO-DG-004-N (2015)		\$40 Optional Rider	Stand Alone Dental Carrier	5	\$45	50%	\$0
NY-HMO-DG-005-N (2015)	\$50 no DD	Optional Rider	Stand Alone Dental Carrier	5	\$15	\$25	\$0
NY-HMO-DP-001-N (2015)		\$40 Optional Rider	Stand Alone Dental Carrier	\$5	\$30	\$50	\$0
NY-HMO-DP-002-N (2015)		\$30 Optional Rider	Stand Alone Dental Carrier	5	\$30	\$50	\$0
NY-POS-DP-001-S (2015)		\$35 Optional Rider	Stand Alone Dental Carrier	\$10	\$30	\$60	\$0
NY-HMOH-DB-001-S-CO (2015)		50% Optional Rider	Stand Alone Dental Carrier	\$10	\$35	\$70	Integrated with Med
NY-HMO-DS-001-S-CO (2015)		\$50 Optional Rider	Stand Alone Dental Carrier	\$10	\$35	\$70	\$0
NY-HMO-DG-001-S-CO (2015)		\$40 Optional Rider	Stand Alone Dental Carrier	\$10	\$35	\$70	\$0
NY-HMO-DP-001-S-CO (2015)		\$35 Optional Rider	Stand Alone Dental Carrier	\$10	\$30	\$60	\$0

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**MVP Health Plan, Inc.**  
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**Exhibit A**

MVP Form ID	IRS Qualified Plan	Single Deductible	Family Deductible	Coinsurance	Single Out of Pocket Max	Family Out of Pocket Max
NY-HMOH-DB-001-S (2015)	Yes	N/A	N/A	N/A	N/A	N/A
NY-HMO-DS-001-S (2015)	No	N/A	N/A	N/A	N/A	N/A
NY-HMO-DG-001-S (2015)	No	N/A	N/A	N/A	N/A	N/A
NY-HMO-DP-001-S (2015)	No	N/A	N/A	N/A	N/A	N/A
NY-HMO-DB-001-N (2015)	No	N/A	N/A	N/A	N/A	N/A
NY-HMO-DB-002-N (2015)	No	N/A	N/A	N/A	N/A	N/A
NY-HMOH-DB-003-N (2015)	Yes	N/A	N/A	N/A	N/A	N/A
NY-HMOH-DB-004-N (2015)	Yes	N/A	N/A	N/A	N/A	N/A
NY-HMOH-DB-005-N (2015)	Yes	N/A	N/A	N/A	N/A	N/A
NY-HMO-DS-001-N (2015)	No	N/A	N/A	N/A	N/A	N/A
NY-HMO-DS-002-N (2015)	No	N/A	N/A	N/A	N/A	N/A
NY-HMOH-DS-003-N (2015)	Yes	N/A	N/A	N/A	N/A	N/A
NY-HMOH-DS-005-N (2015)	Yes	N/A	N/A	N/A	N/A	N/A
NY-HMO-DS-006-N (2015)	No	N/A	N/A	N/A	N/A	N/A
NY-HMO-DG-001-N (2015)	No	N/A	N/A	N/A	N/A	N/A
NY-HMOH-DG-002-N (2015)	Yes	N/A	N/A	N/A	N/A	N/A
NY-HMO-DG-003-N (2015)	No	N/A	N/A	N/A	N/A	N/A
NY-HMO-DG-004-N (2015)	No	N/A	N/A	N/A	N/A	N/A
NY-HMO-DG-005-N (2015)	No	N/A	N/A	N/A	N/A	N/A
NY-HMO-DP-001-N (2015)	No	N/A	N/A	N/A	N/A	N/A
NY-HMO-DP-002-N (2015)	No	N/A	N/A	N/A	N/A	N/A
NY-POS-DP-001-S (2015)	No	\$1,000	\$2,000	20%	\$3,000	\$5,000
NY-HMOH-DB-001-S-CO (2015)	Yes	N/A	N/A	N/A	N/A	N/A
NY-HMO-DS-001-S-CO (2015)	No	N/A	N/A	N/A	N/A	N/A
NY-HMO-DG-001-S-CO (2015)	No	N/A	N/A	N/A	N/A	N/A
NY-HMO-DP-001-S-CO (2015)	No	N/A	N/A	N/A	N/A	N/A

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**MVP Health Plan, Inc.**

Rider Descriptions

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<b>MVP Form ID</b>	<b>MVP Form for Rate Distinction</b>	<b>Benefit Description</b>	<b>Small vs Individual</b>	<b>Standard vs Non-Standard</b>	<b>Metal Level</b>	<b>Available to Child Only Policies</b>	<b>Form Applies to: On vs Off Exchange</b>
NY-X-100	NY-X-100	Dependent Through Age 29	Individual	Standard & Non-Standard	All Metal Levels	No	Off
NY-X-USNF	NY-X-USNF	Unlimited Skilled Nursing Facility	Individual	Standard & Non-Standard	All Metal Levels	Yes	Off

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## Exhibit B

County	2014 Rate Region by DFS	Off Exchange: Individual		2015 MVP Rate Relativites - Individual
		Standard (AR44)	Non-Standard (AR44)	
ALBANY	1 Albany	X	X	0.8877
COLUMBIA	1 Albany	X	X	0.8877
FULTON	1 Albany	X	No	0.8877
GREENE	1 Albany	X	X	0.8877
MONTGOMERY	1 Albany	X	X	0.8877
RENSSELAER	1 Albany	X	X	0.8877
SARATOGA	1 Albany	X	X	0.8877
SCHENECTADY	1 Albany	X	X	0.8877
SCHOHARIE	1 Albany	X	No	0.8877
WARREN	1 Albany	X	X	0.8877
WASHINGTON	1 Albany	X	X	0.8877
ALLEGANY	2 Buffalo	No	No	0.8066
CATTARAUGUS	2 Buffalo	No	No	0.8066
CHAUTAUQUA	2 Buffalo	No	No	0.8066
ERIE	2 Buffalo	No	No	0.8066
GENESEE	2 Buffalo	X	No	0.8066
NIAGARA	2 Buffalo	No	No	0.8066
ORLEANS	2 Buffalo	X	X	0.8066
WYOMING	2 Buffalo	X	X	0.8066
DELAWARE	3 Mid-Hudson	X	No	1.0867
DUTCHESS	3 Mid-Hudson	X	X	1.0867
ORANGE	3 Mid-Hudson	X	X	1.0867
PUTNAM	3 Mid-Hudson	X	X	1.0867
SULLIVAN	3 Mid-Hudson	X	X	1.0867
ULSTER	3 Mid-Hudson	X	X	1.0867
BRONX	4 NYC	No	No	0.9216
KINGS	4 NYC	No	No	0.9216
NEW YORK	4 NYC	No	No	0.9216
QUEENS	4 NYC	No	No	0.9216
RICHMOND	4 NYC	No	No	0.9216
ROCKLAND	4 NYC	X	X	0.9216
WESTCHESTER	4 NYC	X	X	0.9216
LIVINGSTON	5 Rochester	X	X	0.7789
MONROE	5 Rochester	X	X	0.7789
ONTARIO	5 Rochester	X	X	0.7789
SENECA	5 Rochester	X	X	0.7789
WAYNE	5 Rochester	X	X	0.7789
YATES	5 Rochester	X	X	0.7789
BROOME	6 Syracuse	X	X	1.0144
CAYUGA	6 Syracuse	X	X	1.0144
CHEMUNG	6 Syracuse	No	No	1.0144
CORTLAND	6 Syracuse	X	X	1.0144
ONONDAGA	6 Syracuse	X	X	1.0144
SCHUYLER	6 Syracuse	No	No	1.0144
STEUBEN	6 Syracuse	X	No	1.0144
TIOGA	6 Syracuse	X	No	1.0144
TOMPKINS	6 Syracuse	X	X	1.0144
CHENANGO	7 Utica/Watertown	X	X	0.9511
CLINTON	7 Utica/Watertown	X	No	0.9511
ESSEX	7 Utica/Watertown	X	No	0.9511
FRANKLIN	7 Utica/Watertown	X	No	0.9511
HAMILTON	7 Utica/Watertown	X	No	0.9511
HERKIMER	7 Utica/Watertown	X	No	0.9511
JEFFERSON	7 Utica/Watertown	X	No	0.9511

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## Exhibit B

County	2014 Rate Region by DFS	Off Exchange: Individual		2015 MVP Rate Relativites - Individual
		Standard (AR44)	Non-Standard (AR44)	
LEWIS	7 Utica/Watertown	X	X	0.9511
MADISON	7 Utica/Watertown	X	X	0.9511
ONEIDA	7 Utica/Watertown	X	X	0.9511
OSWEGO	7 Utica/Watertown	X	X	0.9511
OTSEGO	7 Utica/Watertown	X	No	0.9511
SAINTE LAWRENCE	7 Utica/Watertown	X	No	0.9511
NASSAU	8 Long Island	No	No	1.2717
SUFFOLK	8 Long Island	No	No	1.2717

## MVP Health Plan, Inc.

## Exhibit C

Premiums

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MVP Form ID	Benefit Description	Small vs Individual	Standard vs Non-Standard	Metal Level	Rate Region	2015			
						Single	Single + Spouse	Single + Child(ren)	Single + Spouse + Child(ren)
NY-HMOH-DB-001-S (2015)	Standard Bronze	Individual	Standard	Bronze	1 Albany	\$333.09	\$666.18	\$566.25	\$949.31
NY-HMO-DS-001-S (2015)	Standard Silver	Individual	Standard	Silver	1 Albany	\$416.55	\$833.10	\$708.14	\$1,187.17
NY-HMO-DG-001-S (2015)	Standard Gold	Individual	Standard	Gold	1 Albany	\$498.40	\$996.80	\$847.28	\$1,420.44
NY-HMO-DP-001-S (2015)	Standard Platinum	Individual	Standard	Platinum	1 Albany	\$588.09	\$1,176.18	\$999.75	\$1,676.06
NY-HMO-DB-001-N (2015)	Non-Standard Bronze 1	Individual	Non-Standard	Bronze	1 Albany	\$332.36	\$664.72	\$565.01	\$947.23
NY-HMO-DB-002-N (2015)	Non-Standard Bronze 2	Individual	Non-Standard	Bronze	1 Albany	\$340.82	\$681.64	\$579.39	\$971.34
NY-HMOH-DB-003-N (2015)	Non-Standard Bronze 3	Individual	Non-Standard	Bronze	1 Albany	\$329.19	\$658.38	\$559.62	\$938.19
NY-HMOH-DB-004-N (2015)	Non-Standard Bronze 4	Individual	Non-Standard	Bronze	1 Albany	\$316.50	\$633.00	\$538.05	\$902.03
NY-HMOH-DB-005-N (2015)	Non-Standard Bronze 5	Individual	Non-Standard	Bronze	1 Albany	\$330.78	\$661.56	\$562.33	\$942.72
NY-HMO-DS-001-N (2015)	Non-Standard Silver 1	Individual	Non-Standard	Silver	1 Albany	\$403.70	\$807.40	\$686.29	\$1,150.55
NY-HMO-DS-002-N (2015)	Non-Standard Silver 2	Individual	Non-Standard	Silver	1 Albany	\$402.07	\$804.14	\$683.52	\$1,145.90
NY-HMOH-DS-003-N (2015)	Non-Standard Silver 3	Individual	Non-Standard	Silver	1 Albany	\$402.61	\$805.22	\$684.44	\$1,147.44
NY-HMOH-DS-005-N (2015)	Non-Standard Silver 5 Off	Individual	Non-Standard	Silver	1 Albany	\$393.90	\$787.80	\$669.63	\$1,122.62
NY-HMO-DS-006-N (2015)	Non-Standard Silver 6 Off	Individual	Non-Standard	Silver	1 Albany	\$438.54	\$877.08	\$745.52	\$1,249.84
NY-HMO-DG-001-N (2015)	Non-Standard Gold 1	Individual	Non-Standard	Gold	1 Albany	\$473.28	\$946.56	\$804.58	\$1,348.85
NY-HMOH-DG-002-N (2015)	Non-Standard Gold 2	Individual	Non-Standard	Gold	1 Albany	\$455.01	\$910.02	\$773.52	\$1,296.78
NY-HMO-DG-003-N (2015)	Non-Standard Gold 3	Individual	Non-Standard	Gold	1 Albany	\$476.71	\$953.42	\$810.41	\$1,358.62
NY-HMO-DG-004-N (2015)	Non-Standard Gold 4	Individual	Non-Standard	Gold	1 Albany	\$505.25	\$1,010.50	\$858.93	\$1,439.96
NY-HMO-DG-005-N (2015)	Non-Standard Gold 5	Individual	Non-Standard	Gold	1 Albany	\$478.42	\$956.84	\$813.31	\$1,363.50
NY-POS-DP-001-S (2015)	CompCare POS Replacement	Individual	Standard	Platinum	1 Albany	\$687.19	\$1,374.38	\$1,168.22	\$1,958.49
NY-HMO-DP-001-N (2015)	Non-Standard Platinum 1	Individual	Non-Standard	Platinum	1 Albany	\$567.45	\$1,134.90	\$964.67	\$1,617.23
NY-HMO-DP-002-N (2015)	Non-Standard Platinum 2	Individual	Non-Standard	Platinum	1 Albany	\$573.53	\$1,147.06	\$975.00	\$1,634.56
NY-HMOH-DB-001-S (2015)	Standard Bronze	Individual	Standard	Bronze	2 Buffalo	\$302.66	\$605.32	\$514.52	\$862.58
NY-HMO-DS-001-S (2015)	Standard Silver	Individual	Standard	Silver	2 Buffalo	\$378.50	\$757.00	\$643.45	\$1,078.73
NY-HMO-DG-001-S (2015)	Standard Gold	Individual	Standard	Gold	2 Buffalo	\$452.86	\$905.72	\$769.86	\$1,290.65
NY-HMO-DP-001-S (2015)	Standard Platinum	Individual	Standard	Platinum	2 Buffalo	\$534.36	\$1,068.72	\$908.41	\$1,522.93
NY-HMO-DB-001-N (2015)	Non-Standard Bronze 1	Individual	Non-Standard	Bronze	2 Buffalo	\$302.00	\$604.00	\$513.40	\$860.70
NY-HMO-DB-002-N (2015)	Non-Standard Bronze 2	Individual	Non-Standard	Bronze	2 Buffalo	\$309.68	\$619.36	\$526.46	\$882.59
NY-HMOH-DB-003-N (2015)	Non-Standard Bronze 3	Individual	Non-Standard	Bronze	2 Buffalo	\$299.11	\$598.22	\$508.49	\$852.46
NY-HMOH-DB-004-N (2015)	Non-Standard Bronze 4	Individual	Non-Standard	Bronze	2 Buffalo	\$287.59	\$575.18	\$488.90	\$819.63
NY-HMOH-DB-005-N (2015)	Non-Standard Bronze 5	Individual	Non-Standard	Bronze	2 Buffalo	\$300.56	\$601.12	\$510.95	\$856.60
NY-HMO-DS-001-N (2015)	Non-Standard Silver 1	Individual	Non-Standard	Silver	2 Buffalo	\$366.82	\$733.64	\$623.59	\$1,045.44
NY-HMO-DS-002-N (2015)	Non-Standard Silver 2	Individual	Non-Standard	Silver	2 Buffalo	\$365.33	\$730.66	\$621.06	\$1,041.19
NY-HMOH-DS-003-N (2015)	Non-Standard Silver 3	Individual	Non-Standard	Silver	2 Buffalo	\$365.83	\$731.66	\$621.91	\$1,042.62
NY-HMOH-DS-005-N (2015)	Non-Standard Silver 5 Off	Individual	Non-Standard	Silver	2 Buffalo	\$357.91	\$715.82	\$608.45	\$1,020.04
NY-HMO-DS-006-N (2015)	Non-Standard Silver 6 Off	Individual	Non-Standard	Silver	2 Buffalo	\$398.48	\$796.96	\$677.42	\$1,135.67
NY-HMO-DG-001-N (2015)	Non-Standard Gold 1	Individual	Non-Standard	Gold	2 Buffalo	\$430.04	\$860.08	\$731.07	\$1,225.61
NY-HMOH-DG-002-N (2015)	Non-Standard Gold 2	Individual	Non-Standard	Gold	2 Buffalo	\$413.44	\$826.88	\$702.85	\$1,178.30
NY-HMO-DG-003-N (2015)	Non-Standard Gold 3	Individual	Non-Standard	Gold	2 Buffalo	\$433.15	\$866.30	\$736.36	\$1,234.48
NY-HMO-DG-004-N (2015)	Non-Standard Gold 4	Individual	Non-Standard	Gold	2 Buffalo	\$459.09	\$918.18	\$780.45	\$1,308.41
NY-HMO-DG-005-N (2015)	Non-Standard Gold 5	Individual	Non-Standard	Gold	2 Buffalo	\$434.71	\$869.42	\$739.01	\$1,238.92

## MVP Health Plan, Inc.

## Exhibit C

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MVP Form ID	Benefit Description	Small vs Individual	Standard vs Non-Standard	Metal Level	Rate Region	2015			
						Single	Single + Spouse	Single + Child(ren)	Single + Spouse + Child(ren)
NY-POS-DP-001-S (2015)	CompCare POS Replacement	Individual	Standard	Platinum	2 Buffalo	\$624.41	\$1,248.82	\$1,061.50	\$1,779.57
NY-HMO-DP-001-N (2015)	Non-Standard Platinum 1	Individual	Non-Standard	Platinum	2 Buffalo	\$515.61	\$1,031.22	\$876.54	\$1,469.49
NY-HMO-DP-002-N (2015)	Non-Standard Platinum 2	Individual	Non-Standard	Platinum	2 Buffalo	\$521.13	\$1,042.26	\$885.92	\$1,485.22
NY-HMOH-DB-001-S (2015)	Standard Bronze	Individual	Standard	Bronze	3 Mid-Hudson	\$407.76	\$815.52	\$693.19	\$1,162.12
NY-HMO-DS-001-S (2015)	Standard Silver	Individual	Standard	Silver	3 Mid-Hudson	\$509.93	\$1,019.86	\$866.88	\$1,453.30
NY-HMO-DG-001-S (2015)	Standard Gold	Individual	Standard	Gold	3 Mid-Hudson	\$610.12	\$1,220.24	\$1,037.20	\$1,738.84
NY-HMO-DP-001-S (2015)	Standard Platinum	Individual	Standard	Platinum	3 Mid-Hudson	\$719.93	\$1,439.86	\$1,223.88	\$2,051.80
NY-HMO-DB-001-N (2015)	Non-Standard Bronze 1	Individual	Non-Standard	Bronze	3 Mid-Hudson	\$406.87	\$813.74	\$691.68	\$1,159.58
NY-HMO-DB-002-N (2015)	Non-Standard Bronze 2	Individual	Non-Standard	Bronze	3 Mid-Hudson	\$417.22	\$834.44	\$709.27	\$1,189.08
NY-HMOH-DB-003-N (2015)	Non-Standard Bronze 3	Individual	Non-Standard	Bronze	3 Mid-Hudson	\$402.99	\$805.98	\$685.08	\$1,148.52
NY-HMOH-DB-004-N (2015)	Non-Standard Bronze 4	Individual	Non-Standard	Bronze	3 Mid-Hudson	\$387.46	\$774.92	\$658.68	\$1,104.26
NY-HMOH-DB-005-N (2015)	Non-Standard Bronze 5	Individual	Non-Standard	Bronze	3 Mid-Hudson	\$404.93	\$809.86	\$688.38	\$1,154.05
NY-HMO-DS-001-N (2015)	Non-Standard Silver 1	Individual	Non-Standard	Silver	3 Mid-Hudson	\$494.20	\$988.40	\$840.14	\$1,408.47
NY-HMO-DS-002-N (2015)	Non-Standard Silver 2	Individual	Non-Standard	Silver	3 Mid-Hudson	\$492.20	\$984.40	\$836.74	\$1,402.77
NY-HMOH-DS-003-N (2015)	Non-Standard Silver 3	Individual	Non-Standard	Silver	3 Mid-Hudson	\$492.86	\$985.72	\$837.86	\$1,404.65
NY-HMOH-DS-005-N (2015)	Non-Standard Silver 5 Off	Individual	Non-Standard	Silver	3 Mid-Hudson	\$482.20	\$964.40	\$819.74	\$1,374.27
NY-HMO-DS-006-N (2015)	Non-Standard Silver 6 Off	Individual	Non-Standard	Silver	3 Mid-Hudson	\$536.85	\$1,073.70	\$912.65	\$1,530.02
NY-HMO-DG-001-N (2015)	Non-Standard Gold 1	Individual	Non-Standard	Gold	3 Mid-Hudson	\$579.38	\$1,158.76	\$984.95	\$1,651.23
NY-HMOH-DG-002-N (2015)	Non-Standard Gold 2	Individual	Non-Standard	Gold	3 Mid-Hudson	\$557.02	\$1,114.04	\$946.93	\$1,587.51
NY-HMO-DG-003-N (2015)	Non-Standard Gold 3	Individual	Non-Standard	Gold	3 Mid-Hudson	\$583.57	\$1,167.14	\$992.07	\$1,663.17
NY-HMO-DG-004-N (2015)	Non-Standard Gold 4	Individual	Non-Standard	Gold	3 Mid-Hudson	\$618.51	\$1,237.02	\$1,051.47	\$1,762.75
NY-HMO-DG-005-N (2015)	Non-Standard Gold 5	Individual	Non-Standard	Gold	3 Mid-Hudson	\$585.67	\$1,171.34	\$995.64	\$1,669.16
NY-POS-DP-001-S (2015)	CompCare POS Replacement	Individual	Standard	Platinum	3 Mid-Hudson	\$841.24	\$1,682.48	\$1,430.11	\$2,397.53
NY-HMO-DP-001-N (2015)	Non-Standard Platinum 1	Individual	Non-Standard	Platinum	3 Mid-Hudson	\$694.66	\$1,389.32	\$1,180.92	\$1,979.78
NY-HMO-DP-002-N (2015)	Non-Standard Platinum 2	Individual	Non-Standard	Platinum	3 Mid-Hudson	\$702.10	\$1,404.20	\$1,193.57	\$2,000.99
NY-HMOH-DB-001-S (2015)	Standard Bronze	Individual	Standard	Bronze	4 NYC	\$345.81	\$691.62	\$587.88	\$985.56
NY-HMO-DS-001-S (2015)	Standard Silver	Individual	Standard	Silver	4 NYC	\$432.46	\$864.92	\$735.18	\$1,232.51
NY-HMO-DG-001-S (2015)	Standard Gold	Individual	Standard	Gold	4 NYC	\$517.43	\$1,034.86	\$879.63	\$1,474.68
NY-HMO-DP-001-S (2015)	Standard Platinum	Individual	Standard	Platinum	4 NYC	\$610.55	\$1,221.10	\$1,037.94	\$1,740.07
NY-HMO-DB-001-N (2015)	Non-Standard Bronze 1	Individual	Non-Standard	Bronze	4 NYC	\$345.05	\$690.10	\$586.59	\$983.39
NY-HMO-DB-002-N (2015)	Non-Standard Bronze 2	Individual	Non-Standard	Bronze	4 NYC	\$353.83	\$707.66	\$601.51	\$1,008.42
NY-HMOH-DB-003-N (2015)	Non-Standard Bronze 3	Individual	Non-Standard	Bronze	4 NYC	\$341.76	\$683.52	\$580.99	\$974.02
NY-HMOH-DB-004-N (2015)	Non-Standard Bronze 4	Individual	Non-Standard	Bronze	4 NYC	\$328.59	\$657.18	\$558.60	\$936.48
NY-HMOH-DB-005-N (2015)	Non-Standard Bronze 5	Individual	Non-Standard	Bronze	4 NYC	\$343.41	\$686.82	\$583.80	\$978.72
NY-HMO-DS-001-N (2015)	Non-Standard Silver 1	Individual	Non-Standard	Silver	4 NYC	\$419.12	\$838.24	\$712.50	\$1,194.49
NY-HMO-DS-002-N (2015)	Non-Standard Silver 2	Individual	Non-Standard	Silver	4 NYC	\$417.42	\$834.84	\$709.61	\$1,189.65
NY-HMOH-DS-003-N (2015)	Non-Standard Silver 3	Individual	Non-Standard	Silver	4 NYC	\$417.98	\$835.96	\$710.57	\$1,191.24
NY-HMOH-DS-005-N (2015)	Non-Standard Silver 5 Off	Individual	Non-Standard	Silver	4 NYC	\$408.94	\$817.88	\$695.20	\$1,165.48
NY-HMO-DS-006-N (2015)	Non-Standard Silver 6 Off	Individual	Non-Standard	Silver	4 NYC	\$455.29	\$910.58	\$773.99	\$1,297.58
NY-HMO-DG-001-N (2015)	Non-Standard Gold 1	Individual	Non-Standard	Gold	4 NYC	\$491.35	\$982.70	\$835.30	\$1,400.35
NY-HMOH-DG-002-N (2015)	Non-Standard Gold 2	Individual	Non-Standard	Gold	4 NYC	\$472.39	\$944.78	\$803.06	\$1,346.31

## MVP Health Plan, Inc.

## Exhibit C

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MVP Form ID	Benefit Description	Small vs Individual	Standard vs Non-Standard	Metal Level	Rate Region	2015			
						Single	Single + Spouse	Single + Child(ren)	Single + Spouse + Child(ren)
NY-HMO-DG-003-N (2015)	Non-Standard Gold 3	Individual	Non-Standard	Gold	4 NYC	\$494.91	\$989.82	\$841.35	\$1,410.49
NY-HMO-DG-004-N (2015)	Non-Standard Gold 4	Individual	Non-Standard	Gold	4 NYC	\$524.54	\$1,049.08	\$891.72	\$1,494.94
NY-HMO-DG-005-N (2015)	Non-Standard Gold 5	Individual	Non-Standard	Gold	4 NYC	\$496.69	\$993.38	\$844.37	\$1,415.57
NY-POS-DP-001-S (2015)	CompCare POS Replacement	Individual	Standard	Platinum	4 NYC	\$713.43	\$1,426.86	\$1,212.83	\$2,033.28
NY-HMO-DP-001-N (2015)	Non-Standard Platinum 1	Individual	Non-Standard	Platinum	4 NYC	\$589.12	\$1,178.24	\$1,001.50	\$1,678.99
NY-HMO-DP-002-N (2015)	Non-Standard Platinum 2	Individual	Non-Standard	Platinum	4 NYC	\$595.43	\$1,190.86	\$1,012.23	\$1,696.98
NY-HMOH-DB-001-S (2015)	Standard Bronze	Individual	Standard	Bronze	5 Rochester	\$292.27	\$584.54	\$496.86	\$832.97
NY-HMO-DS-001-S (2015)	Standard Silver	Individual	Standard	Silver	5 Rochester	\$365.50	\$731.00	\$621.35	\$1,041.68
NY-HMO-DG-001-S (2015)	Standard Gold	Individual	Standard	Gold	5 Rochester	\$437.31	\$874.62	\$743.43	\$1,246.33
NY-HMO-DP-001-S (2015)	Standard Platinum	Individual	Standard	Platinum	5 Rochester	\$516.01	\$1,032.02	\$877.22	\$1,470.63
NY-HMO-DB-001-N (2015)	Non-Standard Bronze 1	Individual	Non-Standard	Bronze	5 Rochester	\$291.63	\$583.26	\$495.77	\$831.15
NY-HMO-DB-002-N (2015)	Non-Standard Bronze 2	Individual	Non-Standard	Bronze	5 Rochester	\$299.05	\$598.10	\$508.39	\$852.29
NY-HMOH-DB-003-N (2015)	Non-Standard Bronze 3	Individual	Non-Standard	Bronze	5 Rochester	\$288.84	\$577.68	\$491.03	\$823.19
NY-HMOH-DB-004-N (2015)	Non-Standard Bronze 4	Individual	Non-Standard	Bronze	5 Rochester	\$277.71	\$555.42	\$472.11	\$791.47
NY-HMOH-DB-005-N (2015)	Non-Standard Bronze 5	Individual	Non-Standard	Bronze	5 Rochester	\$290.23	\$580.46	\$493.39	\$827.16
NY-HMO-DS-001-N (2015)	Non-Standard Silver 1	Individual	Non-Standard	Silver	5 Rochester	\$354.22	\$708.44	\$602.17	\$1,009.53
NY-HMO-DS-002-N (2015)	Non-Standard Silver 2	Individual	Non-Standard	Silver	5 Rochester	\$352.79	\$705.58	\$599.74	\$1,005.45
NY-HMOH-DS-003-N (2015)	Non-Standard Silver 3	Individual	Non-Standard	Silver	5 Rochester	\$353.26	\$706.52	\$600.54	\$1,006.79
NY-HMOH-DS-005-N (2015)	Non-Standard Silver 5 Off	Individual	Non-Standard	Silver	5 Rochester	\$345.62	\$691.24	\$587.55	\$985.02
NY-HMO-DS-006-N (2015)	Non-Standard Silver 6 Off	Individual	Non-Standard	Silver	5 Rochester	\$384.79	\$769.58	\$654.14	\$1,096.65
NY-HMO-DG-001-N (2015)	Non-Standard Gold 1	Individual	Non-Standard	Gold	5 Rochester	\$415.27	\$830.54	\$705.96	\$1,183.52
NY-HMOH-DG-002-N (2015)	Non-Standard Gold 2	Individual	Non-Standard	Gold	5 Rochester	\$399.24	\$798.48	\$678.71	\$1,137.83
NY-HMO-DG-003-N (2015)	Non-Standard Gold 3	Individual	Non-Standard	Gold	5 Rochester	\$418.28	\$836.56	\$711.08	\$1,192.10
NY-HMO-DG-004-N (2015)	Non-Standard Gold 4	Individual	Non-Standard	Gold	5 Rochester	\$443.32	\$886.64	\$753.64	\$1,263.46
NY-HMO-DG-005-N (2015)	Non-Standard Gold 5	Individual	Non-Standard	Gold	5 Rochester	\$419.78	\$839.56	\$713.63	\$1,196.37
NY-POS-DP-001-S (2015)	CompCare POS Replacement	Individual	Standard	Platinum	5 Rochester	\$602.96	\$1,205.92	\$1,025.03	\$1,718.44
NY-HMO-DP-001-N (2015)	Non-Standard Platinum 1	Individual	Non-Standard	Platinum	5 Rochester	\$497.90	\$995.80	\$846.43	\$1,419.02
NY-HMO-DP-002-N (2015)	Non-Standard Platinum 2	Individual	Non-Standard	Platinum	5 Rochester	\$503.23	\$1,006.46	\$855.49	\$1,434.21
NY-HMOH-DB-001-S (2015)	Standard Bronze	Individual	Standard	Bronze	6 Syracuse	\$380.63	\$761.26	\$647.07	\$1,084.80
NY-HMO-DS-001-S (2015)	Standard Silver	Individual	Standard	Silver	6 Syracuse	\$476.01	\$952.02	\$809.22	\$1,356.63
NY-HMO-DG-001-S (2015)	Standard Gold	Individual	Standard	Gold	6 Syracuse	\$569.53	\$1,139.06	\$968.20	\$1,623.16
NY-HMO-DP-001-S (2015)	Standard Platinum	Individual	Standard	Platinum	6 Syracuse	\$672.03	\$1,344.06	\$1,142.45	\$1,915.29
NY-HMO-DB-001-N (2015)	Non-Standard Bronze 1	Individual	Non-Standard	Bronze	6 Syracuse	\$379.80	\$759.60	\$645.66	\$1,082.43
NY-HMO-DB-002-N (2015)	Non-Standard Bronze 2	Individual	Non-Standard	Bronze	6 Syracuse	\$389.46	\$778.92	\$662.08	\$1,109.96
NY-HMOH-DB-003-N (2015)	Non-Standard Bronze 3	Individual	Non-Standard	Bronze	6 Syracuse	\$376.17	\$752.34	\$639.49	\$1,072.08
NY-HMOH-DB-004-N (2015)	Non-Standard Bronze 4	Individual	Non-Standard	Bronze	6 Syracuse	\$361.68	\$723.36	\$614.86	\$1,030.79
NY-HMOH-DB-005-N (2015)	Non-Standard Bronze 5	Individual	Non-Standard	Bronze	6 Syracuse	\$377.99	\$755.98	\$642.58	\$1,077.27
NY-HMO-DS-001-N (2015)	Non-Standard Silver 1	Individual	Non-Standard	Silver	6 Syracuse	\$461.32	\$922.64	\$784.24	\$1,314.76
NY-HMO-DS-002-N (2015)	Non-Standard Silver 2	Individual	Non-Standard	Silver	6 Syracuse	\$459.45	\$918.90	\$781.07	\$1,309.43
NY-HMOH-DS-003-N (2015)	Non-Standard Silver 3	Individual	Non-Standard	Silver	6 Syracuse	\$460.07	\$920.14	\$782.12	\$1,311.20
NY-HMOH-DS-005-N (2015)	Non-Standard Silver 5 Off	Individual	Non-Standard	Silver	6 Syracuse	\$450.12	\$900.24	\$765.20	\$1,282.84

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**Exhibit C**

MVP Form ID	Benefit Description	Small vs Individual	Standard vs Non-Standard	Metal Level	Rate Region	2015			
						Single	Single + Spouse	Single + Child(ren)	Single + Spouse + Child(ren)
NY-HMO-DS-006-N (2015)	Non-Standard Silver 6 Off	Individual	Non-Standard	Silver	6 Syracuse	\$501.14	\$1,002.28	\$851.94	\$1,428.25
NY-HMO-DG-001-N (2015)	Non-Standard Gold 1	Individual	Non-Standard	Gold	6 Syracuse	\$540.83	\$1,081.66	\$919.41	\$1,541.37
NY-HMOH-DG-002-N (2015)	Non-Standard Gold 2	Individual	Non-Standard	Gold	6 Syracuse	\$519.96	\$1,039.92	\$883.93	\$1,481.89
NY-HMO-DG-003-N (2015)	Non-Standard Gold 3	Individual	Non-Standard	Gold	6 Syracuse	\$544.75	\$1,089.50	\$926.08	\$1,552.54
NY-HMO-DG-004-N (2015)	Non-Standard Gold 4	Individual	Non-Standard	Gold	6 Syracuse	\$577.36	\$1,154.72	\$981.51	\$1,645.48
NY-HMO-DG-005-N (2015)	Non-Standard Gold 5	Individual	Non-Standard	Gold	6 Syracuse	\$546.70	\$1,093.40	\$929.39	\$1,558.10
NY-POS-DP-001-S (2015)	CompCare POS Replacement	Individual	Standard	Platinum	6 Syracuse	\$785.27	\$1,570.54	\$1,334.96	\$2,238.02
NY-HMO-DP-001-N (2015)	Non-Standard Platinum 1	Individual	Non-Standard	Platinum	6 Syracuse	\$648.44	\$1,296.88	\$1,102.35	\$1,848.05
NY-HMO-DP-002-N (2015)	Non-Standard Platinum 2	Individual	Non-Standard	Platinum	6 Syracuse	\$655.39	\$1,310.78	\$1,114.16	\$1,867.86
NY-HMOH-DB-001-S (2015)	Standard Bronze	Individual	Standard	Bronze	7 Utica/ Watertown	\$356.88	\$713.76	\$606.70	\$1,017.11
NY-HMO-DS-001-S (2015)	Standard Silver	Individual	Standard	Silver	7 Utica/ Watertown	\$446.30	\$892.60	\$758.71	\$1,271.96
NY-HMO-DG-001-S (2015)	Standard Gold	Individual	Standard	Gold	7 Utica/ Watertown	\$533.99	\$1,067.98	\$907.78	\$1,521.87
NY-HMO-DP-001-S (2015)	Standard Platinum	Individual	Standard	Platinum	7 Utica/ Watertown	\$630.09	\$1,260.18	\$1,071.15	\$1,795.76
NY-HMO-DB-001-N (2015)	Non-Standard Bronze 1	Individual	Non-Standard	Bronze	7 Utica/ Watertown	\$356.10	\$712.20	\$605.37	\$1,014.89
NY-HMO-DB-002-N (2015)	Non-Standard Bronze 2	Individual	Non-Standard	Bronze	7 Utica/ Watertown	\$365.16	\$730.32	\$620.77	\$1,040.71
NY-HMOH-DB-003-N (2015)	Non-Standard Bronze 3	Individual	Non-Standard	Bronze	7 Utica/ Watertown	\$352.70	\$705.40	\$599.59	\$1,005.20
NY-HMOH-DB-004-N (2015)	Non-Standard Bronze 4	Individual	Non-Standard	Bronze	7 Utica/ Watertown	\$339.11	\$678.22	\$576.49	\$966.46
NY-HMOH-DB-005-N (2015)	Non-Standard Bronze 5	Individual	Non-Standard	Bronze	7 Utica/ Watertown	\$354.40	\$708.80	\$602.48	\$1,010.04
NY-HMO-DS-001-N (2015)	Non-Standard Silver 1	Individual	Non-Standard	Silver	7 Utica/ Watertown	\$432.53	\$865.06	\$735.30	\$1,232.71
NY-HMO-DS-002-N (2015)	Non-Standard Silver 2	Individual	Non-Standard	Silver	7 Utica/ Watertown	\$430.78	\$861.56	\$732.33	\$1,227.72
NY-HMOH-DS-003-N (2015)	Non-Standard Silver 3	Individual	Non-Standard	Silver	7 Utica/ Watertown	\$431.36	\$862.72	\$733.31	\$1,229.38
NY-HMOH-DS-005-N (2015)	Non-Standard Silver 5 Off	Individual	Non-Standard	Silver	7 Utica/ Watertown	\$422.03	\$844.06	\$717.45	\$1,202.79
NY-HMO-DS-006-N (2015)	Non-Standard Silver 6 Off	Individual	Non-Standard	Silver	7 Utica/ Watertown	\$469.86	\$939.72	\$798.76	\$1,339.10
NY-HMO-DG-001-N (2015)	Non-Standard Gold 1	Individual	Non-Standard	Gold	7 Utica/ Watertown	\$507.08	\$1,014.16	\$862.04	\$1,445.18
NY-HMOH-DG-002-N (2015)	Non-Standard Gold 2	Individual	Non-Standard	Gold	7 Utica/ Watertown	\$487.51	\$975.02	\$828.77	\$1,389.40

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**Exhibit C**

MVP Form ID	Benefit Description	Small vs Individual	Standard vs Non-Standard	Metal Level	Rate Region	2015			
						Single	Single + Spouse	Single + Child(ren)	Single + Spouse + Child(ren)
NY-HMO-DG-003-N (2015)	Non-Standard Gold 3	Individual	Non-Standard	Gold	7 Utica/ Watertown	\$510.75	\$1,021.50	\$868.28	\$1,455.64
NY-HMO-DG-004-N (2015)	Non-Standard Gold 4	Individual	Non-Standard	Gold	7 Utica/ Watertown	\$541.33	\$1,082.66	\$920.26	\$1,542.79
NY-HMO-DG-005-N (2015)	Non-Standard Gold 5	Individual	Non-Standard	Gold	7 Utica/ Watertown	\$512.59	\$1,025.18	\$871.40	\$1,460.88
NY-POS-DP-001-S (2015)	CompCare POS Replacement	Individual	Standard	Platinum	7 Utica/ Watertown	\$736.27	\$1,472.54	\$1,251.66	\$2,098.37
NY-HMO-DP-001-N (2015)	Non-Standard Platinum 1	Individual	Non-Standard	Platinum	7 Utica/ Watertown	\$607.98	\$1,215.96	\$1,033.57	\$1,732.74
NY-HMO-DP-002-N (2015)	Non-Standard Platinum 2	Individual	Non-Standard	Platinum	7 Utica/ Watertown	\$614.49	\$1,228.98	\$1,044.63	\$1,751.30
NY-X-100	Dependent Through Age 29	Individual	Standard & Non-Standard	All Metal	Leve 1 Albany	1.00%	1.00%	1.00%	1.00%
NY-X-100	Dependent Through Age 29	Individual	Standard & Non-Standard	All Metal	Leve 2 Buffalo	1.00%	1.00%	1.00%	1.00%
NY-X-100	Dependent Through Age 29	Individual	Standard & Non-Standard	All Metal	Leve 3 Mid-Hudson	1.00%	1.00%	1.00%	1.00%
NY-X-100	Dependent Through Age 29	Individual	Standard & Non-Standard	All Metal	Leve 4 NYC	1.00%	1.00%	1.00%	1.00%
NY-X-100	Dependent Through Age 29	Individual	Standard & Non-Standard	All Metal	Leve 5 Rochester	1.00%	1.00%	1.00%	1.00%
NY-X-100	Dependent Through Age 29	Individual	Standard & Non-Standard	All Metal	Leve 6 Syracuse	1.00%	1.00%	1.00%	1.00%
NY-X-100	Dependent Through Age 29	Individual	Standard & Non-Standard	All Metal Levels	7 Utica/ Watertown	1.00%	1.00%	1.00%	1.00%
NY-X-USNF	Unlimited Skilled Nursing Facility	Individual	Standard & Non-Standard	All Metal Levels	1 Albany	3.00%	3.00%	3.00%	3.00%
NY-X-USNF	Unlimited Skilled Nursing Facility	Individual	Standard & Non-Standard	All Metal Levels	2 Buffalo	3.00%	3.00%	3.00%	3.00%
NY-X-USNF	Unlimited Skilled Nursing Facility	Individual	Standard & Non-Standard	All Metal Levels	3 Mid-Hudson	3.00%	3.00%	3.00%	3.00%
NY-X-USNF	Unlimited Skilled Nursing Facility	Individual	Standard & Non-Standard	All Metal Levels	4 NYC	3.00%	3.00%	3.00%	3.00%
NY-X-USNF	Unlimited Skilled Nursing Facility	Individual	Standard & Non-Standard	All Metal Levels	5 Rochester	3.00%	3.00%	3.00%	3.00%
NY-X-USNF	Unlimited Skilled Nursing Facility	Individual	Standard & Non-Standard	All Metal Levels	6 Syracuse	3.00%	3.00%	3.00%	3.00%
NY-X-USNF	Unlimited Skilled Nursing Facility	Individual	Standard & Non-Standard	All Metal Levels	7 Utica/ Watertown	3.00%	3.00%	3.00%	3.00%

## MVP Health Plan, Inc.

## Exhibit C.1

Premiums for Child Only Designs

Effective January 1, 2015

Version 9/26/14

MVP Form ID	Benefit Description	Small vs Individual	Standard vs Non-Standard	Metal Level	Rate Region	2015		
						Child Only (1 Child)	Child Only (2 Children)	Child Only (3+ Children)
NY-HMOH-DB-001-S-CO (2015)	Standard Bronze	Individual	Standard	Bronze	1 Albany	\$137.23	\$274.46	\$411.69
NY-HMO-DS-001-S-CO (2015)	Standard Silver	Individual	Standard	Silver	1 Albany	\$171.62	\$343.24	\$514.86
NY-HMO-DG-001-S-CO (2015)	Standard Gold	Individual	Standard	Gold	1 Albany	\$205.34	\$410.68	\$616.02
NY-HMO-DP-001-S-CO (2015)	Standard Platinum	Individual	Standard	Platinum	1 Albany	\$242.29	\$484.58	\$726.87
NY-HMOH-DB-001-S-CO (2015)	Standard Bronze	Individual	Standard	Bronze	2 Buffalo	\$124.70	\$249.40	\$374.10
NY-HMO-DS-001-S-CO (2015)	Standard Silver	Individual	Standard	Silver	2 Buffalo	\$155.94	\$311.88	\$467.82
NY-HMO-DG-001-S-CO (2015)	Standard Gold	Individual	Standard	Gold	2 Buffalo	\$186.58	\$373.16	\$559.74
NY-HMO-DP-001-S-CO (2015)	Standard Platinum	Individual	Standard	Platinum	2 Buffalo	\$220.16	\$440.32	\$660.48
NY-HMOH-DB-001-S-CO (2015)	Standard Bronze	Individual	Standard	Bronze	3 Mid-Hudson	\$168.00	\$336.00	\$504.00
NY-HMO-DS-001-S-CO (2015)	Standard Silver	Individual	Standard	Silver	3 Mid-Hudson	\$210.09	\$420.18	\$630.27
NY-HMO-DG-001-S-CO (2015)	Standard Gold	Individual	Standard	Gold	3 Mid-Hudson	\$251.37	\$502.74	\$754.11
NY-HMO-DP-001-S-CO (2015)	Standard Platinum	Individual	Standard	Platinum	3 Mid-Hudson	\$296.61	\$593.22	\$889.83
NY-HMOH-DB-001-S-CO (2015)	Standard Bronze	Individual	Standard	Bronze	4 NYC	\$142.47	\$284.94	\$427.41
NY-HMO-DS-001-S-CO (2015)	Standard Silver	Individual	Standard	Silver	4 NYC	\$178.17	\$356.34	\$534.51
NY-HMO-DG-001-S-CO (2015)	Standard Gold	Individual	Standard	Gold	4 NYC	\$213.18	\$426.36	\$639.54
NY-HMO-DP-001-S-CO (2015)	Standard Platinum	Individual	Standard	Platinum	4 NYC	\$251.55	\$503.10	\$754.65
NY-HMOH-DB-001-S-CO (2015)	Standard Bronze	Individual	Standard	Bronze	5 Rochester	\$120.41	\$240.82	\$361.23
NY-HMO-DS-001-S-CO (2015)	Standard Silver	Individual	Standard	Silver	5 Rochester	\$150.58	\$301.16	\$451.74
NY-HMO-DG-001-S-CO (2015)	Standard Gold	Individual	Standard	Gold	5 Rochester	\$180.17	\$360.34	\$540.51
NY-HMO-DP-001-S-CO (2015)	Standard Platinum	Individual	Standard	Platinum	5 Rochester	\$212.60	\$425.20	\$637.80
NY-HMOH-DB-001-S-CO (2015)	Standard Bronze	Individual	Standard	Bronze	6 Syracuse	\$156.82	\$313.64	\$470.46
NY-HMO-DS-001-S-CO (2015)	Standard Silver	Individual	Standard	Silver	6 Syracuse	\$196.11	\$392.22	\$588.33
NY-HMO-DG-001-S-CO (2015)	Standard Gold	Individual	Standard	Gold	6 Syracuse	\$234.65	\$469.30	\$703.95
NY-HMO-DP-001-S-CO (2015)	Standard Platinum	Individual	Standard	Platinum	6 Syracuse	\$276.88	\$553.76	\$830.64
NY-HMOH-DB-001-S-CO (2015)	Standard Bronze	Individual	Standard	Bronze	7 Utica/ Watertown	\$147.04	\$294.08	\$441.12
NY-HMO-DS-001-S-CO (2015)	Standard Silver	Individual	Standard	Silver	7 Utica/ Watertown	\$183.88	\$367.76	\$551.64
NY-HMO-DG-001-S-CO (2015)	Standard Gold	Individual	Standard	Gold	7 Utica/ Watertown	\$220.00	\$440.00	\$660.00
NY-HMO-DP-001-S-CO (2015)	Standard Platinum	Individual	Standard	Platinum	7 Utica/ Watertown	\$259.60	\$519.20	\$778.80
NY-X-USNF	Unlimited Skilled Nursing Facility	Individual	Standard & Non-Standard	All Metal Levels	1 Albany	3.00%	3.00%	3.00%
NY-X-USNF	Unlimited Skilled Nursing Facility	Individual	Standard & Non-Standard	All Metal Levels	2 Buffalo	3.00%	3.00%	3.00%

**MVP Health Plan, Inc.**

Premiums for Child Only Designs

Effective January 1, 2015

Version 9/26/14

MVP Form ID	Benefit Description	Small vs Individual	Standard vs Non-Standard	Metal Level	Rate Region	2015		
						Child Only (1 Child)	Child Only (2 Children)	Child Only (3+ Children)
NY-X-USNF	Unlimited Skilled Nursing Facility	Individual	Standard & Non-Standard	All Metal Levels	3 Mid-Hudson	3.00%	3.00%	3.00%
NY-X-USNF	Unlimited Skilled Nursing Facility	Individual	Standard & Non-Standard	All Metal Levels	4 NYC	3.00%	3.00%	3.00%
NY-X-USNF	Unlimited Skilled Nursing Facility	Individual	Standard & Non-Standard	All Metal Levels	5 Rochester	3.00%	3.00%	3.00%
NY-X-USNF	Unlimited Skilled Nursing Facility	Individual	Standard & Non-Standard	All Metal Levels	6 Syracuse	3.00%	3.00%	3.00%
NY-X-USNF	Unlimited Skilled Nursing Facility	Individual	Standard & Non-Standard	All Metal Levels	7 Utica/ Watertown	3.00%	3.00%	3.00%

**MVP Health Plan, Inc.****Exhibit D**

Example of Premium Calculation with Rider

Effective January 1, 2015

Version 9/26/14

NYS Target Loss Ratio for Overall Book of Business

84.72%

MVP Form ID	NY-HMO-DG-001-S (2015)	NY-HMO-DG-001-S (2015)	NY-HMO-DG-001-S (2015)	NY-HMO-DG-001-S-CO (2015)
Rate Region	1 Albany	1 Albany	1 Albany	1 Albany
Benefit Description	Standard Gold	Standard Gold	Standard Gold	Standard Gold
Small vs Individual	Individual	Individual	Individual	Individual
Metal Level	Gold	Gold	Gold	Gold
Contract Type	Single + Spouse	Single + Child(ren)	Single + Spouse + Child(ren)	Child Only (1 Child)
Family Planning Exclusion Rider?	Not Available	Not Available	Not Available	Not Available
Domestic Partner Rider?	In the Base	In the Base	In the Base	Not Available
Dependent Through Age 29 Rider?	No	Yes: NY-X-100	No	Not Available
Unlimited Skilled Nursing Facility Rider?	No	Yes: NY-X-USNF	Yes: NY-X-USNF	No
A) First Quarter 2015 Coplan Premium	\$996.80	\$847.28	\$1,420.44	\$205.34
B) Family Planning Exclusion Rider				
C) Domestic Partner Rider				
D) Dependent Through Age 29 Rider		1.00%		
E) Unlimited Skilled Nursing Facility Rider		3.00%	3.00%	
2015 Gross Premium, after Rider(s) = $[A + B] * [1 + C] * [1 + D] * [1 + E]$	\$996.80	\$881.43	\$1,463.05	\$205.34

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

### 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.  
**OR**
3. Any new agency that brought MVP 200 or more members (large group HMO/EPO/PPO/HDHP membership) within the first 2 quarters of 2014 would be eligible for the Net Growth Bonus.

### 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). **OR-** For new agency that brought MVP 200 or more members within the first 2 quarters of 2014 would be eligible for the Net Growth Bonus.
2. 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.
3. 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.
4. 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. Bonus applies to new sales and total MVP takeover of existing groups, which result in contract growth over 50 contracts.

## 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)

**2014 Broker Commission Schedule  
Effective January 1, 2014**

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.

**MVP Health Plan, Inc.**  
Underwriting Guidelines  
Effective January 1, 2015  
Version 9/26/14

**Exhibit F**

Underwriting guidelines are currently under review with DFS.