

STATE OF MAINE
DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION
BUREAU OF INSURANCE

IN RE:)	
)	
AETNA HEALTH, INC. 2017 “WHOLE)	FOURTH INFORMATION
HEALTH” INDIVIDUAL RATE FILING)	REQUEST OF THE
)	SUPERINTENDENT
Docket No. INS-16-1001)	

Superintendent of Insurance Eric Cioppa hereby directs Aetna to provide written responses and produce documents responsive to the numbered information requests below. Aetna shall furnish all requested information and documents regardless of whether it is in the possession, custody, or control of Aetna or any subsidiary, affiliate, or parent of Aetna. If Aetna refuses for any reason to provide any of the information or documents requested, Aetna must file with the Superintendent, no later than July 12, 2016, a written objection describing the reason for such refusal.

Each of the Requests below is continuing in nature. Aetna must supplement the responses provided should the information change or more information become available at any time during the pendency of this proceeding.

If hard copy, paper responses of electronic spreadsheet files are provided in response to any request, Aetna also shall file via e-mail the electronic spreadsheet version of the file (*e.g.*, Excel) with embedded formulas included (*i.e.*, active files). Designate with particularity any documents or information requested provided under claim of confidentiality, and provide a statement for the legal basis for the claim of confidentiality.

In responding, Aetna shall comply with the requirements and deadlines established by the May 16, 2016, Procedural Order issued in this proceeding.

REQUESTS

1. Regarding morbidity changes, the Actuarial Memorandum states, “Given the lack of credibility of Aetna’s existing Individual population, we are not modeling any changes to our anticipated 2017 Individual population.” However, Anthem is terminating its grandfathered and transitional plans at the end of 2016 and those members will be entering the ACA market. Given that Aetna’s proposed rates are the lowest in Maine at all metal levels in all areas, many of the terminated Anthem members may choose Aetna plans. Anthem has reported that the grandfathered members in particular have significantly higher risk scores than ACA members. In light of this, is a morbidity adjustment needed? Please explain.

2. Regarding the benefit pricing model discussed in item 2 of Aetna's Responses to the Superintendent's Second Information Request:
 - a. Please provide further detail as to how the impact of morbidity differences among plans is removed.
 - b. Please explain what is meant by "steerage" and how this adjustment is determined.

PER ORDER OF THE SUPERINTENDENT OF INSURANCE

July 8, 2016



ERIC A. CIOPPA
Superintendent of Insurance