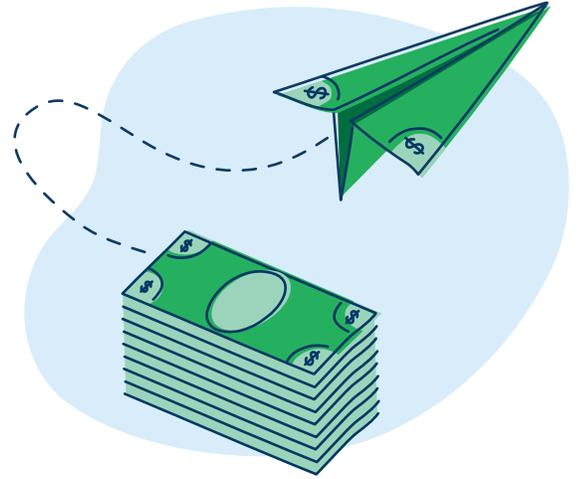


<Member Name>
<Address Line 1>
<Address Line 2>
<City>, <State> <ZIP>



Dear <Member First Name>,

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In 2021, your employer and our care management team worked hard to keep you healthy. The Affordable Care Act requires we spend at least 85% of all premiums collected from your employer on health care services and wellness programs. Since we didn't reach that number, your employer is receiving a rebate.

What's left will help us cover business expenses like administrative and overhead costs. Now that's what we'd call a win-win. Take a look at the enclosed required Centers for Medicare & Medicaid Services notice for additional details.

Your employer is responsible for determining how the rebate will be distributed or credited to employees, as described in our insurance contract and governing plan documents. If you have any questions after reading this letter, please reach out to your employer.

Sincerely,

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Sample Client & Subscriber CMS Letter



Independent Licensees of the Blue Cross and Blue Shield Association
FAPHM-103B
120 Fifth Ave. Place
Pittsburgh, PA 15222

September 2022

<<Member Name>>
<< Member Address Line 1>>
<< Member Address Line 2>>
<< Member City>>, << Member State>> << Member Zip>>

Notice of Health Insurance Premium Rebate

Re: Health Insurance Premium Rebate for Year 2021; Client # <<Client Number>>
<<CONTACT FIRST NAME>>

Dear <<Member First Name Name>>:

This letter is to inform you that First Priority Health will be rebating a portion of your health insurance premiums through your employer or group policyholder. This rebate is required by the Affordable Care Act – the health reform law.

The Affordable Care Act requires First Priority Health to rebate part of the premiums it received if it does not spend at least 85 percent of the premiums First Priority Health receives on health care services, such as doctors and hospital bills and activities to improve health care quality, such as efforts to improve patient safety. No more than 15 percent of premiums may be spent on administrative costs such as salaries, sales, and advertising. This is referred to as the "Medical Loss Ratio" standard or the 85/15 rule. The 85/15 rule in the Affordable Care Act is intended to ensure that consumers get value for their health care dollars. You can learn more about the 85/15 rule and other provisions of the health reform law at: <https://www.healthcare.gov/health-care-law-protections/rate-review/>.

What the Medical Loss Ratio Rule Means to You

The Medical Loss Ratio rule is calculated on a state-by-state basis. In Pennsylvania, First Priority Health did not meet the 85/15 standard. In 2021, First Priority Health spent only 80.3% of a total of \$23,974,133 in premium dollars on health care and activities to improve health care quality. Since it missed the 85 percent target by 4.7% of premiums it receives, First Priority Health must rebate 4.7% of the total health insurance premiums paid by the employer and employees in your group health plan. We are required to send this rebate to your employer or group policyholder by September 30, 2022, or apply this rebate to the health insurance premium that is due on or after September 30, 2022. Employers or group policyholders must follow certain rules for distributing the rebate to you.

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Ways in Which an Employer Can Distribute the Rebate

If your group health plan is a non-Federal governmental plan, the employer or group policyholder must distribute the rebate in one of two ways:

- Reducing premium for the upcoming year; or
- Providing a cash rebate to employees or subscribers that were covered by the health insurance on which the rebate is based.

If your group health plan is a church plan, the employer or group policyholder has agreed to distribute the portion of the rebate that is based on the total amount all of the employees contributed to the health insurance premium in one of the ways discussed in the prior paragraph.

If your group health plan is not a government plan or a church plan, it likely is subject to the Federal Employee Retirement Income Security Act of 1974 (ERISA). Under ERISA, the employer or the administrator of the group health plan may have fiduciary responsibilities regarding use of the Medical Loss Ratio rebates. Some or all of the rebate may be an asset of the plan, which must be used for the benefit of the employees covered by the policy. Employees or subscribers should contact the employer or group policyholder directly for information on how the rebate will be used. For general information about your rights regarding the rebate, you may contact the Department of Labor's Employee Benefits Security Administration at 1-866-444-EBSA (3272) or review the Department's technical guidance on this issue on its website at: <https://www.dol.gov/agencies/ebsa/employers-and-advisers/guidance/technical-releases/11-04>.

Need more information?

If you have any questions about the Medical Loss Ratio and your health insurance coverage, please contact Highmark toll-free at 1-800-345-3806 or www.HighmarkBCBS.com.

Contact your employer or Administrator directly for information on how the rebate will be distributed. For general information about your rights regarding the rebate if your group health plan is subject to ERISA, you may contact the Department of Labor's Employee Benefits Security Administration at 1-866-444-EBSA (3272) or review the Department's technical guidance on this issue on its website at: <https://www.dol.gov/agencies/ebsa/employers-and-advisers/guidance/technical-releases/11-04>.

Sincerely,

Joseph Haddock

Joseph Haddock, President
First Priority Health

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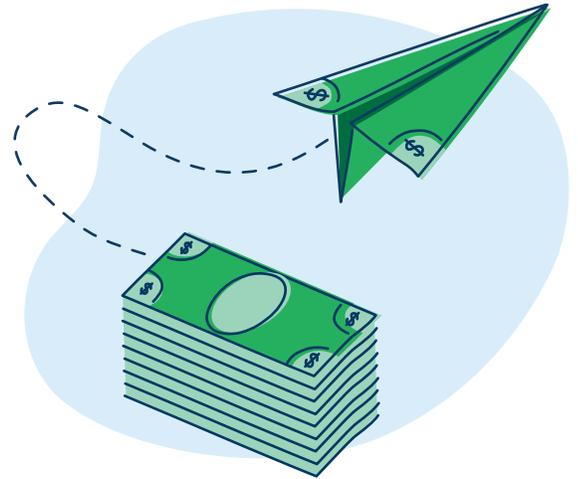
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<<Company Name>> Client Number: <<XXXXXX>>

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