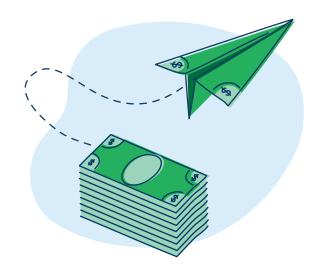
September 2022

HIGHMARK. DELAWARE c/o Highmark Inc. - FAPHM-103B 120 Fifth Ave. Pittsburgh, PA 15222

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



Dear <Client First Name>,

We're sending you this letter to let you know that Highmark Blue Cross Blue Shield Delaware will be sending you a Medical Loss Ratio (MLR) rebate check. This rebate is required by the Affordable Care Act — the health reform law that ensures you have access to affordable health care.

This check is real — you can deposit it as soon as it arrives in your mailbox.

Let us break down why you're getting money back. In 2021, you and Highmark Blue Cross Blue Shield Delaware's care management team worked hard to keep our members healthy. The Affordable Care Act requires we spend at least 80% of all premiums on health care services and wellness programs. And since we didn't reach that number, you're 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.

What should you do next?

Your rebate will arrive near the end of September 2022. Once you receive the check, open it, deposit it, and distribute it to your eligible employees or as specifically described in our insurance contract and governing plan documents. See the required Centers for Medicare & Medicaid Services notice enclosed with your check for questions about how your company is obligated and allowed to use this money, or you can contact your insurance broker, client manager, or benefits counsel.

Sincerely,

Highmark Blue Cross Blue Shield Delaware

Highmark Blue Cross Blue Shield Delaware is an independent licensee of the Blue Cross Blue Shield Association.

Information regarding the Patient Protection and Affordable Care Act of 2010 (a.k.a. "PPACA", "Affordable Care Act", "ACA", and/or "Health Care Reform"), as amended, and/or any other law, does not constitute legal or tax advice and is subject to change based upon the issuance of new guidance and/or change in laws.

Discrimination is Against the Law

The Claims Administrator/Insurer complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. The Claims Administrator/Insurer does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. The Claims Administrator/Insurer:

• Provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
- Qualified interpreters
- Information written in other languages

If you need these services, contact the Civil Rights Coordinator.

If you believe that the Claims Administrator/Insurer has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with: Civil Rights Coordinator, P.O. Box 22492, Pittsburgh, PA 15222, Phone: 1-866-286-8295, TTY: 711, Fax: 412-544-2475, email: CivilRightsCoordinator@highmarkhealth.org. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Civil Rights Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services 200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201 1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

If you speak English, language assistance services, free of charge, are available to you. Call 1-877-959-2563.

Si usted habla español, servicios de asistencia lingüística, de forma gratuita, están disponibles para usted. Llame al 1-877-959-2563.

如果您说中文,可向您提供免费语言协助服务。 請致電 1-877-959-2563.

Nếu quý vị nói tiếng Việt, chúng tôi cung cấp dịch vụ hỗ trợ ngôn ngữ miễn phí cho quý vị. Xin gọi số 1-877-959-2563.

한국어를 사용하시는 분들을 위해 무료 통역이 제공됩니다. 1-877-959-2563 로 전화.

Kung nagsasalita ka ng Tagalog, may makukuha kang mga libreng serbisyong tulong sa wika. Tumawag sa 1-877-959-2563.

Если вы говорите по-русски, вы можете воспользоваться бесплатными услугами языковой поддержки. Звоните 1-877-959-2563.

إذا كنت تتحدث اللغة العربية، فهناك خدمات المعاونة في اللغة المجانية متاحة لك. اتصل على الرقم 2563-959-1-877 .

Si se Kreyòl Ayisyen ou pale, gen sèvis entèprèt, gratis-ticheri, ki la pou ede w. Rele nan 1-877-959-2563.

Si vous parlez français, les services d'assistance linguistique, gratuitement, sont à votre disposition. Appelez au 1-877-959-2563.

Dla osób mówiących po polsku dostępna jest bezpłatna pomoc językowa. Zadzwoń 1-877-959-2563.

Se a sua língua é o português, temos atendimento gratuito para você no seu idioma. Ligue para 1-877-959-2563.

Se parla italiano, per lei sono disponibili servizi di assistenza linguistica a titolo gratuito. Chiamare l'1-877-959-2563.

Wenn Sie Deutsch sprechen, steht Ihnen unsere fremdsprachliche Unterstützung kostenlos zur Verfügung. Rufen Sie 1-877-959-2563.

日本語が母国語の方は言語アシスタンス・ サービスを無料でご利用いただけます。 1-877-959-2563 を呼び出します。

اگر شما به زبان فارسی صحبت می کنید، خدمات کمک زبان رایگان با تماس با شماره 2563-959-1-877 .



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

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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>>

Dear << Member First Name>:

This letter is to inform you that Highmark Blue Cross Blue Shield Delaware 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 Highmark Blue Cross Blue Shield Delaware to rebate part of the premiums it received if it does not spend at least 80 percent of the premiums Highmark Blue Cross Blue Shield Delaware 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 20 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 80/20 rule. The 80/20 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 80/20 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 Delaware, Highmark Blue Cross Blue Shield Delaware did not meet the 80/20 standard. In 2021, Highmark Blue Cross Blue Shield Delaware spent only 79.2% of a total of \$147,337,613 in premium dollars on health care and activities to improve health care quality. Since it missed the 80 percent target by 0.8% of premiums it receives, Highmark Blue Cross Blue Shield Delaware must rebate 0.8% 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.

Highmark Blue Cross Blue Shield Delaware is an independent licensee of the Blue Cross Blue Shield Association.

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 1-800-241-5704 or <u>www.HighmarkBlueShield.com</u>.

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, *Nickolas Moriello* Nicholas Moriello, President Highmark Blue Cross Blue Shield Delaware

Discrimination is Against the Law

The Claims Administrator/Insurer complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. The Claims Administrator/Insurer does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. The Claims Administrator/Insurer:

- · Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- · Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact the Civil Rights Coordinator.

If you believe that the Claims Administrator/Insurer has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with: Civil Rights Coordinator, P.O. Box 22492, Pittsburgh, PA 15222, Phone: 1-866-286-8295, TTY: 711, Fax: 412-544-2475, email: CivilRightsCoordinator@highmarkhealth.org. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Civil Rights Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services 200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201 1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

If you speak English, language assistance services, free of charge, are available to you. Call 1-877-959-2563.

Si usted habla español, servicios de asistencia lingüística, de forma gratuita, están disponibles para usted. Llame al 1-877-959-2563.

如果您说中文,可向您提供免费语言协助服务。 請致電 1-877-959-2563.

Nếu quý vị nói tiếng Việt, chúng tôi cung cấp dịch vụ hỗ trợ ngôn ngữ miễn phí cho quý vị. Xin gọi số 1-877-959-2563.

한국어를 사용하시는 분들을 위해 무료 통역이 제공됩니다. 1-877-959-2563 로 전화.

Kung nagsasalita ka ng Tagalog, may makukuha kang mga libreng serbisyong tulong sa wika. Tumawag sa 1-877-959-2563.

Если вы говорите по-русски, вы можете воспользоваться бесплатными услугами языковой поддержки. Звоните 1-877-959-2563.

إذا كنت تتحدث اللغة العربية، فهناك خدمات المعاونة في اللغة المجانية متاحة لك. اتصل على الرقم 2563-877-1.

Si se Kreyòl Ayisyen ou pale, gen sèvis entèprèt, gratis-ticheri, ki la pou ede w. Rele nan 1-877-959-2563.

Si vous parlez français, les services d'assistance linguistique, gratuitement, sont à votre disposition. Appelez au 1-877-959-2563.

Dla osób mówiących po polsku dostępna jest bezpłatna pomoc językowa. Zadzwoń 1-877-959-2563.

Se a sua língua é o português, temos atendimento gratuito para você no seu idioma. Ligue para 1-877-959-2563.

Se parla italiano, per lei sono disponibili servizi di assistenza linguistica a titolo gratuito. Chiamare l'1-877-959-2563.

Wenn Sie Deutsch sprechen, steht Ihnen unsere fremdsprachliche Unterstützung kostenlos zur Verfügung. Rufen Sie 1-877-959-2563.

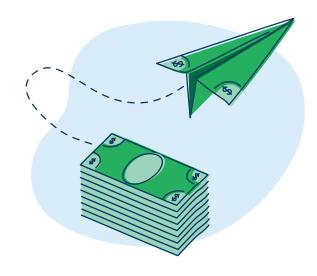
日本語が母国語の方は言語アシスタンス・ サービスを無料でご利用いただけます。 1-877-959-2563 を呼び出します。

اگر شما به زبان فارسی صحبت می کنید، خدمات کمک زبان رایگان با تماس با شمار ه 2563-959-1871 .

September 2022

HIGHMARK. 🗐 🕅 DELAWARE c/o Highmark Inc. - FAPHM-103B 120 Fifth Ave. Pittsburgh, PA 15222

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



Dear <Member First Name>,

We're sending you this letter to let you know that a rebate check from Highmark Blue Cross Blue Shield Delaware is being sent to your employer. This rebate is required by the Affordable Care Act — the health reform law that ensures you have access to affordable health care.

In 2021, your employer and Highmark Blue Cross Blue Shield Delaware's care management team worked hard to keep members healthy. The Affordable Care Act requires we spend at least 80% 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,

Highmark Blue Cross Blue Shield Delaware

Highmark Blue Cross Blue Shield Delaware is an independent licensee of the Blue Cross Blue Shield Association.

Information regarding the Patient Protection and Affordable Care Act of 2010 (a.k.a. "PPACA", "Affordable Care Act", "ACA", and/or "Health Care Reform"), as amended, and/or any other law, does not constitute legal or tax advice and is subject to change based upon the issuance of new guidance and/or change in laws.

Discrimination is Against the Law

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• Provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters
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