



**EmblemHealth®**

GHI and HIP are EmblemHealth companies

55 Water Street, New York, New York 10041-8190

**Advance Notice About Changes To Your  
HIP Health Plan Of New York Premium Rates**

«Date»

«GROUPNUM»  
«GROUPNAME» «GROUPNAMEEXT»  
«CONTACTNAME»  
«SERVSTREET»  
«SERVCITY», «SERVESTATE» «SERVZIP5»

**Selling Agent:**  
«BUSNAME»  
«BUSSTREET»  
«BUSCITY», «BUSSTATE» «BUSZIP»

Dear «CONTACTNAME»:

We recently wrote to let you know that we are applying to the New York State Insurance Department (“NYSID”) for a rate change effective on policy renewals beginning the third quarter of 2011. The purpose of this letter is to inform you that the requested increase in our previous letter was incorrect. We regret any inconvenience.

If approved, the proposed increase noted below will be added to our currently approved April 2011 filed rates, including any riders.

Renewal Date  
July – September 2011

Requested Increase  
Approximately 1.9%

Please note that the requested increase above does **not** reflect your total renewal rate increase. Our currently approved April 2011 rates, which are not included in the requested percentage increase above, factor into your renewal rate the increase requested from NYSID, plus the following components:

1. Rate increases previously filed (which were not subject to NYSID approval), which generally make up the major portion of the April 2011 rate.
2. The impact of federal health care reform, which is valued at approximately 2.1 percent of the total premium (please see the reverse side of this letter for more information about health care reform).

On the reverse side of this letter you will find a chart that shows the range of total rate changes for the various HIP products. To see the range of rate increases that apply to you, find the name of your plan (located on your ID card) on the left side of the chart.

If you would like additional information about the proposed change, or you would like to submit written comments about the change to us or to NYSID, you may do so within 30 days of «Date»:

EmblemHealth  
PremiumRateFilings@emblemhealth.com  
**1-877-444-7417**

New York State Insurance Department  
PremiumRateIncreases@ins.state.ny.us  
**1-800-342-3736**

EmblemHealth  
Attn: Premium Rate Filings  
PO Box 2890  
New York, NY 10117-2087

Charles Lovejoy  
Health Bureau  
NYS Insurance Dept.  
25 Beaver Street  
New York, NY 10004

*Continued on reverse side*

**Please notify your covered employees of the proposed changes and of any potential changes to their premium contribution as soon after receiving this letter as possible.**

We will notify you of your final, approved premium rates approximately 60 days before your «ANNIV\_TXT» renewal date. At that time, you will have an opportunity to discuss with your broker a variety of plan options we offer that might enable you to reduce your premiums.

We value our relationship with you and look forward to continuing to meet your health coverage needs.

Sincerely,



William Dunne  
Vice President, Commercial Account Management

<b>Plan</b>	<b>Increase</b>
HIP Prime <sup>®</sup> HMO	7.7 – 12.7%
HIPaccess <sup>®</sup> I	8.2 – 13.2%
HIP Prime <sup>®</sup> POS	8.2 – 13.2 %
HIPaccess <sup>®</sup> II	8.2 – 13.2 %

**MORE ABOUT HEALTH REFORM**

The federal health reform law brings significant changes to health care coverage. The Affordable Care Act, commonly known as health reform, has a 10-year implementation period. The most immediate product benefit changes, effective on your renewal date, are the following:

- There are no annual and lifetime dollar limits for essential benefits<sup>1</sup> on policies issued or renewed after September 23, 2010.
- For policies issued or renewed after September 23, 2010, pre-existing condition limitations will be waived for enrollees under age 19. Pre-existing condition exclusions will be eliminated for all members, for policies issued or renewed January 11, 2014, or after.
- Continued coverage for dependents on their parents' health plan until age 26 (end of month).<sup>2</sup>
- Elimination of in-network cost-sharing for preventive care services.
- Identical copays and coinsurance for emergency room services whether obtained in network or out of network.

For more information about health reform, please visit our website at [www.emblemhealthreform.com](http://www.emblemhealthreform.com). \_

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1. "Essential Benefits" include ambulatory care; emergency services; hospitalization; maternity and newborn care; mental health and substance use disorder services, including behavioral health treatment; prescription drugs; rehabilitative and habilitative care; laboratory services; preventive and wellness services and chronic disease management, and pediatric services, including oral and vision care.

2. If your benefit plan provides dependent coverage through age 29, that coverage will remain in effect unless you drop your extended dependent coverage rider.