

Dear Employer:

Please ask your employees to review this letter, the enclosed Renewal Rates and the Summary Benefit Plans before making their 2012 selections. The summary benefit plans are on the Alliance website (www.liahealthalliance.com). Employees who did not participate in 2011 have an opportunity to enroll now.

You will no longer be billed separately for the annual billing fee of \$120 at renewal.

A monthly billing fee of \$10 will be due with your payment each month.

EMBLEM HEALTH

Emblem Health Underwriting Changes:

- Groups with Emblem EPO/PPO plans must have a minimum of 2 enrollees in Emblem and/or HIP plans in order to renew into the Emblem EPO/PPO. ***Groups with only 1 active member may choose an Emblem HMO or HIP HMO plan. If a member does not choose a particular HMO plan, they will automatically be moved to the Comprehealth HMO 25/40 500 plan.***
- Emblem members may renew in their existing plan if available.

Existing Emblem members who want to change plans at renewal may **ONLY** change into your group's existing plan(s) (*that other employees are enrolled in*), or they may select from plans available for new business*.

New members to Emblem may select **ONLY** from your existing plan(s) or plans available for new business*.

*Emblem plans available for new business are: CS EPO 40/2500/80, CS EPO 40/2500/80A, EPO 40/1000/750, PPO 40/500/5000, Comprehealth HMO 30/50/1000, or HMO 30/50/1000A

- If your group decides to make plan changes at renewal, the group **MUST** be in compliance with Emblem Health Small Group Underwriting Guidelines. Therefore, if your group decides to select new Emblem plans at renewal, you may choose only 1 plan from each plan type (EPO, CS EPO, PPO, HSA EPO, HSA PPO) with a maximum of 4 plan selections.
- **If your group has both Emblem & HIP plans, you must choose the same rate tier for both. If you previously had different rate tiers for HIP & Emblem and do not select a rate tier on the Pink Renewal Employer Agreement form, all HIP & Emblem rates will be 4 Tier at renewal.**

Plans No Longer Available:

- *The following Cost Sharing plans are no longer available for new business or renewal. If a member does not choose another plan, they will automatically be moved into the plan in the column next to it.*

PLANS NO LONGER AVAILABLE

CS EPO 30/1000
CS EPO 30/2000

WILL BE MOVED INTO

CS EPO 40/2000
CS EPO 40/2000

- *The following Non Cost Sharing plans are no longer available for new business or renewal. If a member does not choose another plan, they will automatically be moved into the plan in the column next to it.*

PLANS NO LONGER AVAILABLE

EPO 30/1000B
EPO 30/1000A
EPO 20
PPO 40/500/3000
PPO 30/300/2000
PPO 30/300/2000A
PPO 25/1000
PPO 30/1000
COMPR HMO 20/25/200

WILL BE MOVED INTO

EPO 40/1000A
EPO 40/1000A
EPO 30/1000
PPO 40/500/5000 if 4 Tier/ EPO 40 1000 if 2 Tier*
PPO 40/500/5000 if 4 Tier/ EPO 40 1000 if 2 Tier*
PPO 40/500/5000 if 4 Tier/ EPO 40 1000 if 2 Tier*
PPO 40/500/5000 if 4 Tier/ EPO 40 1000 if 2 Tier*
PPO 40/500/5000 if 4 Tier/ EPO 40 1000 if 2 Tier*
COMPR HMO 25/40/500A

* Emblem PPO plans are no longer available with 2 Tier Rates.

- *The following Consumer Driven plans are no longer available for new business or renewal. If a member does not choose another plan, they will automatically be moved into the plan in the column next to it.*

PLANS NO LONGER AVAILABLE

EPO 1200 80% INDEXED
 EPO 2500 70%
 EPO 1500 100% INDEXED
 EPO 10,000 100%
 EPO 3000 100%
 PPO 1200 80 % INDEXED
 PPO 2500 100%
 PPO 2500 80%
 PPO 5000 100%

WILL BE MOVED INTO

EPO 3000 80% INDEXED
 EPO 3000 80% INDEXED
 EPO 3000 80% INDEXED
 EPO 3000 80% INDEXED
 EPO 3000 80% INDEXED
 PPO 3000/6000 80/60
 PPO 3000/6000 80/60
 PPO 3000/6000 80/60
 PPO 3000/6000 80/60

Atlantis is now

Easy Choice Health Plan of NY

- \$0 Copay for Generic Drugs on some plans.
- \$0 Copay in Medical Groups.
- Employees that enroll in Easy Choice must live or work in Manhattan, Brooklyn, Queens, Bronx or Staten Island.
- As a result of changes from Federal Healthcare Reform ("PPACA") the Prescription Drug Rider on some plans has been modified. Brand Prescriptions have been removed completely from Mandatory Generic Plans. There will be no exceptions for brand approval. These plans will be strict Generic Only plans. This applies to Consumer Plan #1, Traditional Plans 1, 2, 7 & 8.

GHI

- Former GHI plans that are available on the Emblem platform are listed under Emblem Health on the enclosed rate sheets.
- The following GHI plans are no longer available for new business or renewal. If a member does not choose another plan, they will automatically be moved into the plan in the column next to it.

PLANS NO LONGER AVAILABLE

GHI PPO 20/500
 GHI PPO 30/1000G

WILL BE MOVED INTO

EMBLEM PPO 40/500/5000 if 4 Tier/ EPO 40 1000 if 2 Tier*
 EMBLEM PPO 40/500/5000 if 4 Tier/ EPO 40 1000 if 2 Tier*

* Emblem PPO plans are no longer available with 2 Tier Rates.

HIP / Vytra

HIP/Vytra is no longer available

- The following plans are no longer available for new business or renewal. If a member does not choose another plan, they will automatically be moved into the plan in the column next to it.

PLANS NO LONGER AVAILABLE

VYTRA HMO 10
VYTRA HMO 15
VYTRA HMO 20
VYTRA POS 10
VYTRA POS 15
VYTRA POS 20

WILL BE MOVED INTO

HIP HMO 25/40A
HIP HMO 25/40A
HIP HMO 25/40A
HIP PPO 15/1000
HIP PPO 15/1000
HIP PPO 15/1000

HIP

- HIP members may renew in their existing plan if available.

Existing HIP members who want to change plans at renewal may **ONLY** change into your group's existing plan(s) (*that other employees are enrolled in*), or they may select from plans available for new business*.

New members to HIP from existing groups may select **ONLY** from your existing plan(s) or plans available for new business*.

*HIP plans available for new business are: HIP EPO 30/50 1000A Select, EPO 30/50 1000B Select, PPO 30/50 1000D Select, PPO 30/50 2000A.

- If your group decides to make plan changes at renewal, the group **MUST** be in compliance with HIP Small Group Underwriting Guidelines. Therefore, if your group decides to select new HIP plans at renewal, you may choose up to 2 plans from each plan type (EPO, PPO, HMO, POS) with a maximum of 4 plan selections.
- If your group has both Emblem & HIP plans, you must choose the same rate tier for both.
- The following plans are no longer available for new business or renewal. If a member does not choose another plan, they will automatically be moved into the plan in the column next to it.

PLANS NO LONGER AVAILABLE

CS PPO 30/50/1000
CS PPO 25/1000
HMO SUPER VALUE
HMO VALUE
HMO 20
HMO 5
HMO 15
HMO 10
POS 20/1000
EPO 15/1000

WILL BE MOVED INTO

HIP PPO 30/50/1000D
HIP PPO 30/50/1000D
HIP HMO 25/40A
HIP HMO 25/40A
HIP HMO 25/40A
HIP HMO 25/40A
HIP HMO 25/40A
HIP HMO 25/40A
HIP HMO 25/40A
HIP PPO 15/1000
HIP EPO 25/1000

WHAT THE EMPLOYEE NEEDS TO DO:

- Complete and sign a new Enrollment Form, if:
 - You change insurer or benefit plan.
 - You are enrolling for the first time.
- Employees who are changing PCP's should validate those changes with the selected insurer. The telephone numbers are listed on the Alliance website.

WHAT THE EMPLOYER NEEDS TO DO:

- Complete and return the Pink RENEWAL Employer Agreement. Use this form to:
 - Select rate tier for each insurer (HIP & Emblem must match)
 - Change your new hire waiting period
- Provide **two current forms of tax documentation.**
Examples of tax documentation are:
 - Signed NYS-45 Form (and NYS-45-ATT if applicable)
 - K-1 with a signed 1065 or 1120S form. See attached Tax documentation requirements.
- Sign and return Enrollment Forms for new employees and those making enrollment changes.

**The above forms and documentation should be sent to the address below by
January 15, 2012.**

LIA Health Alliance
Enrollment Processing Center
48 South Service Road, Suite 301
Melville, NY 11747

Please contact your Broker or call the LIAHA at 1-800-LIA-5513 if you have any questions.

Thank you,

LIA Health Alliance

***Please see the attached Tax Documentation Requirements.
If acceptable documentation is not provided, then coverage may be
terminated.***

***These requirements come under the Carriers Underwriting Guidelines which
can be found on our website: liahealthalliance.com***