



May 2022

5955
VILLAGE OF COPENHAGEN
9915 STATE RTE 12
P O BOX 237
COPENHAGEN, NY 13626

Subject: Subscriber Initial Notification Letters

Dear Group Administrator:

State law requires health insurers to notify employer groups and subscribers when they apply to the New York State Department of Financial Services for premium rate changes. This is why we are sending you a supply of letters and are requesting that you distribute them to your employees who have their health care coverage through our company.

It is imperative that you distribute the notices in a timely manner, as there is only a 30 day window of opportunity for questions to be submitted to the New York State Department of Financial Services.

The enclosed letters explain the requested rate adjustment that we are submitting on or about May 10, 2022, for use on or after your renewal date in 2023. The actual rate change will not be known until the approval is granted.

We appreciate your assistance and thank you for granting us the opportunity to provide you and your employees with quality health coverage.

Best in health,

A handwritten signature in black ink, appearing to read "Todd Muscatello".

Todd Muscatello
SVP Segment Strategy & Performance



May 2022

22913
VILLAGE OF COPENHAGEN
9915 STATE RTE 12
P O BOX 237
COPENHAGEN, NY 13626

Re: Notice of Proposed Premium Rate Change

Class A008 - A008/Full Time

Plan Description

SimplyBlue Plus Platinum 3

HIOS ID

78124NY0980073-00

Dear Group Administrator:

Excellus BlueCross BlueShield is filing a request with the New York State Department of Financial Services (DFS) to approve a change to your group premium rates for 2023. New York Insurance Law requires that we provide a notice to you when we submit requests for premium rate changes to DFS.

DFS is required by law to review our requested rate change. DFS may approve, modify or disapprove the requested rate change.

Proposed Premium Rate Changes

Class A008 - A008/Full Time

Plan: SimplyBlue Plus Platinum 3

If approved, the percentage change to your group's premium is 14.93%

Please note that while we try to provide you with the most accurate information possible, the final approved rate may differ based on the benefit plan design and other features that you select on renewal. Also, the final approved rate may differ because DFS may modify the proposed rate.

Why We Are Requesting a Rate Change

As you know, changes in medical costs, population characteristics and other factors have an impact on projected health care costs. To account for these changes, Excellus BlueCross BlueShield modifies rates annually. DFS's view of these matters may differ. If you look below, you can find links to a more complete explanation of why the rate adjustment is being requested. The links to the health plan and DFS websites will connect you to a narrative, written in plain English, that explains this in greater detail.

30-day Comment Period

You can contact us or DFS to ask for more information or submit comments to DFS about the proposed rate changes. The comments must be made within 30 days from the date of this notice.

You can contact the Plan for additional information at:

- P.O. Box 21146
Eagan, MN 55121
- 1-855-374-7462
- www.excellusbcbs.com/contactus

Comments or requests for more information on the proposed rate change may be submitted to DFS by visiting the DFS website or via standard mail as follows:

DFS website: https://www.dfs.ny.gov/consumers/health_insurance/health_insurance_premiums

United States Postal Service:

NYS Department of Financial Services
Health Bureau - Premium Rate Adjustments
One Commerce Plaza
Albany, NY 12257

If you choose to submit comments to DFS, please include the following information:

1. The name of your insurer, which is Excellus BlueCross BlueShield
2. The name of your plan as listed on your identification card
3. Indicate you have Small Group coverage
4. Your HIOS identification number, which is:

Class A008 - A008/Full Time

| Plan Description | HIOS ID |
|----------------------------|-------------------|
| SimplyBlue Plus Platinum 3 | 78124NY0980073-00 |

Written comments submitted to DFS will be posted on the DFS website without your personal information.

Plain English Summary of Rate Change

We have prepared a plain English summary that provides a more detailed explanation of the reasons why a premium rate change is being requested. You can find this information at the following websites:

Excellus BlueCross BlueShield website: <https://excellusbcbs.com/employer/rates>

DFS website:

https://www.dfs.ny.gov/consumers/health_insurance/health_insurance_premiums

Notice of Approved Premium Rate

After DFS approves the final premium rate, which may differ from the requested rate noted above, you will receive final rate information at least 60 days before your 2023 renewal date.

Thank you for trusting us with your health care coverage.

Best in health,



A handwritten signature in black ink, appearing to read 'Todd M.' with a long horizontal stroke extending to the right.

Todd Muscatello
SVP Segment Strategy & Performance



May 2022

22914
VILLAGE OF COPENHAGEN
9915 STATE RTE 12
P O BOX 237
COPENHAGEN, NY 13626

Re: Notice of Proposed Premium Rate Change
Class C008 - C008/COBRA Bill-to-Group Full Time

Plan Description

SimplyBlue Plus Platinum 3

HIOS ID

78124NY0980073-00

Dear Group Administrator:

Excellus BlueCross BlueShield is filing a request with the New York State Department of Financial Services (DFS) to approve a change to your group premium rates for 2023. New York Insurance Law requires that we provide a notice to you when we submit requests for premium rate changes to DFS.

DFS is required by law to review our requested rate change. DFS may approve, modify or disapprove the requested rate change.

Proposed Premium Rate Changes

Class C008 - C008/COBRA Bill-to-Group Full Time

Plan: SimplyBlue Plus Platinum 3

If approved, the percentage change to your group's premium is 14.93%

Please note that while we try to provide you with the most accurate information possible, the final approved rate may differ based on the benefit plan design and other features that you select on renewal. Also, the final approved rate may differ because DFS may modify the proposed rate.

Why We Are Requesting a Rate Change

As you know, changes in medical costs, population characteristics and other factors have an impact on projected health care costs. To account for these changes, Excellus BlueCross BlueShield modifies rates annually. DFS's view of these matters may differ. If you look below, you can find links to a more complete explanation of why the rate adjustment is being requested. The links to the health plan and DFS websites will connect you to a narrative, written in plain English, that explains this in greater detail.

30-day Comment Period

You can contact us or DFS to ask for more information or submit comments to DFS about the proposed rate changes. The comments must be made within 30 days from the date of this notice.

You can contact the Plan for additional information at:

- P.O. Box 21146
Eagan, MN 55121
- 1-855-374-7462
- www.excellusbcbs.com/contactus

Comments or requests for more information on the proposed rate change may be submitted to DFS by visiting the DFS website or via standard mail as follows:

DFS website: https://www.dfs.ny.gov/consumers/health_insurance/health_insurance_premiums

United States Postal Service:

NYS Department of Financial Services
Health Bureau - Premium Rate Adjustments
One Commerce Plaza
Albany, NY 12257

If you choose to submit comments to DFS, please include the following information:

1. The name of your insurer, which is Excellus BlueCross BlueShield
2. The name of your plan as listed on your identification card
3. Indicate you have Small Group coverage
4. Your HIOS identification number, which is:

Class C008 - C008/COBRA Bill-to-Group Full Time

| Plan Description | HIOS ID |
|----------------------------|-------------------|
| SimplyBlue Plus Platinum 3 | 78124NY0980073-00 |

Written comments submitted to DFS will be posted on the DFS website without your personal information.

Plain English Summary of Rate Change

We have prepared a plain English summary that provides a more detailed explanation of the reasons why a premium rate change is being requested. You can find this information at the following websites:

Excellus BlueCross BlueShield website: <https://excellusbcbs.com/employer/rates>

DFS website:

https://www.dfs.ny.gov/consumers/health_insurance/health_insurance_premiums

Notice of Approved Premium Rate

After DFS approves the final premium rate, which may differ from the requested rate noted above, you will receive final rate information at least 60 days before your 2023 renewal date.

Thank you for trusting us with your health care coverage.

Best in health,



A handwritten signature in black ink, appearing to read 'Todd Muscatello', with a long horizontal stroke extending to the right.

Todd Muscatello
SVP Segment Strategy & Performance

