

**Important: [Name of Issuer] is continuing to offer your health coverage for the next year.**  
You may need to take action to ensure you have health coverage for 2017.

[Date]

Dear [Name of Policyholder],

### Why am I getting this letter?

We want to re-enroll the people in your household currently covered by your health plan so you can keep coverage in 2017. The last day of your current coverage is December 31, 2016.

[These people are:

Name of Policyholder

Name of other enrollees on policy]

Before we can re-enroll you, you may need to update your account with Washington Healthplanfinder. Washington Healthplanfinder will send you a letter in October 2016 telling you what action to take. **If the letter tells you to take action and you do not, you will not be re-enrolled for coverage in 2017.**

Every year, companies can make changes to the plans and coverage options they offer. This letter summarizes any changes to your coverage so you can decide if you want to keep your plan or look for a different one. Changes described in this letter will take effect January 1, 2017.

Your new premium starts on January 1, 2017. If you don't qualify for financial help, you'll pay \$[Dollar amount] each month. [Insert if rate pending approval: However, your rate has not yet been finalized. We will update you if there are changes. To see information about this rate, go to: [www.insurance.wa.gov/health-rates/search.aspx](http://www.insurance.wa.gov/health-rates/search.aspx).]

If you do qualify for financial help, Washington Healthplanfinder will send a letter estimating how much your coverage will cost.

### Changes we're making to your current health plan:

|                              | Current 2016 Plan  | 2017 Plan  |
|------------------------------|--|--|
|                              | [List plan name and ID]  | [List plan name and ID]  |
| Changes to your benefits     | <ul style="list-style-type: none"><li>[For benefits changes, list what the benefits were in 2016 or write "no change." Use additional lines and bullet points as needed.]</li></ul>        | <ul style="list-style-type: none"><li>[List changes to benefits or write "no change." Use additional lines and bullet points as needed.]</li></ul>   |
| Changes to your cost-sharing | <ul style="list-style-type: none"><li>[For cost-sharing changes, list what the cost-sharing was in 2016 or write "no change." Use additional lines and bullet points as needed.]</li></ul> | <ul style="list-style-type: none"><li>[List changes in cost sharing, (including, but not limited to changes in metal-level tier, out of pocket maximum, or deductible), or write "no change." Use additional lines and bullet points as needed.]</li></ul> |

[Issuer branding and contact information]

This list may not include all changes, such as changes to the prescription drugs or providers we cover. For full information about changes to your plan, contact us.

### **What should you consider before deciding to keep or change your plan?**

- ✓ **Cost:** Check to see if you have lower-cost options, and compare plans through Washington Healthplanfinder at [www.wahealthplanfinder.org](http://www.wahealthplanfinder.org).
- ✓ **Providers:** Your coverage may have different doctors or hospitals in 2017. Call or visit [direct link to provider directory] to make sure your doctor and other health care providers are covered.
- ✓ **Benefits:** Call us or visit our website for a copy of your plan's 2017 benefit booklet, which includes a description of benefits and the costs you pay when you use services.
- ✓ **Drugs:** Call us or visit [direct link to formulary] for a copy of your plan's 2017 drug formulary, which includes a list of covered prescription drugs.

### **What if you want to change health plans?**

The 2017 Open Enrollment period is November 1, 2016 through January 31, 2017. You can choose a new plan at Washington Healthplanfinder ([www.wahealthplanfinder.org](http://www.wahealthplanfinder.org)) at that time.

**To make sure there isn't a gap in your coverage, and avoid paying a penalty, the deadline to enroll is December 23, 2016 for coverage that starts January 1, 2017.**

There are two ways you can choose to buy a new health plan:

1. Through Washington Healthplanfinder at [www.wahealthplanfinder.org](http://www.wahealthplanfinder.org). Here you can compare plans, find in-person help in your community, and see if you qualify for free or lower-cost options depending on your income. If you qualify for financial help, you can only get those savings if you enroll through Washington Healthplanfinder. [You can find plans from (Issuer Name) on Washington Healthplanfinder.]
2. Directly from [Issuer name], another company, or with the help of an agent or broker.

### **Important information about your tax credit**

- Last year, you may have used tax credits to lower your monthly premium. To make sure you get the full savings, you must update your household and income information with Washington Healthplanfinder during Open Enrollment.
- You can do this online, in person, or by phone. This will ensure you get the correct premium amount and that you do not owe money on your next tax return because your household size, income, or other eligibility information was different than what you estimated. Your final tax credit is determined when you file your federal income tax return for the year.
- [For those enrollees who did not receive tax credits only, insert the following bracketed text: **If you didn't receive a tax credit in 2016:** Tax credits and other financial help are

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available to many people who buy a plan through Washington Healthplanfinder. Find out if you qualify at [www.wahealthplanfinder.org](http://www.wahealthplanfinder.org).]

### Questions?

- To learn about your plan or other options for health coverage through [Issuer Name], contact [Contact Information and Hours of Operation].
- To update your account or learn about options for health coverage or financial help through Washington Healthplanfinder, contact [www.wahealthplanfinder.org](http://www.wahealthplanfinder.org) or 1-855-WAFINDER (1-855-923-4633) or TTY/TDD: 1-855-627-9604.
- [[Language taglines per CCIIO Technical Guidance – March 30, 2016 Guidance and Population Data for Exchanges, Qualified Health Plan Issuers, and Web-Brokers to Ensure Meaningful Access by Limited-English Proficient Speakers Under 45 CFR §155.205\(c\) and §156.250; Appendix A – Top 15 Non-English Languages by State; Appendix B: Sample Translated Taglines – Languages Are Listed in Alphabetical Order.](#)]