

Urgent: Your health coverage is at risk.

Take action by December 15, 2019, or you won't have health coverage in 2020.

[Date]

Dear [Name of Policyholder],

Why am I getting this letter?

Your current health plan will not be offered next year. Read this letter carefully and review your options. On December 31, 2019, coverage will end for the people in your household who currently have this health plan. [These people are:

Name of Policyholder

Names of other enrollees on policy]

To keep health coverage in 2020, you must choose a new plan. This letter explains the options available to you.

When do you need to make a decision?

The Open Enrollment period for 2020 health insurance coverage is November 1, 2019 through December 15, 2019. You must enroll by December 15, 2019 to have health insurance coverage in 2020. Your new coverage will start January 1, 2020. You can change plans during open enrollment, but in most cases, you cannot switch plans after December 15, 2019.

What you need to do:

During Open Enrollment you will need to:

Review your coverage options and pick a new health plan. There are two ways you can choose to buy a new health plan:

- Through Washington Healthplanfinder at www.wahealthplanfinder.org. You can compare plans, find in-person help in your community, and see if you qualify for free or low-cost options depending on your income. If you qualify for financial help, you can only get those savings if you enroll through Washington Healthplanfinder.
- Directly from a company or with the help of an agent or broker.

Options from [Issuer Name]

We have suggested a new [Issuer Name] plan for you that is most similar to your current plan. This plan is sold through the Washington Healthplanfinder (Washington's Exchange) at www.wahealthplanfinder.org. However, if you ask, [Issuer Name] will sell this plan to you directly. **You must take action to enroll in health insurance coverage for 2020.**

If you enroll in this suggested plan, coverage will start January 1, 2020. Your new premium will be \$[Dollar amount] each month. [Insert if plan pending approval: However, the rate for this

[Issuer branding and contact information]

plan has not yet been finalized. We will update you if you choose this plan and there are changes.] To see information about this rate, go to:
<https://fortress.wa.gov/oic/consumertoolkitrt/Search.aspx>.

Important: This isn't a Washington Healthplanfinder (Exchange) plan. This means you won't get any financial help lowering your monthly premium or our-of-pocket costs (like deductibles, copayments, and coinsurance) if you enroll in this plan. To see if you qualify for these savings and to enroll in a Washington Healthplanfinder plan, visit www.wahealthplanfinder.org by December 15, 2019. If you don't enroll in a Washington Healthplanfinder plan by December 15, 2019, you may not be able to switch to one for 2020, even if your finances change.

This suggested plan has different [benefits and/or cost sharing] from your current plan, including:

Your new plan may have different [benefits and/or cost sharing], including:

	Current 2019 Plan	2020 Plan We Chose For You
	[List plan name and ID]	[List plan name and ID]
Changes to your benefits	<ul style="list-style-type: none"> [For benefits changes, list what the benefits were in 2019 or write "no change." Use additional lines and bullet points as needed.] 	<ul style="list-style-type: none"> [List changes to benefits or write "no change." Use additional lines and bullet points as needed.]
Changes to your cost-sharing	<ul style="list-style-type: none"> [For cost-sharing changes, list what the cost-sharing was in 2019 or write "no change." Use additional lines and bullet points as needed.] 	<ul style="list-style-type: none"> [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.]

This list may not include all differences, such as differences in the prescription drugs or providers we cover. For more information about this suggested plan, please contact us.

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

- ✓ **Cost:** The plan we suggested is a Washington Healthplanfinder, or "Exchange," plan. This means you might qualify for financial help lowering your monthly premium or out-of-pocket costs if you remain enrolled in this plan. To see if you qualify for these savings, go to www.wahealthplanfinder.org to shop and compare plans.
- ✓ **Providers:** Your coverage may have different doctors or hospitals in 2020. Call or visit [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 2020 benefit booklet at [Link to 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 2020 drug formulary, which includes a list of covered prescription drugs.

Questions?

[Issuer branding and contact information]

- To learn about the suggested plan or other options for health coverage through [Issuer Name], contact [Contact Information and Hours of Operation] or visit [Link to Summary of Benefits and Coverage] where you can review the Summary of Benefits and Coverage for the plans.
- Call [Issuer phone number including TTY/TDD] to request a reasonable accommodation to get this information in an accessible format, like large print, Braille, or audio, at no cost to you.
- To update your account or learn about options for health coverage or financial help through Washington Healthplanfinder, go to www.wahealthplanfinder.org or call 1-855-WAFINDER (1-855-923-4633) or TTY/TDD: 1-855-627-9604.
- If some people in your household have a different kind of coverage—such as Medicare, Washington Apple Health, or a dental plan—they may get a separate letter about how to keep their coverage.

Would you like help in another language?

- [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] (*For Plan Year 2020, OIC will allow the Notice and Taglines to be “posted” with forms either by being embedded in the forms, or as an insert enclosed with the forms.*)