

Initial Notice of Proposed Rate Adjustment

Oxford NY Small POS

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Date

<<Name>>
<<Company Name, Group Code: xxxxxx>>
<<Company Street Address>>
<<City,>> <<State>> <<ZIP Code>>

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We're writing to let you know that Oxford Health Plans (NY), Inc. and Oxford Health Insurance, Inc. are filing a premium rate adjustment request for the Oxford small group POS product on June 15, 2012. We are sending this notice to you and your group's employees to inform you of our rate adjustment request and give you the opportunity to provide comments to DFS or ask us or DFS for additional information. Requests for information and comments must be submitted within 30 days from the date of our rate filing.

What we are requesting

The chart below shows the percentage increases we are requesting for medical and pharmacy premiums.

Renewal Date	Estimated Increase Over 2012 Medical Premium (%)	Estimated Increase Over 2012 Pharmacy Premium (%)	Estimated Increase Over 2012 Total Premium (Medical and Pharmacy) (%)
1/1/2013 – 3/31/2013	29.0%	29.0%	29.0%

What you need to know

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¹ In rare instances, rate applications may be submitted more than once a year.

Please be aware that your group's final renewal rate increase for 2013 *may be different* than the percentages listed above. The Superintendent of Financial Services may approve (as requested), modify or deny the proposed rate adjustment. Your final rate will be based on 1) the rates approved by DFS, 2) adjustments to the rate (increases or decreases) due to benefit changes, 3) plan design changes you make at renewal and 4) your group's census at renewal.²

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You may contact us or DFS to request additional information or submit written comments to DFS. Requests for information and comments must be made **within 30 days from the date of our rate filing. This time period starts on June 15 and ends on July 15, 2012.** If you are making comments, you must note that your inquiry is regarding Oxford Health Plans (NY), Inc., Oxford Health Insurance, Inc., and the Oxford small group POS product. DFS will post your written comments on its website with personal identifying information removed.

Requests for information or comments to DFS must be submitted to:

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As noted above, information will be available on **oxfordhealth.com**. You may go to the *Employer Messages* section to view and print this information. This information may also be obtained by writing to us at:

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Sincerely,



Howard C. Margolies
Vice President Small Business, New York

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² In addition to the premium rate adjustment filing, we separately submitted benefit change filings associated with state mandated autism coverage and federally mandated changes to women's preventive coverage. Until these filings are approved we will not know the rate impact but the requested rate impact is approximately 1.8 %. The rates ultimately approved by DFS for these benefits will impact your final rate. In the event that other benefit changes (e.g., benefit mandate) are made prior to your renewal, those changes may impact your final premium rate as well.



<Date>

<BA First Name> <BA Last Name>
<Association Name>, <Group Code>
<Address 1>
<Address 2>
<City>, <State> <Zip>

**Notice of Premium Rate Adjustment Filing
THIS IS NOT A BILL**

Dear _____:

Thank you for allowing UnitedHealthcare to serve your health benefit plan needs with our Oxford products.

In New York, proposed premium rates for small group plans are filed with the New York State Department of Financial Services (DFS) annually.¹ Our annual proposed premium rate adjustment filings are typically filed in June for the next year’s renewal rates.

We're writing to let you know that Oxford Health Plans (NY), Inc. and Oxford Health Insurance, Inc. are filing a premium rate adjustment request for the Oxford small group POS product on June 15, 2012. We are sending this notice to you and employees who are certificate holders to inform you of our rate adjustment request and give you the opportunity to provide comments to DFS or ask us or DFS for additional information. Requests for information and comments must be submitted within 30 days from the date of our rate filing. Because we do not have contact information for the employers that are members of your association or trust, we are asking that you provide a copy of this letter to impacted employers so they are aware of the rate filing and the notice we are sending to their employees.

What we are requesting

The chart below shows the percentage increases we are requesting for medical and pharmacy premiums.

Renewal Date	Estimated Increase Over 2012 Medical Premium (%)	Estimated Increase Over 2012 Pharmacy Premium (%)	Estimated Increase Over 2012 Total Premium (Medical and Pharmacy) (%)
10/1/2013 – 12/31/2013	27.3%	27.3%	27.3%

What you need to know

An approved rate change will affect 2013 renewal rates. ***Your group does not need to take any action or change payments at this time.***

You will receive a second notice about your 2013 renewal rates after the Superintendent of Financial Services makes a decision on our rate adjustment request. The second notice will be sent at least 60 days before the rate change effective date.

¹ In rare instances, rate applications may be submitted more than once a year.

Please be aware that your group's final renewal rate increase for 2013 *may be different* than the percentages listed above. The Superintendent of Financial Services may approve (as requested), modify or deny the proposed rate adjustment. The group's final rate will be based on 1) the rates approved by DFS, 2) adjustments to the rate (increases or decreases) due to benefit changes, 3) the plan design chosen by the group and 4) the group's census at renewal.²

Where to find more information or make a comment

Rising medical expenses are the main reason for the requested increase. A number of factors contribute to these rising costs, including increases in the cost of medical services, increases in the amount of services used, and changes to the population enrolled in the product. We have prepared a narrative summary that provides a more detailed explanation of the reasons why we are seeking a premium rate adjustment. This summary will be posted both on our website and DFS's website for at least 30 days from the date of our rate filing. Our rate application will be posted on DFS's website and additional information will be available on companyprofiles.healthcare.gov.

You may contact us or DFS to request additional information or submit written comments to DFS. Requests for information and comments must be made **within 30 days from the date of our rate filing. This time period starts on June 15 and ends on July 15, 2012.** If you are making comments, you must note that your inquiry is regarding Oxford Health Plans (NY), Inc., Oxford Health Insurance, Inc., and the Oxford small group POS product. DFS will post your written comments on its website with personal identifying information removed.

Requests for information or comments to DFS must be submitted to:

Health Bureau – Premium Rate Adjustments
New York State Department of Financial Services
25 Beaver Street
New York, NY 10004
<http://www.dfs.ny.gov>
PremiumRateIncreases@dfs.ny.gov

As noted above, information will be available on **oxfordhealth.com**. You may go to the *Employer Messages* section to view and print this information. This information may also be obtained by writing to us at:

Oxford
NY Prior Approval
P.O. Box 862
Monroe, CT 06468
888-201-4216

Thank you for your business. We look forward to continuing our service to you.

Sincerely,



Howard C. Margolies
Vice President Small Business, New York

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Date

<<Name>>
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What we are requesting

The chart below shows the percentage increases we are requesting for medical and pharmacy premiums.

Renewal Date	Estimated Increase Over 2012 Medical Premium (%)	Estimated Increase Over 2012 Pharmacy Premium (%)	Estimated Increase Over 2012 Total Premium (Medical and Pharmacy) (%)
1/1/2013 – 3/31/2013	29.0%	29.0%	29.0%

What you need to know

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What we are requesting

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Renewal Date	Estimated Increase Over 2012 Medical Premium (%)	Estimated Increase Over 2012 Pharmacy Premium (%)	Estimated Increase Over 2012 Total Premium (Medical and Pharmacy) (%)
4/1/2013 – 6/30/2013	29.4%	29.4%	29.4%

What you need to know

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