Providence
Health Plan
P.O. Box 4327
Portland, OR 97208-4327
ProvidenceHealthPlan.com

[Date]

[First Name][Last Name]
[Address line 1]
[Address line 2]
[City][State][ZIP]

Important: Your group health coverage will not be available in 2027.

Dear Valued Employer,

We have decided not to offer your group's current health coverage again next year. The current coverage will end on [End Date]. This means your group must enroll in a new health plan from another company to have coverage beginning [Renewal Effective Date]. This letter explains the options available to you.

This information does not impact your current coverage. As long as you keep paying your monthly premiums to Providence Health Plan, you will still have coverage through [End Date].

When does your group need to make a decision?

To have continued health care coverage for your group, you should have a new health plan in place with coverage starting by [Renewal Effective Date].

What your group needs to do:

Your group can choose to buy a new health plan with the help of an agent or broker or directly from another company.

What else should I look at before deciding?

- Call or visit the prospective plan's website to check which doctors, other health care providers, and prescription medications are covered by the plan. This is an important step when choosing a plan that meets the needs of your group members.

We are notifying your employees

Federal law requires that we notify all group members with this coverage that it is no longer being offered. Because we might not know about other coverage decisions you

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have made, we'll tell your employees to check with the plan sponsor or administrator about coverage options that might be available through your organization.

Questions?

- Call Providence Health Plan Customer Service at **503-574-7500** or **800-878-4445** (TTY: 711), Monday through Friday, 8 a.m. to 5 p.m. (Pacific Time).

Would you like help in another language?

Please see the attached document.

Sincerely,

Providence Health Plan