



<Date>

<Employer First Name> <Last Name>

<Company Name>

<Address 1>

<Address 2>

<City>, <State> <ZIP>

RE: Your March Renewal Notice

Dear <Employer First Name>,

We recently learned that your March 1, 2017 renewal notice was mailed late and we want you to know you may receive a credit on your April bill.

We're required to give you 60 days' notice of our annual renewal rate change before the start of the new rate. If you accept our renewal without making changes, your 2017 rate will be effective starting March 12, 2017 and a premium credit will be on your April 2017 invoice.

This credit will not apply if you:

- make plan changes upon renewal
- are no longer an active group as of the renewal date

If you have any questions about the renewal letter, please contact your broker or call Client Services at 1-888-201-4216, Monday through Friday, 8 a.m. to 5 p.m. ET. You can also reach us by email at groupservices@oxfordhealth.com.

Thank you for your continued business.

Sincerely,

A handwritten signature in grey ink, appearing to read 'CC' followed by a stylized flourish.

Charles Cerniglia

Vice President, Key Account Sales & Small Business Sales and Account Management New York – Employer & Individual Markets
Oxford Health Plans (NY) Inc.

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