

State: Arkansas **Filing Company:** UnitedHealthcare Insurance Company
TOI/Sub-TOI: H16G Group Health - Major Medical/H16G.002A Large Group Only - PPO
Product Name: POL.AMD.RN.I.11.AR
Project Name/Number: POL.AMD.RN.I.11.AR/POL.AMD.RN.I.11.AR

Filing at a Glance

Company: UnitedHealthcare Insurance Company
Product Name: POL.AMD.RN.I.11.AR
State: Arkansas
TOI: H16G Group Health - Major Medical
Sub-TOI: H16G.002A Large Group Only - PPO
Filing Type: Form
Date Submitted: 10/23/2012
SERFF Tr Num: UHLC-128740891
SERFF Status: Closed-Approved-Closed
State Tr Num:
State Status: Approved-Closed
Co Tr Num: POL.AMD.RN.I.11.TN

Implementation: On Approval
Date Requested:
Author(s): Kelly Smith
Reviewer(s): Rosalind Minor (primary)
Disposition Date: 10/31/2012
Disposition Status: Approved-Closed
Implementation Date:

State Filing Description:

State: Arkansas **Filing Company:** UnitedHealthcare Insurance Company
TOI/Sub-TOI: H16G Group Health - Major Medical/H16G.002A Large Group Only - PPO
Product Name: POL.AMD.RN.I.11.AR
Project Name/Number: POL.AMD.RN.I.11.AR/POL.AMD.RN.I.11.AR

General Information

Project Name: POL.AMD.RN.I.11.AR Status of Filing in Domicile: Not Filed
 Project Number: POL.AMD.RN.I.11.AR Date Approved in Domicile:
 Requested Filing Mode: Review & Approval Domicile Status Comments:
 Explanation for Combination/Other: Market Type: Group
 Submission Type: New Submission Group Market Size: Large
 Group Market Type: Employer Overall Rate Impact:
 Filing Status Changed: 10/31/2012 Deemer Date:
 State Status Changed: 10/31/2012 Submitted By: Kelly Smith
 Created By: Kelly Smith
 Corresponding Filing Tracking Number: POL.AMD.RN.I.11.AR
 Benefit Summary for Shared Rx Rider - Network & Non-Network

PPACA: Not PPACA-Related

PPACA Notes: null

Include Exchange Intentions: No

Filing Description:

POL.AMD.RN.I.11.TN

The intent is to use the Rewards Now Amendment to allow employer groups to participate in such a funding arrangement. Rewards Now is an agreement between UnitedHealthcare Insurance Company and the employer group whereby costs under the Policy is rated retrospectively.

Company and Contact

Filing Contact Information

Kelly Smith, Manager RGA Kelly_Smith@uhc.com
 800 King Farm Blvd. 240-632-8061 [Phone]
 Suite 500
 Rockville, MD 20850

Filing Company Information

UnitedHealthcare Insurance Company	CoCode: 79413	State of Domicile: Connecticut
185 Asylum Street	Group Code: 707	Company Type: Life and Health
Hartford, CT 06103	Group Name:	State ID Number:
(860) 702-5000 ext. [Phone]	FEIN Number: 36-2739571	

Filing Fees

Fee Required? Yes
 Fee Amount: \$50.00
 Retaliatory? No
 Fee Explanation:

State: Arkansas **Filing Company:** UnitedHealthcare Insurance Company
TOI/Sub-TOI: H16G Group Health - Major Medical/H16G.002A Large Group Only - PPO
Product Name: POL.AMD.RN.I.11.AR
Project Name/Number: POL.AMD.RN.I.11.AR/POL.AMD.RN.I.11.AR

Per Company: No

Company	Amount	Date Processed	Transaction #
UnitedHealthcare Insurance Company	\$50.00	10/23/2012	64200369

SERFF Tracking #:

UHLC-128740891

State Tracking #:**Company Tracking #:**

POL.AMD.RN.I.11.TN

State:

Arkansas

Filing Company:

UnitedHealthcare Insurance Company

TOI/Sub-TOI:

H16G Group Health - Major Medical/H16G.002A Large Group Only - PPO

Product Name:

POL.AMD.RN.I.11.AR

Project Name/Number:

POL.AMD.RN.I.11.AR/POL.AMD.RN.I.11.AR

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	10/31/2012	10/31/2012

Amendments

Schedule	Schedule Item Name	Created By	Created On	Date Submitted
Form	POL.AMD.RN.I.11.AR	Kelly Smith	10/23/2012	10/23/2012
Supporting Document	Cover Letter	Kelly Smith	10/23/2012	10/23/2012

SERFF Tracking #:

UHLC-128740891

State Tracking #:**Company Tracking #:**

POL.AMD.RN.I.11.TN

State:

Arkansas

Filing Company:

UnitedHealthcare Insurance Company

TOI/Sub-TOI:

H16G Group Health - Major Medical/H16G.002A Large Group Only - PPO

Product Name:

POL.AMD.RN.I.11.AR

Project Name/Number:

POL.AMD.RN.I.11.AR/POL.AMD.RN.I.11.AR

Disposition

Disposition Date: 10/31/2012

Implementation Date:

Status: Approved-Closed

HHS Status: HHS Approved

State Review: Reviewed-No Actuary

Comment:

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification	Approved-Closed	Yes
Supporting Document	Application	Approved-Closed	Yes
Supporting Document	PPACA Uniform Compliance Summary	Approved-Closed	Yes
Supporting Document (revised)	Cover Letter	Approved-Closed	Yes
Supporting Document	Cover Letter	Replaced	Yes
Form (revised)	POL.AMD.RN.I.11.AR	Approved-Closed	Yes
Form	POL.AMD.RN.I.11.TN	Replaced	Yes

State: Arkansas **Filing Company:** UnitedHealthcare Insurance Company
TOI/Sub-TOI: H16G Group Health - Major Medical/H16G.002A Large Group Only - PPO
Product Name: POL.AMD.RN.I.11.AR
Project Name/Number: POL.AMD.RN.I.11.AR/POL.AMD.RN.I.11.AR

Amendment Letter

Submitted Date: 10/23/2012
 Comments:
 Policy Amendment form number POL.AMD.RN.I.11.AR
 Changed Items:

Form Schedule Item Changes:

Form Schedule Item Changes								
Item No.	Form Name	Form Number	Form Type	Form Action	Action Specific Data	Readability Score	Attachments	Submitted
1	POL.AMD.RN.I.11.AR	POL.AMD.RN.I.11.AR	POLA	Initial		50.200	POL.AMD.RN.I.11.AR.pdf	Date Submitted: 10/23/2012 By:
<i>Previous Version</i>								
1	POL.AMD.RN.I.11.TN	POL.AMD.RN.I.11.TN	POLA	Initial		50.200	POL.AMD.RN.I.11.TN.pdf	Date Submitted: 10/23/2012 By: Kelly Smith

No Rate Schedule Items Changed.

Supporting Document Schedule Item Changes	
Satisfied - Item:	Cover Letter
Comments:	
Attachment(s):	
AR INS 11 Rewards Now CVLTR.pdf	
<i>Previous Version</i>	
Satisfied - Item:	Cover Letter
Comments:	
Attachment(s):	
TN INS 11 Rewards Now CVLTR.pdf	

State: Arkansas **Filing Company:** UnitedHealthcare Insurance Company
TOI/Sub-TOI: H16G Group Health - Major Medical/H16G.002A Large Group Only - PPO
Product Name: POL.AMD.RN.I.11.AR
Project Name/Number: POL.AMD.RN.I.11.AR/POL.AMD.RN.I.11.AR

Post Submission Update Request Processed On 10/30/2012

Status: Allowed
Created By: Kelly Smith
Processed By: Rosalind Minor
Comments:

General Information:

Field Name	Requested Change	Prior Value
Product Name	POL.AMD.RN.I.11.AR	POL.AMD.RN.I.11.TN
Project Name	POL.AMD.RN.I.11.AR	POL.AMD.RN.I.11.TN
Project Number	POL.AMD.RN.I.11.AR	POL.AMD.RN.I.11.TN
Corresponding Filing Tracking Number	POL.AMD.RN.I.11.AR Benefit Summary for Shared Rx Rider - Network & Non-Network	POL.AMD.RN.I.11.TN Benefit Summary for Shared Rx Rider - Network & Non-Network

State: Arkansas **Filing Company:** UnitedHealthcare Insurance Company
TOI/Sub-TOI: H16G Group Health - Major Medical/H16G.002A Large Group Only - PPO
Product Name: POL.AMD.RN.I.11.AR
Project Name/Number: POL.AMD.RN.I.11.AR/POL.AMD.RN.I.11.AR

Form Schedule

Lead Form Number: POL.AMD.RN.I.11.TN

Item No.	Schedule Item Status	Form Name	Form Number	Form Type	Form Action	Action Specific Data	Readability Score	Attachments
1	Approved-Closed 10/31/2012	POL.AMD.RN.I.11.AR	POL.AMD.R N.I.11.AR	POLA	Initial		50.200	POL.AMD.RN.I.11. AR.pdf

Form Type Legend:

ADV	Advertising	AEF	Application/Enrollment Form
CER	Certificate	CERA	Certificate Amendment, Insert Page, Endorsement or Rider
DDP	Data/Declaration Pages	FND	Funding Agreement (Annuity, Individual and Group)
MTX	Matrix	NOC	Notice of Coverage
OTH	Other	OUT	Outline of Coverage
PJK	Policy Jacket	POL	Policy/Contract/Fraternal Certificate
POLA	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	SCH	Schedule Pages

UnitedHealthcare Insurance Company

[Rewards Now] Amendment

As described in this Amendment, the Policy is modified to address calculation of the Policy Charge under [Rewards Now].

Article 3.4 of the Policy is replaced with the following:

3.4 Payment of the Policy Charge

[Variable provisions apply when advance payment is supported in Exhibit 1.]

For each month of the Policy Year that [Rewards Now] is effective, the Enrolling Group shall pay the Discounted [Rewards Now] Premium, the calculation of which is described below under *Glossary of Defined Terms*. The Discounted [Rewards Now] Premium is payable to us [in advance] by the Enrolling Group as described under *Payment of the Policy Charge* in Exhibit 1. [The first Discounted [Rewards Now] Premium is due and payable on or before the effective date of this Policy. Subsequent Discounted [Rewards Now] Premiums are due and payable no later than the first day of each payment period specified in item 6 of Exhibit 1, while this Policy is in force.]

All payments will be made in United States dollars, in immediately available funds, and will be remitted to us at the address set forth in the Enrolling Group's application, or at such other address as we may from time to time designate in writing. The Enrolling Group agrees not to send us payments marked "paid in full", "without recourse", or similar language. In the event that the Enrolling Group sends such a payment, we may accept it without losing any of our rights under this Policy and the Enrolling Group will remain obligated to pay any and all amounts owed to us.

¹*Include when grace period provision applies.]*

²*Include when grace period provision does not apply.]*

A late payment charge will be assessed for any Discounted [Rewards Now] Premium not received [¹within [10 - 45] calendar days following the due date.] [²by the due date.] A service charge will be assessed for any non-sufficient-fund check received in payment of the Discounted [Rewards Now] Premium. Payments for the Discounted [Rewards Now] Premium must be accompanied by supporting documentation that states the names of the Covered Persons for whom payment is being made.

The Enrolling Group must reimburse us for attorney's fees and any other costs related to collecting delinquent [Rewards Now] Premiums.

The following defined terms are added to Article 1 of the Policy:

Article 1: Glossary of Defined Terms

Claim Expense - An amount that includes:

- Claims incurred in the 12-month period of coverage.
- An allowance for claims incurred but not yet reported (IBNR).
- Pooling Charges less claims exceeding the Pooling Level.
- Capitation charges.

¹*Insert the percentage for the discounted and maximum premium.]*

Discounted [Rewards Now] Premium - [¹90-95]% of the Policy Charge.

Maximum [Rewards Now] Premium - [102.5-105]% of the Policy Charge.

Policy Year - The 12-month period beginning on the effective date of coverage and ending at the termination date.

[1 Insert the pooling charge per covered person.]

Pooling Charge - the fee assessed to provide the Pooling Level benefit. The Pooling Charge for the Policy is \$[1-200] per Covered Person per month.

[1 Insert the pooling level per covered person.]

Pooling Level - the claims level, accumulated per Covered Person per Policy Year above which claims will not count towards the experience of the Enrolling Group under the Policy. The Pooling Level for this Policy will be \$[50,000-500,000] per Covered Person, per Policy Year.

[1 Insert number of days within the variable range.]

Reconciliation Statement - A document presented to the Enrolling Group [120-180] days after the end of the Policy Year, or after the termination date in the case of a mid-year termination. The document will show updated Claim Expense, and indicate any Retrospective Policy Charge amounts owed by the Enrolling Group to us.

[1 Insert 1 or 2.]

Retention - A charge that includes:

- Administrative charges (including standard risk charge).
- State and federal taxes.
- Commissions.
- Other state and federal fees and assessments.
- Retrospective rating risk charge of [1-2]% which will be added during retrospective reconciliation.

Retrospective Policy Charge - The amount owed by the Enrolling Group to us within 30 days of the presentation of the Reconciliation Statement.

Article 7: [Rewards Now] is added to the Policy:

Article 7: [Rewards Now]

Retrospective Calculation

- For the Policy Year, if the sum of the Claim Expense and Retention exceeds the Discounted [Rewards Now] Premium, the Enrolling Group will be liable for a Retrospective Policy Charge, the amount of which will be the lesser of:
 - (Claim Expense + Retention) - Discounted [Rewards Now] Premium.
 - Maximum [Rewards Now] Premium - Discounted [Rewards Now] Premium.

[1 Insert the percentage for the discounted and maximum premium.]

After application of retrospective calculation, in no instances shall the Enrolling Group be charged less than [90-95]% of the Policy Charge or more than [102.5-105]% of the Policy Charge. The ultimate Premium charged to the Enrolling Group between the minimum of [90-95]% and maximum of [102.5-105]% will be based on the retrospective formula and will be calculated in accordance with the Sample Illustration provided to Enrolling Group prior to the effective date of this [Rewards Now] Amendment.

[1 Insert number of days within the variable range.]

Retrospective Accounting Reports

We will prepare and deliver to the Enrolling Group a Reconciliation Statement containing details on the total plan costs. Each Reconciliation Report will be calculated using claims incurred during the Policy Year and paid through the 90 days immediately following the end of the Policy Year. Such report will be prepared and delivered within [120-180] days following the last day of the Policy Year. The Enrolling Group will receive an invoice for any Retrospective Policy Charge owed to us, which will be due and payable within 30 days of the invoice date.

A final accounting and invoicing of the Enrolling Group's liability referenced above will be made within 180 days following the termination of the Policy or [Rewards Now]. The Enrolling Group will receive an invoice for any Retrospective Policy Charge owed to us, which will be due and payable within 30 days of the invoice date.

Termination and Adjustments

[Rewards Now] may be terminated in any of the following ways:

[1 Insert number of days within the variable range.]

- [Rewards Now] may be terminated upon any mutually agreed upon date.
- [Rewards Now] may be terminated by either party effective on the next renewal date by giving the non-terminating party written notice of such termination no later than 90 days prior to the renewal date.
- In the event that the Policy terminates, [Rewards Now] shall automatically terminate on the same date that the Policy terminates.
- In the event [Rewards Now] is terminated, the Enrolling Group's coverage under the Policy shall convert back to conventional insured coverage, and the Policy Charge shall be due and payable in accordance with Article 3 of the Policy. For the months of the Policy Year prior to the termination of [Rewards Now], the following shall be due and payable by the Enrolling Group.
 - Within [120-180] days of receiving notice of a mid-year termination, we will calculate amounts due and owing as a result of such termination and provide the Enrolling Group a Reconciliation Statement showing the calculation and amount due and payable. Payment is due within 30 days of the invoice date.
 - With respect to each Policy month where [Rewards Now] was not in effect, the Policy Charge for that month.

This [Rewards Now] Amendment is not provided on a guaranteed issue or guaranteed renewable basis. Nothing in this [Rewards Now] Amendment shall be interpreted in such a way as to subject this Amendment to any guaranteed issue or guaranteed renewability requirement that may otherwise be applied to the Policy.

For any termination as described above, a Reconciliation Statement will be prepared based on the total period during which the Policy was effective. This report will be prepared within [120-180] days following termination of the Policy or [Rewards Now].

Relationship of Retrospective Policy Charge to Receipt of Benefits

The amount of any Retrospective Policy Charge made in accordance with the terms of [Rewards Now] will bear no relationship to the frequency or extent of Benefits furnished to any specific Covered Person, but will be based only on the Claim Expenses for Benefits paid for all Covered Persons under the Policy during the Policy Year.

[Contract Issuance: Include Effective Date only if Amendment is to be mailed separate from the Policy. Do not include effective date when amendment is issued as part of the Policy.]

[Effective Date of this Amendment: _____]

(Name and Title)

SERFF Tracking #:

UHLC-128740891

State Tracking #:**Company Tracking #:**

POL.AMD.RN.I.11.TN

State:

Arkansas

Filing Company:

UnitedHealthcare Insurance Company

TOI/Sub-TOI:

H16G Group Health - Major Medical/H16G.002A Large Group Only - PPO

Product Name:

POL.AMD.RN.I.11.AR

Project Name/Number:

POL.AMD.RN.I.11.AR/POL.AMD.RN.I.11.AR

Supporting Document Schedules

		Item Status:	Status Date:
Bypassed - Item:	Flesch Certification	Approved-Closed	10/31/2012
Bypass Reason:	Flesch Score = 50.2		
		Item Status:	Status Date:
Bypassed - Item:	Application	Approved-Closed	10/31/2012
Bypass Reason:	Not Applicable		
		Item Status:	Status Date:
Bypassed - Item:	PPACA Uniform Compliance Summary	Approved-Closed	10/31/2012
Bypass Reason:	Not Applicable		
		Item Status:	Status Date:
Satisfied - Item:	Cover Letter	Approved-Closed	10/31/2012
Comments:			
Attachment(s):			
AR INS 11 Rewards Now CVLTR.pdf			



October 18, 2012

Ms. Rosalyn Minor
Arkansas Insurance Department
1200 West 3rd Street
Little Rock, Arkansas 72201

Re: UnitedHealthcare Insurance Company
NAIC No. 79413

Rewards Now Amendment
Form Number: POL.AMD.RN.I.11.AR

Dear Mrs. Minor:

On behalf of UnitedHealthcare Insurance Company, I am submitting the enclosed Amendment form for your Department's review and approval.

We are requesting to use the Rewards Now Amendment in conjunction with our approved 2011 product series, form filing POL.I.11.AR et al. Our intent is to use this amendment for large employer groups only.

This form represents the final printed format with the exception of the variable text and corresponding instruction text. Once approved, this form will be used with the issuance of our portfolio of group health products offered in your state.

The intent is to use the Rewards Now Amendment to allow employer groups to participate in such a funding arrangement. Rewards Now is an agreement between UnitedHealthcare Insurance Company and the employer group whereby costs under the Policy is rated retrospectively.

If you have any questions or concerns regarding this filing, please feel free to contact me.

Sincerely,

Kelly Smith

Regulatory Compliance

UnitedHealthcare Insurance Company
800 King Farm Boulevard

Rockville, MD 20850

Ph: 240-632-8061

Email: kelly_smith@uhc.com

State: Arkansas **Filing Company:** UnitedHealthcare Insurance Company
TOI/Sub-TOI: H16G Group Health - Major Medical/H16G.002A Large Group Only - PPO
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Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date	Schedule Item Status	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
10/23/2012	Replaced 10/31/2012	Supporting Document	Cover Letter	10/23/2012	TN INS 11 Rewards Now CVLTR.pdf (Superseded)
10/23/2012	Replaced 10/31/2012	Form	POL.AMD.RN.I.11.TN	10/23/2012	POL.AMD.RN.I.11.TN.pdf (Superseded)



October 18, 2012

Ms. Rosalyn Minor
Arkansas Insurance Department
1200 West 3rd Street
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NAIC No. 79413

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Sincerely,

Kelly Smith

Regulatory Compliance

UnitedHealthcare Insurance Company
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Rockville, MD 20850

Ph: 240-632-8061

Email: kelly_smith@uhc.com

UnitedHealthcare Insurance Company

[Rewards Now] Amendment

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3.4 Payment of the Policy Charge

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All payments will be made in United States dollars, in immediately available funds, and will be remitted to us at the address set forth in the Enrolling Group's application, or at such other address as we may from time to time designate in writing. The Enrolling Group agrees not to send us payments marked "paid in full", "without recourse", or similar language. In the event that the Enrolling Group sends such a payment, we may accept it without losing any of our rights under this Policy and the Enrolling Group will remain obligated to pay any and all amounts owed to us.

¹*Include when grace period provision applies.]*

²*Include when grace period provision does not apply.]*

A late payment charge will be assessed for any Discounted [Rewards Now] Premium not received [¹within [10 - 45] calendar days following the due date.] [²by the due date.] A service charge will be assessed for any non-sufficient-fund check received in payment of the Discounted [Rewards Now] Premium. Payments for the Discounted [Rewards Now] Premium must be accompanied by supporting documentation that states the names of the Covered Persons for whom payment is being made.

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¹*Insert the percentage for the discounted and maximum premium.]*

Discounted [Rewards Now] Premium - [¹90-95]% of the Policy Charge.

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Policy Year - The 12-month period beginning on the effective date of coverage and ending at the termination date.

[1 Insert the pooling charge per covered person.]

Pooling Charge - the fee assessed to provide the Pooling Level benefit. The Pooling Charge for the Policy is \$[1-200] per Covered Person per month.

[1 Insert the pooling level per covered person.]

Pooling Level - the claims level, accumulated per Covered Person per Policy Year above which claims will not count towards the experience of the Enrolling Group under the Policy. The Pooling Level for this Policy will be \$[50,000-500,000] per Covered Person, per Policy Year.

[1 Insert number of days within the variable range.]

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Article 7: [Rewards Now] is added to the Policy:

Article 7: [Rewards Now]

Retrospective Calculation

- For the Policy Year, if the sum of the Claim Expense and Retention exceeds the Discounted [Rewards Now] Premium, the Enrolling Group will be liable for a Retrospective Policy Charge, the amount of which will be the lesser of:
 - (Claim Expense + Retention) - Discounted [Rewards Now] Premium.
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After application of retrospective calculation, in no instances shall the Enrolling Group be charged less than [90-95]% of the Policy Charge or more than [102.5-105]% of the Policy Charge. The ultimate Premium charged to the Enrolling Group between the minimum of [90-95]% and maximum of [102.5-105]% will be based on the retrospective formula and will be calculated in accordance with the Sample Illustration provided to Enrolling Group prior to the effective date of this [Rewards Now] Amendment.

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Retrospective Accounting Reports

We will prepare and deliver to the Enrolling Group a Reconciliation Statement containing details on the total plan costs. Each Reconciliation Report will be calculated using claims incurred during the Policy Year and paid through the 90 days immediately following the end of the Policy Year. Such report will be prepared and delivered within [120-180] days following the last day of the Policy Year. The Enrolling Group will receive an invoice for any Retrospective Policy Charge owed to us, which will be due and payable within 30 days of the invoice date.

A final accounting and invoicing of the Enrolling Group's liability referenced above will be made within 180 days following the termination of the Policy or [Rewards Now]. The Enrolling Group will receive an invoice for any Retrospective Policy Charge owed to us, which will be due and payable within 30 days of the invoice date.

Termination and Adjustments

[Rewards Now] may be terminated in any of the following ways:

[1 Insert number of days within the variable range.]

- [Rewards Now] may be terminated upon any mutually agreed upon date.
- [Rewards Now] may be terminated by either party effective on the next renewal date by giving the non-terminating party written notice of such termination no later than 90 days prior to the renewal date.
- In the event that the Policy terminates, [Rewards Now] shall automatically terminate on the same date that the Policy terminates.
- In the event [Rewards Now] is terminated, the Enrolling Group's coverage under the Policy shall convert back to conventional insured coverage, and the Policy Charge shall be due and payable in accordance with Article 3 of the Policy. For the months of the Policy Year prior to the termination of [Rewards Now], the following shall be due and payable by the Enrolling Group.
 - Within [120-180] days of receiving notice of a mid-year termination, we will calculate amounts due and owing as a result of such termination and provide the Enrolling Group a Reconciliation Statement showing the calculation and amount due and payable. Payment is due within 30 days of the invoice date.
 - With respect to each Policy month where [Rewards Now] was not in effect, the Policy Charge for that month.

This [Rewards Now] Amendment is not provided on a guaranteed issue or guaranteed renewable basis. Nothing in this [Rewards Now] Amendment shall be interpreted in such a way as to subject this Amendment to any guaranteed issue or guaranteed renewability requirement that may otherwise be applied to the Policy.

For any termination as described above, a Reconciliation Statement will be prepared based on the total period during which the Policy was effective. This report will be prepared within [120-180] days following termination of the Policy or [Rewards Now].

Relationship of Retrospective Policy Charge to Receipt of Benefits

The amount of any Retrospective Policy Charge made in accordance with the terms of [Rewards Now] will bear no relationship to the frequency or extent of Benefits furnished to any specific Covered Person, but will be based only on the Claim Expenses for Benefits paid for all Covered Persons under the Policy during the Policy Year.

[Contract Issuance: Include Effective Date only if Amendment is to be mailed separate from the Policy. Do not include effective date when amendment is issued as part of the Policy.]

[Effective Date of this Amendment: _____]

(Name and Title)