

PRODUCER BLAST

This email is intended for producers with Large Group clients in Pennsylvania.

Notice of Medical Loss Rebate to Group Markets

The Affordable Care Act (ACA) includes a Medical Loss Ratio (MLR) requirement for health insurers. The MLR provision mandates that insurers rebate all or a portion of the premiums paid if a certain percentage of premiums collected are not spent on claims or quality improvement programs. In the Individual and Small Group Markets, the MLR threshold is 80% of premiums collected. In the Large Group Market, the threshold is 85%.

This year, rebates will be distributed in the Large Group Markets in Pennsylvania. While the MLR calculation is based on a 3-year average, all rebates due are calculated using 2025 premiums. The companies and markets affected are:

Entity	Market
Highmark Coverage Advantage (HCA)	Large Group
Highmark Health Insurance Company (HHIC)	Large Group
First Priority Health (FPH)	Large Group

Lower than expected claims experience is due to several factors. Some of these include:

- Highmark working closely with providers to reduce costs.
- Members taking charge of their health through preventative screenings and other health-improving activities like smoking cessation programs.
- Members working with Highmark’s Care Management Teams to better manage chronic conditions.

As a result, rebate checks will be mailed to eligible clients within the Large Group Market before the end of September. Small Group, Individual, and Student Health Plan contract holders are not being rebated.

How the Rebate Works for Group Market Clients

We are required to notify affected employers and their active, covered employees who were covered during the rebate years. Please review the client notification packages for samples of the communications.

Group Market Sample Communication Package

- [Large Group FPH Client and Subscriber Communication](#)
- [Large Group HCA Client and Subscriber Communication](#)
- [Large Group HHIC Client and Subscriber Communication](#)

Communication Timing

Week of	Communication
September 7	Client communication package
September 7	Subscriber communication package
September 21	Checks sent to clients

Questions

If you have questions about Large Group rebates, please contact your Highmark Client Manager.

CLICK HERE TO ACCESS THE
PRODUCER PULSE



Benefits and/or benefit administration may be provided by or through the following entities, which are independent licensees of the Blue Cross Blue Shield Association:

Western and Northeastern PA: Highmark Inc. d/b/a Highmark Blue Cross Blue Shield, Highmark Choice Company, Highmark Health Insurance Company, Highmark Coverage Advantage Inc., Highmark Benefits Group Inc., First Priority Health, First Priority Life or Highmark Senior Health Company.

Central and Southeastern PA: Highmark Inc. d/b/a Highmark Blue Shield, Highmark Benefits Group Inc., Highmark Health Insurance Company, Highmark Choice Company or Highmark Senior Health Company.

PA: Your plan may not cover all your health care expenses. Read your plan materials carefully to determine which health care services are covered. For more information, call the number on the back of your member ID card or, if not a member, call 866-459-4418.

Delaware: Highmark BCBSD Inc. d/b/a Highmark Blue Cross Blue Shield.

West Virginia: Highmark West Virginia Inc. d/b/a Highmark Blue Cross Blue Shield, Highmark Health Insurance Company or Highmark Senior Solutions Company. Visit <https://www.highmarkbcbswv.com/networkaccessplan> to view the Access Plan required by the Health Benefit Plan Network Access and Adequacy Act. You may also request a copy by contacting us at the number on the back of your ID card.

Northeastern NY: Highmark Western and Northeastern New York Inc. d/b/a Highmark Blue Cross Blue Shield.

Western NY: Highmark Western and Northeastern New York Inc. d/b/a Highmark Blue Cross Blue Shield.

Highmark Blue Cross Blue Shield and Highmark Blue Shield are Medicare Advantage HMO, PPO, and/or Part D plans with a Medicare contract. Enrollment in these plans depends on contract renewal.

All references to “Highmark” in this document are references to the Highmark company that is providing the member’s health benefits or health benefit administration and/or to one or more of its affiliated Blue companies.