

Date

Employer Info
Name
Address

RE: Group# - Group ID. Group Name

Dear Employer Contact:

Blue Cross and Blue Shield of North Carolina (BCBSNC) recently sent you a questionnaire to obtain information and respond to The Rawlings Company on our behalf. To date, The Rawlings Company has not received your response.

BCBSNC has asked The Rawlings Company to assist in gathering information mandated by the federal government. The Medicare, Medicaid and SCHIP Extension Act of 2007 requires that all group health plans collect and report to the federal government specific employer group information on a quarterly basis. Please complete all questions on the reverse side of this letter, even if your coverage has ended or your Plan is no longer administered by BCBSNC.

If you have any questions, or need assistance in completing the questionnaire, please call a Rawlings Customer Service Representative at **1-888-367-2580**, Monday through Friday, 8:30 am to 5:00 pm (E.S.T.).

For further information on the regulations and the federally mandated requirements, please visit the Centers for Medicare and Medicaid Services website at <http://www.cms.hhs.gov/MandatoryInsRep/>.

Thank you for your assistance.

Sincerely,



Dan Atherton
Director of Group Membership
Blue Cross and Blue Shield of North Carolina