



**BlueCross BlueShield
of Illinois**

PO Box 3004
Naperville, IL 60566-7004
Address Service Requested

<70-CURRENT_DATE>

Member ID: <UID>

<PRIMARY_FULL_NAME>

<ADDRESS_LINE_1>

<ADDRESS_LINE_2>

<CITY>, <ST> <ZIP>

Your 2017 Medicare Supplement Rates

Dear Member:

We are always working hard to balance the rising costs of health care with providing affordable health care coverage to our members. For that reason, we regularly review our rates and the costs of providing benefits to our members, and make adjustments when necessary. As a result, we have updated the rates for your Blue Cross and Blue Shield of Illinois (BCBSIL) Medicare Supplement insurance coverage.

Effective **Month Day, Year, the premium for your BCBSIL Medicare Supplement insurance coverage will be **\$XXX.XX** per month.**

Please note: this rate is based upon your current coverage selections at the time of this letter's printing. If you make changes, such as choosing a different plan or moving to a new address, your premium may also change. However, this letter is the only notice of annual rate change you will receive. Rate change letters are not sent out for new or changed plans, so it is important to keep track of any updates you make to your coverage.

If you have questions, or would like to learn more about other BCBSIL Medicare Supplement insurance plans, please contact your health insurance agent or our Customer Care Center at **1-800-624-1723**. We're available Monday through Friday, from 7 a.m. to 6 p.m. Central time, and are happy to assist you. Or, visit us at www.bcbsil.com/medicare.

Sincerely,

Blue Cross and Blue Shield of Illinois

bcbsil.com

Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

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