<Letter Date>

<First Name > <Last Name >

<Address1>

[<Address2>] Member ID: <Member ID> <City> <State> <Zip>

[Important <plan name> information]

Important information about your account

The Social Security Administration/ Railroad Retirement Benefit Payment (SSA/RRB) has not withheld funds to cover your plan premium from your benefit check. They were supposed to start taking funds out on <February 1, 2019>. But they didn’t do that for two or more months. We’re sorry for the inconvenience. And we want to assure you that your eligibility and benefits with the plan will continue.

**What you need to know**

We resubmitted your withholding request for an effective date of <June 1, 2019>. If accepted, SSA will only cover new premiums going forward. They won’t cover unpaid premiums billed **before** <June 1, 2019>. We’ll let you know if they deny the request. And if they do deny, we’ll also send you <payment coupons> so you can pay your monthly plan premium. [Please continue to pay your premium bill as long as you get it.]

Because they didn’t deduct funds over the last several months, you have a balance on your account. The total amount due through <May 31, 2019> is: **<Total>**

We’re sending you a <payment coupon> for that balance. We understand this may be hard on you financially. If you can’t pay the full amount due, we can help. Simply call us at <**Plan Phone # (TTY: 711)>** to discuss payment options.

**Here’s how to pay your balance due**

To pay your plan premium, you can choose any of the following:

* Mail us your payment. Mail your check for your premium with the enclosed <payment coupon> to:

<Plan name>

<Lockbox address>

<City, State ZIP>

* Call us to make a payment over the phone**.** You can use your [<bank account>] [or] [credit card].
	+ [Call the automated payment line at <**toll-free number**.>]
	+ [Call us directly at <**customer service number (TTY: 711)**.>]
* Pay online. You can access the online payment portal at <**website for member portal**>.
* Pay through electronic funds transfer (EFT). This is the fastest way to make monthly payments. With EFT, the plan will automatically deduct your premium payments directly from your bank account or credit card. To sign up today, simply call us at the number on your member ID card.

**We’re here to help**

If you have any questions, just call us at <**Phone Number (TTY: 711)**>. We’re available <Monday through Sunday, 8 a.m. to 8 p.m., local time>.

Allina Health |Aetna Medicare is a PPO plan with a Medicare contract. Enrollment in our plans depends on contract renewal. See Evidence of Coverage for a complete description of plan benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by service area.

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|   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Payment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Check # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date sent (Please keep for your records)  |  Name Month Amount Due <Member Name> <Mo #> <$ Amt> <Member ID> Please write payment  amount in the space  provided Make check payable to: <Plan Name> Include your Member <Remit Address> ID on your check <Remit City, ST Zip>   <Scan line used for check processing>  |