



11 Corporate Woods Boulevard
Albany, NY 12211
www.empireblue.com

Ethel Graber

*VP & General Manager
(518) 367-5407*

September 22, 2017

Mr. Dave Boland, Director
New York State Department of Civil Service
Employee Benefits Division –Room 1106
Albany, New York 12239

Dear Mr. Boland:

This is a follow-up to recent discussions between Empire BlueCross BlueShield and the Department of Civil Service. As a long-term partner, we are committed to helping you achieve your financial objectives. Empire BlueCross BlueShield is prepared to offer the following administrative fees for the 2018 and 2019 contract years:

	2018	2019
ASO Administration Fee PCPM		
Variable Admin Fee Based on % of Equivalent Premium		

The above ASO fees include the attached performance guarantees which demonstrate our commitment to providing you with a level of service and integration unmatched by any other Hospital only client. Consistent with current practice, our proposed PCPM excludes the following charges, which will continue to be charged separately to the Empire Plan:

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All of the terms, conditions and provisions contained in the previously executed Letter of Intent (LOI), including but not limited to Schedule A, Schedule B, Schedule C and Appendix A and Appendix B shall continue to apply for the duration of this agreement. If the Department agrees to the terms as provided, please sign and return this letter. With your agreement we will then amend the existing Letter of Intent to reflect the 2018 – 2019 administrative fees (above) and provide to the Department for review.

Empire BlueCross BlueShield places the highest value on our relationship with New York State and the Department of Civil Service and we look forward to continuing our long-standing partnership.

In witness hereof, each of the parties agrees the terms outlined above to be executed by a duly authorized representative.

**NYS Department of Civil Service
Employee Benefits Division – Room 1106
Albany, NY 12239**

**Empire BlueCross BlueShield
11 Corporate Woods Boulevard
Albany, NY 12211**

By:  9/26/17
Signature & Date

By:  9/22/17
Signature & Date


Print Name & Title

VP & General Manager

Print Name & Title

EMPIRE PLAN
Hospital Program
Performance Guarantees
Attachment A
Effective January 1, 2018

Program Service	Metric	Proposed Standard	Reporting Frequency	Performance Calculation Period	Annual Performance	Penalty Amount	Maximum Dollars at Risk
Customer Service Call Center							
Claims Processing							

Program Service	Metric	Proposed Standard	Reporting Frequency	Performance Calculation Period	Annual Performance	Penalty Amount	Maximum Dollars at Risk
Clinical Management							