**SAMPLE TEMPLATE**

Dear Employees,

We want to inform you about some changes to the definition of "Allowance" in our company's health insurance policy. This change applies to out-of-network claims and is based on changes to federal law designed to protect you from certain excessive out-of-network surprise bills.

Here's a breakdown of these changes:

1. Horizon has removed the phrase "as the least of the following amounts" from the definition.
2. Horizon has added a statement saying that sometimes, they may agree on a different payment amount with Out-of-Network Providers (doctors who are not part of our insurance network).
3. In line with federal laws, they added information about the "Surprise Billing Reimbursement Rate." This new rate is for specific situations when:
   1. You receive emergency services from Out-of-Network Providers.
   2. You receive certain services from Out-of-Network Providers at an In-Network facility (a hospital or clinic that is part of our insurance network).
   3. You use air ambulance services from Out-of-Network Providers.

In these cases, the reimbursement rate will be based on the negotiated amount (the amount both parties agreed upon) or an amount determined by an independent dispute resolution process.

If state law applies, the Allowance for certain Out-of-Network services will be based on the New Jersey Out-of-Network Consumer Protection, Transparency, Cost Containment, and Accountability Act, or other controlling laws.

You should keep the notice Horizon provided (attached here) with your Summary Plan Description because it is an amendment to the terms of the plan.

If you have any questions or concerns, please don't hesitate to reach out to the HR department. We are here to help!

Best regards,

[Your Name]

[Your Title]