



**NetCare Life & Health Insurance Company**  
**Disclosure Notice**

This Disclosure Notice is being provided to you as a resource and information about the policies and procedures of NetCare in connection with the offering of health insurance coverage.

**Privacy Policy**

Your privacy is very important to us, so at NetCare we carefully guard your confidential individual-personal identifiable information. Examples of personal identifiable information are your name, address, telephone number, e-mail address, social security number and date of birth.

We place great importance on protecting your private information and handle this information in a confidential manner. We restrict access to non-public personal information about you to those employees who need to know that information for an appropriate reason, such as to provide products or services you requested or to administer benefits to you. In order to provide you with insurance benefits and services you want, we routinely collect, store and use information about our customers. We use this information for such activities as evaluating benefits, paying claims or administering our products and services and processing transactions requested by you.

**Rates**

NetCare will provide a rate proposal to you based on the census profile received. Should the actual enrollment differ from that information or should information pertaining to health status and medical conditions differ or are not disclosed in the Risk Screening Form and/or Health Statement, NetCare reserves the right to redevelop the rates accordingly and/or decline to cover the group based on not meeting or complying with participation requirements. NetCare also reserves the right to change premium rates based on demographic changes, utilization or loss experience, medical trend factors and/or benefit design changes.

**Underwriting**

NetCare requires medical underwriting review for all groups enrolling less than twenty-four (24) full time employees. All employees enrolling will be required to fully complete a Health Statement provided by NetCare. Medical records may be requested or must be supplied by the member at the time of enrollment.

**Pre-Existing Medical Conditions**

NetCare reserves the right to place exclusions on any pre-existing medical conditions for a period of no more than twelve (12) months. However, a Certificate of Creditable Coverage can be submitted from a previous carrier to apply creditable months for each month of exclusion period. This policy is only applicable to groups enrolling less than 24 full-time employees or employees enrolling outside of their open enrollment period or a HIPAA qualifying event.

**Participation Requirements**

Groups enrolling 2 to 10 full-time employees must have 100% participation of eligible employees and 100% employer contribution of the single premium is required.

Groups enrolling 11 to 49 full-time employees must have 80% participation of eligible employees and 70% employer contribution of the single premium is required.

Groups enrolling 50 or more full-time employees must have 80% participation of eligible employees and 50% employer contribution of the single premium is required.

**Renewal of Coverage**

NetCare guarantees renewal of coverage upon the anniversary period of the group. A 60-day notice is generally provided prior to your renewal anniversary date. Your renewal premium rates may be changed due to your utilization or loss experience, medical trend factors, benefit design changes and demographic changes.

**Benefits and Premiums**

Benefit design plans as well as premium rates for specific benefit plans will be provided by NetCare to you upon the completion of a Risk Screening Form and Census Data Profile. The benefits and premiums provided by NetCare are available for your group to select and for which your group is qualified to enroll. You are only allowed however, to choose or select one benefit plan design for the entire group.

**Worker's Compensation**

Guam Public Law requires employers to provide worker's compensation coverage to their employees. NetCare requires proof of worker's compensation insurance upon enrollment. The name and policy number of your worker's compensation carrier will be required in your Master Group Application. This is needed for potential third party liability claims.

Acknowledged By: \_\_\_\_\_ Name of Company \_\_\_\_\_

Date: \_\_\_\_\_ Marketing Agent: \_\_\_\_\_