



P.O. Box 14601

Lexington KY 40512 - 4601

<Insert date>

<Insert employer name>

<Insert address 1>

<Insert address 2>

<Insert city, state, ZIP>

Dear benefit administrator:

We have engaged the services of Cotiviti to review the eligibility of some of your plan employees' dependents.

Humana, in partnership with Cotiviti, will conduct reviews directly with affected plan employees and their dependents. Employees will receive a letter from Cotiviti detailing the review scope and requesting needed documentation.

Employees who do not respond to this request could have their dependents' coverage terminated. As their employer, you will be notified prior to any termination.

Thank you for your cooperation during this review.

Sincerely,

Commercial Enrollment Department