

Second Blue Bid Frequently Asked Questions

Second Blue Bid Basics

What is second Blue bid?

Starting September 24, 2024, pursuant to a court-approved settlement, certain qualifying accounts that are headquartered in locations where only one Blue Plan is licensed to provide service became eligible to request an additional Blue bid from a Blue Plan of the account's choosing.¹ This option to request proposals from both the Blue Plan where the account is headquartered (Local Plan) and a second Blue Plan is called a second Blue bid. After the qualifying account requests proposals from these two Blue Plans, the account has the right to select one of these bidding Plans to provide its self-funded health benefit contract.

Local Blue Plan(s) can be identified using <https://www.bcbs.com/explore-affordable-health-plans/employer-health-insurance>. Local Plan(s) can be searched using either the zip code or state of the headquarters for the account.

Who can request a second Blue bid? *(updated Oct. 2024)*

The accounts eligible to request a second Blue bid are called Qualified National Accounts (QNAs). The current list of QNAs is available at www.BCBSSettlement.com and at www.bcbs.com.

Non-employer and governmental accounts are not eligible to request a second Blue bid. Non-employer accounts, include, but are not limited to, Taft-Hartley Trust Plan sponsors, multiple employer welfare arrangements, association health plans, and retiree groups.

How do overlapping service areas impact second Blue bid?

Some of the accounts on the list are headquartered in locations where more than one Blue Plan is licensed to provide service and, thus, are able to serve the account's business today (e.g., California and parts of Pennsylvania). Since these accounts can already request more than one Blue bid, the second Blue bid option is already present (i.e., employers may seek bids from both Blue Plans in their local service area).

Please note that Blue Plans licensed to provide service in an overlapping service area may still accept a request to provide a second Blue bid from any Qualified National Accounts headquartered in a single-Plan service area.

If a Qualified National Account (QNA) is headquartered where more than one Blue Plan is licensed to provide service, do bid requests need to be made in the Second Blue Bid Portal or do they initiate requests directly with the applicable Plans? *(added April 2025)*

If a QNA is headquartered in a location where multiple Settling Individual Blue Plans are licensed to provide service (e.g., California and parts of Pennsylvania), the consultant or QNA does not need to submit a second Blue bid request through the Portal. Instead, the consultant or QNA can follow its ordinary practice of directly engaging with Plans operating within the QNA's headquartered location. The QNA cannot request Blue bids from Blue Plans operating outside of the QNA's headquartered location.

¹ Accounts headquartered in locations served by two Blue Plans already have the ability to request bids from two Blue Plans and do not get additional bids by the introduction of the second Blue bid process.

How does a Qualified National Account (QNA), or a consultant on its behalf, request a second Blue bid? *(updated Sept. 2025)*

As of September 24, 2024, class member accounts on the QNA list that are headquartered in locations where only one Blue Plan is licensed to provide service may request an additional Blue bid from a Blue Plan of the account's choosing. The QNA or its Broker or Consultant can request a second Blue bid by either asking its local Blue Plan to contact the second Blue bidder, or by completing a web-based application at <https://www.bcbs.com/explore-affordable-health-plans/qualified-national-accounts>.

When submitting a second Blue bid request, the following information is required:

- Confirmation that the account is a QNA;
- Confirmation that the account has sought a bid from the local Blue Plan (the QNA's current local BCBS Plan can be found by visiting <https://www.bcbs.com/explore-affordable-health-plans/employer-health-insurance>.);
- The account's contact information;
- Account's headquarters address;
- The account's selection of the second Blue bidder
- The submitter's name, phone, email and relationship to the account.
- Estimated number of contracts and contract period.

As part of the submission, there are optional fields to indicate interest in a Third-Party Administrator (TPA) solution or provide any other additional information that the account or broker feels is necessary for BCBSA to determine whether the account is eligible for a second Blue bid.

For brokers or consultants submitting a request on an account's behalf, the broker or consultant must also submit a copy of the account letter or email confirming that the broker or consultant is working on the account's behalf. The confirmation can be in the form of a Broker of Record (BOR) form or an email from the QNA. Either can be uploaded to the submission portal.

If the account, broker, or consultant requests a bid directly from a Blue Plan other than their local Blue Plan, that Blue Plan will immediately notify BCBSA. That Blue Plan cannot move forward with any communications specific to the account until BCBSA has validated the request by confirming that the account is eligible and that the local Blue Plan has received a request for a bid as well.

Finally, once a second Blue bid request is approved, the QNA shall ensure coordination between its brokers or consultants (if any) to confirm that the Second Bid Request issued to the Local Plan are identical in material respects. If it is identified that the bid requests are not identical in material respects, the QNA must revise the Request for Proposal (RFP) to comply with this requirement.

If the selected second bidding Blue Plan declines the request to provide a second Blue bid, the account can restart the submission process with a different Blue Plan selected as the second bidder.

What information should be included on the Broker/Consultant attestation form that is uploaded as part of the second Blue bid request? *(added April 2025)*

The attestation form is used to validate that the broker or consultant submitting the second Blue bid request has permission to represent the Qualified National Account (QNA). This written documentation from the QNA must, at a minimum, include the QNA name, broker or consultant organization name and a time period for which the authorization is valid.

If the attestation does not include this information, Blue Cross Blue Shield Association (BCBSA) may reach out to the requestor to obtain an updated attestation form or other information that may be used to

validate that the broker is acting on the account's behalf. If the updated attestation form is not received within a designated time period, the second Blue bid request may be rejected and resubmitted once the broker attestation form is appropriately completed.

How long before a benefit contract's effective date can a second Blue bid request be submitted? *(added April 2026)*

Second Blue bid requests can be submitted for a benefit contract starting up to 3 years from the year in which the second Blue bid request is initiated. For example, a second Blue bid request submitted on March 12, 2026 can request bids for benefits beginning up until January 1, 2029.

How long is an approved second Blue bid request valid? *(added April 2026)*

Second Blue bid requests approved by Blue Cross Blue Shield Association (BCBSA) are valid until the benefit year submitted on the request has begun, the contract period for an award expires, or the account initiates an additional Request for Proposal (RFP) cycle.

If an award has not been made after the benefit year identified in the request begins, then the request will be closed by BCBSA. The account can later request a new second Blue bid for a different benefit year if it is still on the Qualified National Account List at the time of that new request.

What happens once a second Blue bid is requested? *(updated April 2026)*

Once the Qualified National Account (QNA) requests the second bid, Blue Cross Blue Shield Association (BCBSA) will validate the request and inform the local Blue Plan and the selected second Blue bidder of the request, typically within one business day.

- BCBSA validation includes verification that
 - the account is on the QNA list,
 - the submitter is authorized to request the second Blue bid,
 - the local Blue Plan identified by the account matches the service area of the headquarters (using existing BCBSA policies and procedures),
 - and the account's headquarters is not in an overlapping service area.

The Blue Plan selected for second Blue bid will decide, within three business days of being notified of the request by BCBSA, whether it agrees to submit a bid.

If the selected second Blue bidder agrees to submit a bid, the account (or its designated contact) will be notified, and typical communication and bidding activities will begin.

What if the selected Second Blue bidding Plan, or the local Blue Plan, declines to bid?

If the selected Second Blue bidding Plan declines to submit a bid, Blue Cross Blue Shield Association will inform the account and the account can decide whether it wants to select a different Blue Plan as the second Blue bidder and initiate a new request for second Blue bid.

The local Blue Plan can also decide whether to submit a bid. If the local Blue Plan decides not to submit a bid, the account can continue the bidding process with the second Blue bidder, but it cannot replace the local Blue Plan with another Blue Plan.

What happens if a second Blue bid request is submitted, but the account later decides not to go forward with the bidding process? (updated April 2026)

If a Qualified National Account (QNA) initiates a valid second Blue bid and then decides it will not complete the Request for Proposal (RFP), the QNA is expected to withdraw its second Blue bid request. The QNA can do this by emailing QualifiedNationalAccounts@bcbsa.com or the Local Plan with their intent to withdraw the request. If the QNA does not withdraw its request and the benefit year identified for the request begins, Blue Cross Blue Shield Association (BCBSA) will withdraw the request on behalf of the account.

The QNA can submit a new second Blue bid request at later date, so long as it is still on the list of QNAs.

Qualified National Account List

What is a Qualified National Account (QNA)? (updated April 2026)

Qualified National Accounts are the specific employers, identified on the QNA list, that are eligible for a second Blue bid. The current QNA list was created in connection with a court-approved settlement that became effective on June 24, 2024. This list is available on www.BCBSSettlement.com and <https://www.bcbs.com/explore-affordable-health-plans/qualified-national-accounts>.

The QNA list will be refreshed every two years on June 24th (i.e., the list will be refreshed on June 24, 2026, June 24, 2028, and so on).

The most current QNA list will be used to confirm an employer's eligibility for a second Blue bid.

How is the Qualified National Account (QNA) list created? (updated Dec. 2024)

The Court approved the methodology for determining the QNA list as part of the settlement. The QNA list is created using the following methodology:

1. Using data from Dun & Bradstreet, employers with at least 5,000 total U.S. employees were identified.
2. Each employer's estimated members were computed.
3. Each employer's employee dispersion percentage was determined.
4. Employers were ordered based on their dispersion percentage.
5. Eligible employers were added to the list until the estimated self-funded membership eligible for a second Blue bid totaled at least 33 million in the aggregate.

The list will be refreshed every two years, beginning June 24, 2026, using this same methodology and updated data, including the then-most current employer data from Dun & Bradstreet. The process for refreshing the QNA list will be the same as the original process used, with the exception that Accounts that opted out of the Settlement are not eligible for inclusion in the list.

How is the employee dispersion calculated? (added Dec. 2024)

The identification of Qualified National Accounts is based on a calculation that is defined in the Court-approved settlement agreement and relies on third-party data obtained from Dun & Bradstreet.

When and how is the headquarters determined? (added Oct. 2024)

Consistent with existing Blue Cross Blue Shield Association (BCBSA) policies and procedures, the headquarters location of the Qualified National Account (QNA) is determined at the time of the request for

a second Blue bid using information obtained from the QNA, publicly available information and/or third-party resources.

How are headquarters determined for Qualified National Accounts (QNAs) that are headquartered outside the United States? (added Oct. 2024)

For a QNA headquartered outside the U.S., the Account's U.S. headquarters is used to determine the Account's local Plan(s). Consistent with existing Blue Cross Blue Shield Association (BCBSA) policies and procedures, a U.S. headquarters location will be determined by using public and/or third-party resources including but not limited to trade publications, the account website, SEC filings, and IRS Forms 5500 or 990.

Can the list of Qualified National Accounts (QNAs) be appealed?

Any disputes or issues related to the QNA list should be referred to the Monitoring Committee.

The Monitoring Committee will decide employers' appeals regarding the QNA list based solely on whether Blue Cross Blue Shield Association (BCBSA) accurately used the employer's data provided by Dun & Bradstreet at the time the list was created.

When a class member submits an appeal to the Monitoring Committee, a decision about whether the employer should be added to the Qualified National Account List will be made within 14 days of receipt of the appeal. The decision of a majority of the Monitoring Committee will be final and binding with respect to the employer.

The Monitoring Committee may be reached through the settlement website: www.BCBSSettlement.com.

How does the timing for second Blue bid requests work with the refresh of the Qualified National Account (QNA) List? (added April 2026)

To request a second Blue bid, the account must be on the QNA list at the time the request is submitted to Blue Cross Blue Shield Association (BCBSA). Those accounts currently on the QNA list are eligible to request a second Blue bid until June 23, 2026. On June 24, 2026, the account must be on the new QNA list to request a second Blue bid.

What happens to second Blue bid requests that are already in-process when the Qualified National Account (QNA) list is refreshed? (added April 2026)

If the request is submitted before June 24, 2026, the account was on the prior Qualified National Account List, and all other eligibility criteria are met, Blue Cross Blue Shield Association (BCBSA) will approve the request. The account can then complete the Request for Proposal (RFP) process and award the business to its choice of bidder.

What happens if an account was previously on the Qualified National Account (QNA) list but is no longer on the active list? (added April 2026)

If an account was on the QNA list, and as of June 24, 2026, is no longer on the list, it will not be eligible to request a second Blue bid. That account can continue to request a bid from their local Blue Plan. If the account requested a bid prior to June 24, the request will be evaluated for eligibility and once Blue Cross Blue Shield Association (BCBSA) approves, the account can complete the bidding process and award the business to the bidder of its choice.

Once that contract period ends, the account begins a new request for proposal process or the request expires, if the account is not on the QNA list at that time, it can request a bid from its local Plan but it cannot request a second Blue bid.

If the Account does not remain on the Qualified National Account (QNA) list after the list is refreshed, can the Account continue receiving benefits from the second Blue Plan it selected while it was eligible to request second Blue bids? (added Oct. 2024)

If an account that is being served by a second Blue bidding Plan is removed from the QNA list when a list refresh occurs, its current benefits contract will stay in place for the duration of the agreed upon term or until the QNA issues a new Request for Proposal (RFP). Once the contract period ends, or the account issues a new RFP, it is no longer a QNA and cannot request a second Blue bid.

Second Blue Bid Scenarios

How does a merger, acquisition, or refresh affect a Qualified National Account's (QNA) right to request a second Blue bid?

In the event of a merger or acquisition involving one or more QNAs, the Blue Plan(s) currently providing coverage will continue to do so until the benefit contract(s) terminates or is opened by the account for re-bidding.

If a QNA not headquartered in an overlapping service area acquires another entity and puts the contract of the QNA (including the acquired entity) out for bid before the next QNA list is issued, the QNA may request: (a) a bid from its Local Plan; and (b) a second Blue bid from any other Blue Plan, regardless of whether/r that selected second Blue bidding Plan is the current Local Plan for any of the companies that consolidated.

As set forth above, the QNA list will be refreshed every two years. Upon the refresh, accounts on the list will remain, be added, or be removed based on the methodology described above using then-current data. If an account that is being served by a second Blue bidder is removed from the list during a refresh, its benefits contract with that Blue Plan will stay in place until the contract expires or the account issues a new bid, whichever is sooner.

If the size of the Qualified National Account (QNA) decreases after it is added to the list, can it still request a second Blue bid? (added Oct. 2024)

The QNA list will be refreshed every two years, with the first refresh occurring on June 24, 2026. Once an account is included on the QNA list, it will be eligible for a second Blue bid until the next list refresh, regardless of fluctuations in its employee population.

Can a subsidiary or affiliate of a Qualified National Account (QNA) request a second Blue Bid? (updated Oct. 2024)

Only a listed QNA can be eligible to request a second Blue bid. The listed QNA may decide to consolidate its healthcare purchasing and incorporate subsidiaries and/or affiliates into its request for a second Blue bid. Under that situation, the QNA, and not the subsidiary and/or affiliate, will control the healthcare purchasing process, including the selection of a second Blue bidding Plan and any subsequent contracting process.

Can Private Healthcare Purchasing Exchanges be used for second Blue bid? (added Oct. 2024)

The exchange itself is not an “Employer” and, therefore, cannot be a Qualified National Account (QNA) that may permissibly request a second Blue bid.

However, after the second Blue bid process completes, the QNA and its selected Blue Plan may decide to rely on an exchange for the benefits enrollment process.

Can a Qualified National Account (QNA) renew a second Blue bidder’s contract without initiating a new request for second Blue bid? (added Oct. 2024)

If the terms of the original contract allow for renewals without reinitiating an Request for Proposal (RFP) or Request for Information (RFI) to any carrier, the QNA can proceed to renew the contract without restarting the second Blue bid process. If the contract does not include a renewal clause, and the QNA initiates an RFP or RFI to any carrier, the benefits selection process restarts, including the second Blue bid process.

If chosen, how long can the second Blue Plan service the account?

If an account has submitted a request for a second Blue bid while on the Qualified National Account (QNA) list and the QNA list is refreshed before the account selects its chosen Blue Plan, the account shall be permitted to complete the Second Blue Bid process and choose coverage from either its Local Plan or the second Blue bidding Plan.

Once the bidding process is complete, whichever Blue Plan is chosen by the account will stay in place until the contract expires or the account issues a new request for proposal.

When the QNA’s contract expires, becomes open for renewal, or is otherwise reopened for bidding, the QNA can request a bid from the local Blue Plan. If, at that time, the account is still a QNA, it can also request a second Blue bid from any other Blue Plan regardless of whether that Blue Plan is the account’s current Blue Plan. If, at that time, the account is no longer on the QNA list, the account is no longer eligible to request a second Blue bid, but can continue to request a bid from its local Blue Plan.

How will accounts learn about the offerings and capabilities of Blue Plans outside their service areas?

Consultants and brokers can engage with any Blue Plan regarding that Plan’s general capabilities. Many consultants and brokers issue requests for information to Plans to gather relevant information. Some firms request capabilities presentations. All Blue Plans may respond to those generalized information and presentation requests in the ordinary course of business as long as the presentations are not account-specific.

In the rare case where the account prefers to not work with consultants or brokers, it can request generalized Capabilities Introductions directly from the account’s local Blue Plan and/or from Blue Cross Blue Shield Association (BCBSA). Regardless of source, the request for such an introduction will be facilitated by BCBSA and the ultimate presentation will be intended to mirror the presentations given in response to general capabilities requests that brokers and consultants make today. The Capabilities Introductions are not a substitute for a client-specific Request for Proposal (RFP), which occurs after the account or broker identifies the second Blue bidding Plan and such request has been validated and accepted.

Can an account award its business based on geographic areas? *(added Oct. 2024)*

In order to request a second Blue bid, the Qualified National Account must request a bid from its local Blue Plan and identify the second Blue bidder it has chosen in connection with the bid. The Request for Proposal (RFP) issued to the second Blue bidding Plan must be identical in all material respects to the RFP issued to the local Blue Plan.

If the account selects a Blue-branded self-funded health benefit plan through the second Blue bid process, it must award its contract to only one of the two Blue Plan bidders.

Can insured products be included in the second Blue bid request? *(added Oct. 2024)*

No. Second Blue Bid is available to Qualified National Accounts contracting for Blue branded self-funded health benefits, including medical, dental, vision benefits, and healthcare financing vehicles such as stop loss insurance and reinsurance. Fully insured products are not self-funded health benefits and not within the second Blue bid process.

Can a Qualified National Account (QNA) request a Third Party Administrator (TPA) through the Second Blue Bid portal? *(updated Sept. 2025)*

The Second Blue Bid portal allows a QNA to select one Blue Cross Blue Shield Licensee as a Second Bidder. Following the identification of a second Blue bidder, the selected Blue Cross Blue Shield licensee can respond to the QNA's Request for Proposal (RFP) by relying on its Blue branded products and services, including partnering with a Blue licensed TPA or other third party administrators. QNAs or their consultant/broker may indicate that they are interested in a TPA solution as part of the second Blue bid request.

Does a proposal from a Blue branded Third Party Administrator to a Qualified National Account count as second Blue bid? *(added Dec. 2024)*

Yes.

Additional Second Blue Bid Information

Does the settlement provide for any fees associated with second Blue bid? *(updated Sept. 2025)*

The Court has approved a per contract per month Local Service and Support Fee (LSSF) paid by a successful second Blue bidder to the local Blue Plan for each employee covered by the second Blue bidder that resides in the local Blue Plan's service area that overlaps with the Qualified National Account's (QNA) headquarters' state. The LSSF will be reviewed annually and is a complete replacement for any other inter-Plan fees charged by the local Plan to the successful second Blue bidding Plan for the covered members residing in the local Plan's Service Area that overlaps with the QNA's headquarters' state.

The purpose of the LSSF is to facilitate the pro-competitive measures that provide meaningful choice to QNAs, to provide appropriate compensation to local Plans for the investments and costs incurred in their Service Area that will be relied upon by the successful second Blue bidding Plan, and to provide an objective, verifiable basis for determining the amount of such compensation.

If awarded the account, the second Blue bidding Plan is not required to incorporate the LSSF into the Plan's response to a Request for Proposal (RFP) and/or pass the fee on to the QNA.

What is included in the Local Service and Support Fee (LSSF)? *(added Dec. 2024)*

The Settlement notes that the LSSF “shall approximate but not exceed the national average Standard or default inter-Plan fee for accounts with at least 5,000 Members.” The “Standard or default inter-Plan fee” includes the Access Fee and Administrative Expense Allowance. The “Standard or default inter-Plan Fee” does not incorporate fees paid by Blue Plans to BCBSA for the processing of claims through the inter-Plan claims processing system.

What is the amount of the Local Service and Support Fee (LSSF) and when does the amount become effective? *(updated April. 2026)*

The approved Local Service and Support fee (LSSF) for the January 1, 2026 – December 31, 2026, period is \$23.12 per covered employee per month.

The LSSF amount is set annually according to the formula set forth in the Settlement Agreement based on data from the prior year. It is submitted to the Court for approval in Q3 of each year and, if approved, is effective for the next calendar year. For example, the LSSF listed above is effective for contracts effective for January 1, 2026, to Dec. 31, 2026. The LSSF for calendar year 2027 will be submitted for approval in 2026 and published once it is approved.

How is the Local Service and Support Fee (LSSF) calculated? *(added Dec. 2024)*

The Settlement notes that the LSSF “shall approximate but not exceed the national average Standard or default inter-Plan fee for accounts with at least 5,000 Members.” The “Standard or default inter-Plan fee” includes the Access Fee and Administrative Expense Allowance. The “Standard or default inter-Plan Fee” does not incorporate fees paid by Blue Plans to Blue Cross Blue Shield Association (BCBSA) for the processing of claims through the inter-Plan claims processing system.

What fees will be charged by the Second Blue Bid Initial Control Plan if the Second Blue Bidder wins the business? *(added Dec. 2024)*

Plans make independent decisions about whether and how to incorporate inter-Plan fees into their account arrangements, including Local Service and Support Fee (LSSF). However, in the event a second Blue bidding Plan is awarded a Qualified National Account’s (QNA’s) business, the LSSF is a complete replacement for any other inter-Plan fees (including the Access Fee and Administrative Expense Allowance) charged by a Second Blue Bid Initial Control Licensee to a Second Bidding Licensee for the covered members residing in the Initial Control Plan’s Service Area that overlaps with the QNA’s headquarters state.

Are inter-Plan fees charged when a Blue Third Party Administrator (TPA) is utilized? *(added Dec. 2024)*

TPAs do not impact the application of inter-Plan fees charged between Blue Plans for hosting out of area members.

How are uniquely negotiated inter-Plan fees tracked for accuracy? *(added Dec. 2024)*

Plans are responsible for tracking the application of inter-Plan fees that they charge for hosting out of area members.

If the Second Blue Bidding Plan has access to more favorable inter-Plan fees in a given situation than the Initial Control Licensee, which fee is charged by the Host Plan when there is a Second Blue Bid? (added Dec. 2024)

For inter-Plan fees charged by non-bidding Host Plans to the bidding Plans, the inter-Plan fees cannot exceed the account's historical inter-Plan fee. If the account is not an incumbent, then the inter-Plan fees cannot exceed the Host Plan's average historical inter-Plan fee. All Plans make independent business decisions how they incorporate inter-Plan fees to their respective bids.

Which Plan receives the Local Service and Support fee (LSSF) if the second Blue bidder wins the business rather than an Alternative Control Plan to which the account was ceded? (added Dec. 2024)

The initial control Plan receives the LSSF in this scenario.

Does the Settlement require cedes? (added Oct. 2024)

If a Local Blue Plan chooses to bid a national account – e.g. an account with members in multiple service areas — with more than 250 total members solely under a non-Blue brand, the Local Blue Plan must cede the right to submit a Blue-branded bid to another Blue Plan using criteria that relies on where the account's members are located. This is not a second Blue bid.

How does second Blue bid impact the existing cede process? (updated April 2026)

If a Local Plan cedes (or continues to cede) a Qualified National Account (QNA), the Plan receiving the cede stands in the shoes of the Local Plan. Whether or not there is a cede, the QNA gets to decide which Blue Plan to request for a second Blue bid.

The Initial Control Licensee decides whether and to whom it cedes business. The agreements between Initial Control Licensees and Alternative Control Licensees govern specific cedes, including the terms and length of the cede.

If a cede is in place, can the Qualified National Account (QNA) still request a second Blue bid from a Blue Plan other than the Initial Control Plan and the Alternate Control Plan to which the cede was granted? (added Dec. 2024)

If a cede has been issued by the Initial Control Licensee and the term of the cede has not expired when a QNA begins a Request for Proposal process, the QNA may request a second Blue bid from another Blue Cross Blue Shield Plan.

What is the process for continuing a cede while requesting a second Blue bid? (added Dec. 2024)

- Account decides to go out to bid for ASO coverage
- Account reaches out to Initial Control Plan to request a bid
- Account submits a request for a second Blue bid, indicating the Initial Control Plan (or Alternate Control Plan, if current account relationship is through an active cede) and the second bidding Plan
- Initial Control Plan will determine whether it can and/or will continue the cede with the Alternative Control Plan based on the existing cede relationship between the Initial Control plan, the Alternative Control Plan and the Account.

General Settlement Information

What is the Monitoring Committee?

As is common in settlements like this, a Monitoring Committee was created by the settlement agreement to oversee implementation of the settlement, including resolving disputes related to the implementation. The Monitoring Committee is made up of representatives from the Blue Cross Blue Shield (BCBS) System, Plaintiffs' attorneys and a Court-appointed neutral party.

If you are a class member and have questions about the Monitoring Committee, you should refer your questions to Plaintiffs' attorneys via www.BCBSSettlement.com.

Where can I get more information? *(updated April 2026)*

Please refer to www.BCBSSettlement.com for information about the Settlement. Information about how to request second Blue bid is available on <https://www.bcbs.com/explore-affordable-health-plans/qualified-national-accounts>.