



CareFirst BlueChoice, Inc.
840 First Street, NE
Washington, DC 20065

Virginia Code Section 38.2-3407.12(B)

We currently offer our employees/members another group health benefit plan or a self-insured or self-funded health benefit plan which allows the enrollees to access care from their provider of choice whether or not the provider is a member of the health maintenance organization's panel.

NOTE: This form should be signed by an officer of the Group or the Group Administrator.

_____	_____
Name of Group	Group Number
_____	_____
Signature and Title	Date

Please return this form to:

CareFirst BlueChoice, Inc.
840 First Street, NE
Washington, DC 20065
Attention: Account Implementation Department
Mailstop 31