

NOTICE OF LIQUIDATION OF FRIDAY HEALTH PLANS OF COLORADO, INC.

The District Court of the City and County of Denver has issued an Order effective September 1, 2023, authorizing the Colorado Insurance Commissioner to liquidate Friday Health Plans of Colorado, Inc. ("Friday Health Plans"). Under the Order, the Commissioner, as Liquidator, is directed to take possession of all assets of Friday Health Plans and to administer those assets under the general supervision of the court. A copy of the Order and Frequently Asked Questions ("FAQs") are available online at <https://fridayhealthplansofcolorado-inreceivership.com>.

The Liquidator is authorized to deal with the property, business, and affairs of Friday Health Plans for the benefit of the policyholders and creditors and to take any and all necessary actions to effectuate an orderly and timely liquidation.

This Notice is being sent to all individuals, partnerships, corporations, associations, estates, trusts, governmental bodies, or other entities which the books and records of Friday Health Plans reveal may have right to claims against Friday Health Plans. **Enclosed is a proof of claim form which must be presented to the Liquidator in accordance with section 10-3-534, C.R.S. (See proof of claim instructions). The proof of claim form is also available online at <https://fridayhealthplansofcolorado-inreceivership.com>.**

Claims presented against Friday Health Plans will be reviewed by the Liquidator in accordance with sections 10-3-501, C.R.S., *et seq.* Notices of the Liquidator's determination on claims presented against Friday Health Plans will be given to claimants and/or their specified counsel. Disputed claims will be resolved in accordance with section 10-3-538, C.R.S.

No claims, suits, or other proceedings against Friday Health Plans or against any of its assets may be made except through the filing of a claim with the Liquidator or in a proceeding brought in the liquidation court. **THE DEADLINE FOR FILING PROOFS OF CLAIM IS July 1, 2024.**

HEALTHCARE PROVIDERS

Healthcare Providers SHOULD NOT use the proof of claim form for submitting claims in the ordinary course of business for services rendered. Claims for reimbursement of healthcare services should be presented via currently established procedures by **July 1, 2024**. Healthcare Providers will receive a separate notice regarding circumstances where a proof of claim should be filed.

POLICYHOLDERS

Your Friday Health Plans policy terminated effective September 1, 2023, and you should have received notice that your health plan was ending and instructions on how to obtain new coverage. **PLEASE TAKE NOTE**, if you have not already obtained another health plan, you can obtain a new health plan under the existing special enrollment period until **October 31, 2023**. If you do not obtain a new health plan prior to this date, you will not be able to obtain new coverage until the next open enrollment period begins. Please go to <https://fridayhealthplansofcolorado-inreceivership.com> for more information on how to enroll in a new health plan.

Claims for healthcare services provided prior to termination of your Friday Health Plans policy should be submitted by you or your healthcare providers for processing in the ordinary course of

business and **DO NOT** require the filing of a proof of claim form. Policyholders remain required to pay all applicable cost sharing amounts due, including co-insurance, copayments, and deductibles, for healthcare services provided under their Friday Health Plan policies prior to termination.

COLORADO LIFE AND HEALTH INSURANCE GUARANTY ASSOCIATION

The Colorado Life and Health Insurance Guaranty Association (“Guaranty Association”) will be covering all eligible claims for healthcare services under the provisions of Friday Health Plans insurance policies, subject to the statutory limits, and the terms and conditions of coverage under Colorado laws governing the Guaranty Association. See section 10-20-101 to 10-20-120, C.R.S.

The Guaranty Association’s aggregate coverage liability for eligible healthcare claims shall not exceed \$500,000 with respect to any one individual. Healthcare claims that exceed the \$500,000 limit or are otherwise not covered claims, will be forwarded to the Liquidator for processing as a claim against the assets of the receivership estate of Friday Health Plans.

AGENTS AND BROKERS

Pursuant to section 10-3-522(1) , C.R.S., all agents of Friday Health Plan shall, within thirty days of this notice, provide to the Liquidator, all information in the agent's records related to any policy issued by Friday Health Plans through the agent, and, if the agent is a general agent, the information in the general agent's records related to any policy issued by the insurer through an agent under contract to the general agent, including the name and address of such subagent. A policy shall be deemed issued through an agent if the agent has a property interest in the expiration of the policy, or if the agent has had in the agent's possession a copy of the declarations of the policy at any time during the life of the policy, except where the ownership of the expiration of the policy has been transferred to another.

Agents and brokers should file a proof of claim form if they believe they are owed commissions. The Liquidator will review the records of Friday Health Plans to adjudicate claim amounts.