



Capital BlueCross is an Independent Licensee  
of the BlueCross BlueShield Association

## Certification of Group Size

As the Policymaker for \_\_\_\_\_ (Group Name), I hereby certify that for purposes of applying for health insurance coverage and compliance with federal health care laws, the employer group stated above consists of the following average number of employees during the prior calendar year:

- Fewer than 51 average number of employees
- Between 51-99 average number of employees
- 100 + average number of employees

If you are part of a controlled group of plans, please provide the total number of employees in the controlled group. See the employer aggregation rules, at IRC Section 414, to determine if you are part of a controlled group of plans.

Average number of employees should be calculated as of the end of the prior calendar year. New businesses may use the average of the current year.

I understand that Capital BlueCross will rely on this Certification in connection with determining which medical products and rating methodology the group is eligible for and for compliance with federal laws, including the Patient Protection and Affordable Care Act. The group hereby agrees to indemnify Capital BlueCross for any claims, damages, fines, or penalties which it may incur as a result of its reliance on this Certification.

\_\_\_\_\_  
Policymaker Printed Name

\_\_\_\_\_  
Policymaker Printed Title

\_\_\_\_\_  
Policymaker Signature

\_\_\_\_\_  
Date