

January 14, 2020

John Doe  
1234 Main Street  
Sample City, MI 12345

**Subject: Low Balance Account Fee**

Dear Participant,

As a former employee of *Sample City*, you have a Health Care Savings Program (HCSP) account that currently has a balance of \$1,000 or less. This letter is notification that your account will be charged an annual \$15 low balance account fee beginning in February 2020.

If you do not exhaust your entire account balance by December 31, 2020, this fee will continue to be applied to your account each year until your balance is depleted. For a list of eligible medical expenses that can be covered using HCSP funds, visit [mersofmich.com/hcsp](https://mersofmich.com/hcsp).

Please contact the MERS Service Center with any questions at 800.767.MERS (6377).

Sincerely,

Municipal Employees' Retirement System of Michigan