

Information submitted via Top Hat Plan Statement Online Filing System to U. S.
Department of Labor under 29 CFR 2520.104-23

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Confirmation Number: 15801

Amended Confirmation Number:

Employer Information

Name: Blue Cross and Blue Shield of North Carolina
Address: P.O. Box 2291
City: Durham
State: NC
Zip Code: 27702

Plan Administrator Information

Name: Blue Cross and Blue Shield of North Carolina
Address: P.O. Box 2291
City: Durham
State: NC
Zip Code: 27702
Phone: 9194897431
Email: michael.o'connor@bcbsnc.com

Plan Information

Employer maintains the plan or plans below primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

ID:1	Plan Name:	Blue Cross and Blue Shield of North Carolina Executive Severance Pay Plan for the Chief Executive Officer and Senior Leadership Team	Number of Employees: 10
		Members	

Additional Information:

There are currently 9 members of the Senior Leadership Team, in addition to the Chief Executive Officer, who could become participants in the Plan. A member of the Senior Leadership Team or the Chief Executive Officer will become a Plan participant if and when he or she has incurred a separation from service with the Company and become entitled to severance pay benefits under the Plan.



U. S. Department of Labor
Employee Benefits Security Administration
Washington, DC 20210

This message confirms that the Department of Labor's (DOL's) Employee Benefits Security Administration (EBSA) has received the filing of your Top Hat Plan Statement. The confirmation code for your filing is 15801. When correcting errors to your filing, please use this code in your amended statement. This communication does not mean that DOL has made a determination that you are eligible to file under DOL regulation 29 CFR 2520.104-23.