ChamberCHOICE LEVEL FUNDING ASO
DESIGNED FOR BUSINESSES WITH 5-99 EMPLOYEES
Blue Cross and Blue Shield of Kansas City (Blue KC) has made small business a priority for more than 80 years. And we understand the unique challenges you face today.

Today’s small employers are under constant pressure to mind the bottom line. That’s why there’s ChamberCHOICE – a suite of hand-picked health insurance products designed in partnership with the Greater Kansas City Chamber of Commerce for small employers across the Kansas City region. Chamber membership is not required to select these plans.

ChamberCHOICE Level Funding Administrative Services Only (ASO) plans provide a great alternative to traditional, fully insured small group health plans. The plans have been designed to be fully funded. Blue KC will help you evaluate your maximum claims risk and then blend specific and aggregate stop-loss insurance to create level funding you can budget for each month.
ChamberChoice works for small employers. And their employees.

ChamberChoice is based on a health insurance model called Defined Contribution. Employers provide employees with a health insurance allowance, or “contribution,” to spend on their healthcare. It’s a win-win because employees get to choose the plan that fits their needs. And employers get to control their annual costs.

What is Defined Contribution?
With a group-based Defined Contribution model, the business (employer) sets a specified amount to contribute to employees’ health insurance premiums while providing a menu of group health insurance options for their employees to choose from. The employee can then choose the plan option that best fits their needs. ChamberChoice gives employees a choice of six plan options.

How can Defined Contribution Help Small Businesses?
Many small business owners want to provide benefits to their employees, but the rising cost of health insurance prevents them from doing so financially. This is where Defined Contribution health plans can help a small business compete for and retain the most qualified employees. The Defined Contribution arrangement allows an employer to designate a specific dollar amount for each employee. That employee is then empowered to choose a health insurance plan that meets his or her family’s needs.

Defined Contribution allows businesses to manage their costs by eliminating the uncertainty of fluctuating insurance premiums. If the cost goes up, it’s the employee’s responsibility to decide if he or she wants to search for another plan during Open Enrollment given their employer’s Defined Contribution, or to accept the increase.

The monthly level-funded money remitted to Blue KC will include:
- Administrative costs and stop-loss insurance
- Claims funding

Your maximum annual claims, including claims run-out liability, are predetermined to create level funding that is easy to administer. Employees can elect the following coverage levels:
- Employee Only
- Employee and Spouse
- Employee and Children
- Employee and Family
Blue KC understands the importance of access to high-quality healthcare services. Our provider contracting team ensures our networks deliver by negotiating rates that help keep care affordable, while also ensuring each provider meets Blue KC’s standards for high-quality care.

When your employees select a Blue KC product, it’s important for them to also understand the provider network they have chosen.

**Preferred–Care Blue®**

Preferred–Care Blue (PPO) offers your employees the largest selection of providers within the Blue KC 32-county service area.

**BlueSelect Plus**

BlueSelect Plus gives employees access to a network specially designed for sustainable savings and easy access to quality healthcare in and around the Kansas City metro area.

To choose a BlueSelect Plus plan, companies must be headquartered in the 12-county region listed below, and members must:

☑ **Live in one of these 12 counties:**
  - **Missouri:** Clay, Jackson, Platte, Cass, Clinton, DeKalb, Johnson, Lafayette, Ray, Caldwell
  - **Kansas:** Johnson, Wyandotte

☑ **Seek care from any of the 3,600+ providers and ten hospitals** primarily located in these six counties:
  - **Missouri:** Clay, Jackson, Platte, Clinton
  - **Kansas:** Johnson, Wyandotte

**NEW! Spira Care + BlueSelect Plus**

Spira Care is a combined care and insurance offering developed by Blue KC. It’s designed to make the member healthcare experience simpler and more transparent. Spira Care members enjoy access to comprehensive, personal primary care at convenient Care Centers, as well as access to all the benefits of the BlueSelect Plus network in and around the Kansas City metro area.

Spira Care is built on an Exclusive Provider Organization (EPO) insurance model. Members must receive all care from in-network providers (12-county BlueSelect Plus network or BlueCard network outside the 32-county service area) except for emergency services. Non-emergency services received out-of-network are not covered.

**BlueCard®**

Most Blue KC plans allow you to take your healthcare benefits with you – across the country and around the world – with the BlueCard program. BlueCard gives you access to doctors and hospitals almost everywhere. Outside of the U.S., you have access to doctors and hospitals in nearly 200 countries and territories through the BlueCard Worldwide® program.

For a full listing of in-network hospitals, visit Find A Doctor on BlueKC.com.
The Plan That Puts Care First.
Spira Care, developed by Blue KC, combines integrated primary care and coverage in one place, simplifying the healthcare experience to make it more personal and affordable. Blue KC members enrolled in Spira Care have access to convenient Care Centers located across the metro area, the expertise of our Care Guides to help them on their health journey, and all the benefits of the BlueSelect Plus network.

No additional cost¹: Primary care – including X-rays², labs and behavioral health services – is completely covered at the convenient Spira Care centers.

No deductibles or copays³: Members pay no additional cost for procedures received at any Spira Care location.

Personal Care Guides: Real, live, local experts help members navigate the oftentimes confusing world of healthcare. They can coordinate care, explain benefits, manage claims, refer to specialists and more.

A broad and trusted network: Members have access to more than 3,600 physicians and specialists across the BlueSelect Plus network⁴, which includes ten leading hospitals. And that’s in addition to our Spira Care centers.

¹ There are no additional costs for any procedure provided at Spira Care Centers, but select prescriptions are available on-site subject to applicable copay.
² X-rays are available at select locations only, must be ordered by a Spira Care provider and are at no additional cost to members.
³ Subject to plan cost share

Where Can Employees Go for Care?
Spira Care Centers with integrated primary care services.
- Spira Care – no additional cost

BlueSelect and BlueCard networks.
- Networks and services outside the Care Centers³

LOCATIONS
Crossroads • Lee’s Summit • Liberty • Olathe • Shawnee • Tiffany Springs • Wyandotte

A Closer Look at Spira Care Benefits

<table>
<thead>
<tr>
<th>COMPREHENSIVE SERVICES</th>
<th>CONVENIENT BENEFITS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Routine Preventive Care</td>
<td>Common Prescriptions Filled On-Site</td>
</tr>
<tr>
<td>Adult &amp; Pediatric Primary Care</td>
<td>Specialist Referrals &amp; Scheduling</td>
</tr>
<tr>
<td>Chronic Condition Management</td>
<td>Patient Wellness Follow-ups</td>
</tr>
<tr>
<td>Behavioral Health Consultations</td>
<td>Outside-of-Care Center Support</td>
</tr>
<tr>
<td>Digital (select locations only)</td>
<td>Routine Preventive Care</td>
</tr>
<tr>
<td>Lab Draws</td>
<td>Access to A Healthier You Platform</td>
</tr>
</tbody>
</table>
## ChamberCHOICE

### LEVEL FUNDING ASO PLAN OPTIONS

For Businesses with 5-99 Employees

With ChamberCHOICE, employers offer six unique Level Funding ASO medical plans. Employees then have the freedom to choose the plan that best fits their coverage needs. If an employer opts to offer dental and vision coverage, employees have a choice of three dental/vision plans. ChamberCHOICE Level Funding ASO plans require a minimum of five enrollees to participate.

### MEDICAL PLANS

<table>
<thead>
<tr>
<th>Member Coverage</th>
<th>Deductible</th>
<th>Out-of-Pocket Maximum</th>
<th>Copy/Pay/Cost-Share per Occurrence</th>
<th>RX Copy/Pay/Cost-Share</th>
</tr>
</thead>
<tbody>
<tr>
<td>Network</td>
<td>Single</td>
<td>Family</td>
<td>Single</td>
<td>Family</td>
</tr>
<tr>
<td>CHOICE PCB PPO</td>
<td>$1,000</td>
<td>$2,000</td>
<td>$3,000</td>
<td>$7,000</td>
</tr>
<tr>
<td>CHOICE PCB PPO</td>
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<td>$3,000</td>
<td>$11,000</td>
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<tr>
<td>CHOICE PCB PPO</td>
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<td>$5,000</td>
<td>$6,000</td>
<td>$13,000</td>
</tr>
<tr>
<td>CHOICE PCB BlueSelect Plus</td>
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<td>$2,000</td>
<td>$3,000</td>
<td>$13,000</td>
</tr>
<tr>
<td>CHOICE BlueSelect Plus PPO</td>
<td>$4,500</td>
<td>N/A</td>
<td>$4,000</td>
<td>$13,000</td>
</tr>
<tr>
<td>CHOICE BlueSelect Plus PPO</td>
<td>$3,000</td>
<td>0%</td>
<td>$6,000</td>
<td>$13,000</td>
</tr>
</tbody>
</table>

1) Primary Care Physicians include General Practice, Family Practice, Internal Medicine, and Pediatrics.
2) To select a BlueSelect Plus plan, companies must be headquartered in the 12-county region. Additionally, members must live in one of these 12 counties: Kansas City, Junction, Pitts, Cass, Clinton, DeKalb, Johnson, Linn, Osage, Clay, and Warren.
3) Only primary care services received at a Spira Care Center are at no additional charge. All other primary care services available outside of the 32-county area except for emergency services.
4) Only primary care services received at a Spira Care Center are at no additional charge. All other primary care services available through the BlueSelect Plus network are subject to deductible.

### OPTIONAL DENTAL & VISION PLANS

**Vision Plans**

<table>
<thead>
<tr>
<th>Routine Exam</th>
<th>Frumes</th>
<th>Std. Plastic Lensa</th>
<th>Contact Lens Exam</th>
<th>Contact Lensea</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHOICE Base Vision &amp; Dental</td>
<td>$0</td>
<td>30% Off Retail</td>
<td>$100/$100</td>
<td>$100 + Ded/Cores</td>
</tr>
<tr>
<td>CHOICE Value Vision &amp; Dental</td>
<td>$0</td>
<td>$130 Allowance</td>
<td>$130 Allowance</td>
<td>$130 Allowance</td>
</tr>
<tr>
<td>CHOICE Buy-up Vision &amp; Dental</td>
<td>$10</td>
<td>$130 Allowance</td>
<td>$130 Allowance</td>
<td>$130 Allowance</td>
</tr>
</tbody>
</table>

5) Single Vision/Soft/Soft: 100% Conventional; Disposable: 20% Off balance over Allowance; Premium Lens: 10% Off Retail; 6) Standard Plastic Lenses: 1 per 12 or 24 months (check plan details); 7) Standard Plastic Lenses: 1 per 12 or 24 months (check plan details). 8) Non-Participating Providers: An additional network of coverage in the Blue KC service area. Higher out-of-pocket costs for covered services. Outside our service area, providers are available through the GRID + Blue Cross and Blue Shield national network.

### MEDICAL PLANS

- **CHOICE PCB PPO**: 
  - $1,000 deductible for Preventive care.
  - 100% member responsibility for Preventive care.
- **CHOICE BlueSelect Plus PPO**: 
  - $4,500 deductible for Preventive care and $9,000 deductible for Hospital admission.
  - 20% member responsibility for Preventive care.
  - 100% member responsibility for Hospital admission.

### DENTAL PLANS

- **Base & Major Services**: 100% Covered.
- **Dental Laser Services**: 50% Covered.

### Calendar Year Maximum

- **$1,000 deductible for Preventive care**.
- **$500 deductible for Basic care**.
- **$1,500 deductible for Preventive care and Basic care**.
- **$3,000 deductible for Preventive care, Basic care, and Major care**.

### Dental Plans

- **Dental Laser Services**: 50% Covered.
- **Preventive care**: 100% Covered.
- **Basic care**: 50% Covered.
- **Major care**: 40% Covered.

### Conclusion

For businesses with 5-99 employees, ChamberCHOICE offers a wide range of Level Funding ASO plans, allowing employees to choose the plan that best suits their needs. With options for dental and vision coverage, employees have flexibility in selecting the plans that provide the best fit for their medical and dental needs.
Here’s a quick overview of how the ChamberCHOICE Level Funding ASO Option functions. These are self-funded plans designed specifically for the needs of small employers. Easy to administer, the ChamberCHOICE Level Funding ASO plans are comprised of maximum claims funding, administrative services and stop-loss insurance.

Please note: Fixed Costs include administration fees and stop-loss insurance premiums.
Self Funding
As an employer, when you choose to provide a self-funded medical plan, you are responsible for your employees’ medical benefits directly. Your company assumes direct risk for the payment of claims filed with your plan. ChamberCHOICE Level Funding ASO plans have been specifically packaged for ease of administration and limited risk.

The Medical Plan
Blue KC offers a suite of hand-picked Level Funding ASO plan designs. Your employees will choose from six unique plan designs to fit their needs. Blue KC will provide a Benefit Booklet explaining the plan benefits, exclusions and limitations.

ASO Agreement
Blue KC will manage all claims administration for your Medical Plan. The ASO agreement is the contract you will sign authorizing Blue KC to process claims, billing, reporting, enrollment, membership changes, customer services, materials fulfillment, etc.

Stop-Loss Insurance Policy
The Stop-Loss Insurance Policy, also referred to as an Excess Loss Insurance Policy, protects your self-funded group health plan from catastrophic claims incurred by a single covered member (specific stop loss) or overall protections in the event that all of the claims exceed the dollar amount budgeted (aggregate stop loss). ChamberCHOICE Level Funding ASO plans include specific stop loss at $20,000 and aggregate stop loss of 120 percent. This coverage will be for a 12-month contract period plus an additional 12-month run-out period. The Stop-Loss Insurance Policy outlines the coverage included with your ChamberCHOICE Level Funding ASO plans.

Note – The stop-loss policy is issued by Missouri Valley Life and Health Insurance Company (MVLH), a wholly-owned subsidiary of Blue KC.

Claim Funding
ChamberCHOICE Level Funding ASO plans have been specifically designed to determine your maximum claims liability. Once determined, the amount of your maximum claims liability will be remitted by you to Blue KC each month based on enrollment on the 20th day of the prior month. Money not paid out in claims in a given month will roll over. If your claims exceed the aggregate or specific stop-loss thresholds, your Stop-Loss Insurance Policy covers the additional eligible claims.

Year-End Settlement
In the event your plan does not incur the budgeted maximum claims liability, the medical plan will share the benefits of a positive claims experience. Two-thirds of the unused claims funds will be returned to the medical plan and one-third will be retained by Blue KC to help offset administrative costs (deferred administration fee). Settlement reconciliation will occur 15 months after the end of the contract period (plan year).

Contractual Agreements
As an employer, you are directly responsible for your self-funded medical plan. Any services provided by Blue KC to help administer your plan must be supported by contracts. The following legal documents must be agreed to and signed by both parties.

- Business Associate Agreement (BAA)
- Administrative Services Agreement (ASA)
- Excess Loss Agreement (Issued by MVLH)

Financial Responsibility
The PCORI fee does not apply to plan years ending on or after Oct. 1, 2019. However, For noncalendar-year plans that ended between Jan. 1, 2019 and Sept. 30, 2019, there is one last PCORI payment due by July 31, 2020.
**Billing & Payment**

ChamberCHOICE Level Funding ASO Plans will require electronic remittance of all plan funds (monthly maximum claims liability, administrative fees, and stop-loss insurance fees) by the first of the month. If the funds are not received, all claims payments will be put on hold until appropriate funds are received. If remittance is not received by the end of the month, your plan will be terminated (including Stop-Loss Insurance and Administrative Services).

**Sample Monthly Billing Cycle for May**

<table>
<thead>
<tr>
<th>Date</th>
<th>Sample Monthly Billing Cycle for May</th>
</tr>
</thead>
<tbody>
<tr>
<td>April 20</td>
<td>E-bill generated (viewable online within 48 hours)</td>
</tr>
<tr>
<td>May 1</td>
<td>May payment due</td>
</tr>
<tr>
<td>May 1</td>
<td>May remittance pulled via Electronic Fund Transfer (EFT)</td>
</tr>
<tr>
<td>May 10</td>
<td>Blue KC confirms May payment has posted</td>
</tr>
<tr>
<td>May 10</td>
<td>If payments have not posted, all claims payments will be immediately pended</td>
</tr>
<tr>
<td>May 31</td>
<td>If May payment has not posted, plan will be terminated effective May 1, and May claims will be denied</td>
</tr>
</tbody>
</table>

*Note – Employers electing a ChamberCHOICE Level Funding ASO Plan will be required to provide Blue KC with a binder payment equal to the first month remittance (maximum claims liability, administrative services fees and Stop-Loss Insurance). This must be received prior to any plan setup occurring in Blue KC’s systems.*

**Important: Self-Funded Plan Group Responsibilities**

Offering a Self-Funded Group Health Plan has many unique benefits; however, there are also additional actions and responsibilities. Blue KC recommends that employers work with legal counsel to ensure they are able to fully fulfill the obligations of the Self-Funded Group Health Plan.

Below is a list of helpful resources:

- Health Benefits Plan Resource Guide, provided by Blue KC and available online at BlueKC.com, or by contacting your Blue KC representative.
QUESTIONS?
For more information on the ChamberCHOICE program, visit us online at BlueKC.com/ChamberChoice. Prefer to talk in person? Call your broker or contact a small group Blue KC representative at 816-395-2939.

Disclosure Notices
All plans that cover prescription drugs are considered creditable coverage for Medicare Part D.

Blue KC subcontracts with other organizations to perform certain services such as utilization management (e.g., hospital concurrent review, prior authorizations, peer medical necessity review, denials/approvals, appeals), member complaints, provider credentialing, and case management for members with complex and catastrophic conditions.