



ChamberCHOICE LEVEL FUNDING ASO

DESIGNED FOR BUSINESSES WITH 5-99 ENROLLED EMPLOYEES



Chamber**CHOICE**



LEVEL FUNDING ASO OPTION



ChamberCHOICE at work for small business.

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 employers and employees.

Chamber Choice offers a packaged combination of plan options for small employers. Offer one plan or as many that fits your needs.

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

The ChamberCHOICE Level Funding ASO plans are easy to administer and comprised of maximum claims funding, administrative services and stop-loss insurance.

Protect the bottom line.
Empower employees.
Control costs.



OUR NETWORKS

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 **4,100+ providers and sixteen hospitals** primarily located in these seven counties:
 - **Missouri:** Clay, Jackson, Platte, Clinton, Johnson
 - **Kansas:** Johnson, Wyandotte

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.

Preferred-Care Blue

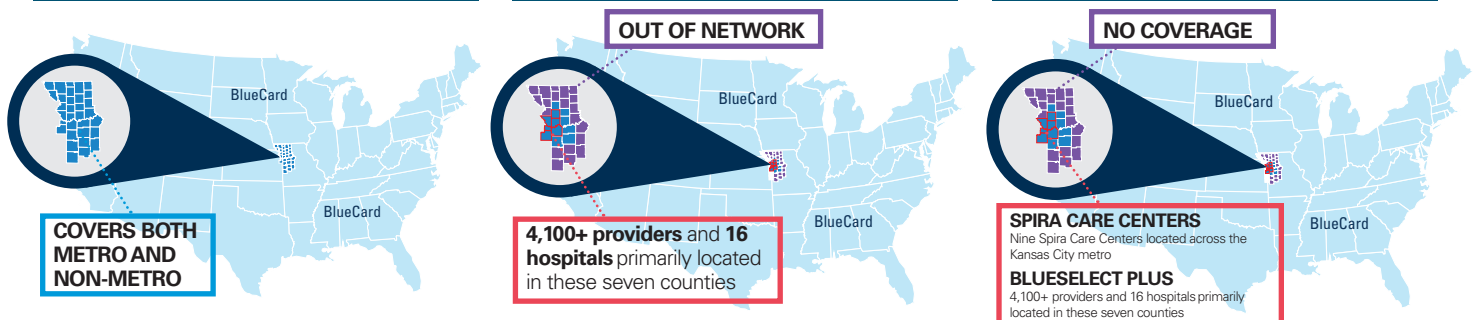
(BlueCard for outside 32-county service area).

BlueSelect Plus

(BlueCard for outside 32-county service area).

Spira Care + BlueSelect Plus

(BlueCard for outside 32-county service area).



PRODUCT TYPE

Preferred Provider Organization (PPO)

PLAN FAMILY

ChamberCHOICE

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Exclusive Provider Organization (EPO)

PLAN FAMILY

ChamberCHOICE

For a full listing of in-network hospitals, visit Find Care on BlueKC.com.



EMPLOYER SPONSORED HEALTH PLANS WITH SPIRA CARE

The Plan That Puts Care First.

Experience the difference advanced primary care can make. We're proud to offer Blue KC members health plans with exclusive access to Spira Care Centers where we bring healthcare and coverage together to put you at the center of everything. It's advanced primary care for patients of all ages that gives you easy, convenient access to the advanced primary care services you need - and the time you need with your physician and Care Team.

- Advanced Primary Care
- Behavioral Health Consultations
- Chronic Medical Condition Management
- Diabetes Education & Health Coaching
- Digital X-Rays²
- Injuries
- Immunizations
- Routine Lab Draws
- Routine Preventive Care
- Sick Care

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 copays¹: Members pay no additional cost for procedures received at any Spira Care location.

Personal Care Guides: Real, live, local experts leveraging their nursing and benefit experience to resolve care dilemmas and answer questions regarding benefits, cost and care management.

A broad and trusted network: Members have access to more than 4,100+ physicians and specialists across the BlueSelect Plus network³, which includes sixteen hospitals. This is in addition to our Spira Care Centers.

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



Spira Care Has Nine Convenient Locations Across the Kansas City Metro Area.



Meet our doctor-led Care Teams and learn more at **SpiraCare.com**

¹ There are no additional costs for any procedure provided at Spira Care Centers.

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.

ChamberCHOICE LEVEL FUNDING ASO OPTIONS

With ChamberCHOICE, employers offer six unique level funded 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 3 dental/vision plans. ChamberCHOICE Level Funding ASO plans require a minimum of 5 enrollees to participate.

MEDICAL PLANS	Deductible				Member Coinsurance		Out-of-Pocket Maximum			
	Network		Out-of-Network		Network	Out-of-Network	Network		Out-of-Network	
	Single	Family	Single	Family			Single	Family	Single	Family
CHOICE PCB PPO \$1,000 (OOPM\$6,500)	\$1,000	\$2,000	\$1,000	\$2,000	10%	30%	\$3,500	\$7,000	\$7,000	\$14,000
CHOICE PCB PPO \$2,500 (OOPM\$6,500)	\$2,500	\$5,000	\$2,500	\$5,000	20%	40%	\$5,000	\$10,000	\$10,000	\$20,000
CHOICE PCB PPO \$5,000 (OOPM\$6,500)	\$5,000	\$10,000	\$5,000	\$10,000	20%	40%	\$6,500	\$13,000	\$13,000	\$26,000
CHOICE PCB BlueSaver HSA \$3,500 (OOPM \$3,500)	\$3,500	\$7,000	\$3,500	\$7,000	0%	20%	\$3,500	\$7,000	\$7,000	\$14,000
CHOICE BlueSelect Plus ³ PPO \$4,500 (OOPM \$4,500)	\$4,500	\$9,000	\$4,500	\$9,000	0%	30%	\$4,500	\$9,000	\$9,000	\$18,000
CHOICE BSP ³ Spira Care EPO ⁴ \$3,000 (OOPM \$3,000)	\$3,000	\$6,000	N/A	N/A	0%	N/A	\$3,000	\$6,000	N/A	N/A

¹Primary Care Physicians include General Practice, Family Practice, Internal Medicine, and Pediatrics.

²Embedded - An individual deductible you must satisfy each calendar year before benefits will be paid. Aggregate - The entire family deductible must be satisfied each calendar year before benefits for any person will be paid.

³A high performing network, BlueSelect Plus, is limited to groups located in the 12-county Kansas City metropolitan area which includes Clay, Jackson, Platte, Cass, Clinton, Dekalb, Johnson, Lafayette, Ray and Caldwell in Missouri, and Johnson and Wyandotte counties in Kansas. The BlueSelect Plus products are only available to employees who live in the 12 county metro area and seek care in the 6 counties of Clay, Jackson, Platte and Clinton in MO and Wyandotte and Johnson in KS.

⁴Additional coinsurance may apply. EPO plans do not provide coverage for Out of Network services except in cases of emergency.

⁵Only primary care services received at a Spira Care Center are at no charge. All other primary care services available through the BlueSelect Plus network are subject to deductible.

⁶Applies only when using the Blue KC virtual care. All other visits to an in-network provider are the same as an in office visit.

OPTIONAL DENTAL & VISION PLANS	Vision Plans				
	Routine Exam	Frames	Std. Plastic Lenses ¹	Contact Lens Exam	Contact Lenses ²
CHOICE Base Vision & Dental	\$0	35% Off Retail	\$50/\$70/\$105	100% Member Responsibility	15% Off Retail / 100% Member Responsibility
CHOICE Value Vision & Dental	\$0	\$130 Allowance ³	\$10/\$10/\$10	Std. Lens to \$40 Allowance ⁴	\$130 Allowance ⁵
CHOICE Buy-up Vision & Dental	\$10	\$150 Allowance ³	\$25/\$25/\$25	Std. Lens to \$40 Allowance ⁴	\$150 Allowance ⁵

¹Single Vision/Bifocal/Trifocal; ²Conventional/Disposable; ³20% off balance over Allowance; ⁴Premium Lens: 10% off Retail;

⁵Conventional: 15% off balance >Allowance; Disposable: 100% member responsibility >Allowance; Medically Necessary: \$0 Copay

See Benefits Summaries for Out-of-Network benefits

Limits: Routine Exam: 1 per 12 months; Frames: 1 per 12 or 24 months (check plan details); Standard Plastic Lenses: 1 per 12 or 24 months (check plan details)

Copay / Cost-Share per Occurrence						RX Copay / Cost-Share				Deductible Type ²
Network						Network				
PCP ¹	Blue KC Virtual Care App ⁶	Spec	Urgent Care	ER	Facility / Hospital	TR1	TR2	TR3	T4	
\$25	\$10	\$25	\$25	\$100 + Ded/Coins	Ded/Coins	\$15	\$70	\$100	\$200	Emb
\$25	\$10	\$25	\$25	\$100 + Ded/Coins	Ded/Coins	\$15	\$70	\$100	\$200	Emb
\$30	\$10	\$30	\$30	\$100 + Ded/Coins	Ded/Coins	\$15	\$70	\$100	\$200	Emb
Deductible	Deductible + \$10	Deductible								Emb
\$40	\$10	\$40	\$40	\$100 + Ded/Coins	Deductible	\$15	\$70	\$100	\$200	Emb
Spira No Charge ⁵	Spira No Charge	Deductible	Deductible	Deductible	Deductible	\$15	\$50	Deductible		Emb

Dental Plans						
Calendar Year Maximum	Deductible	Diagnostic & Preventative	Basic Services	Major Services	Orthodontics	Non-Participating Providers ⁸
\$1,000 Preventative does not apply towards Calendar Year Max	\$50 Indv / \$150 Family • Basic	PPO/GRID Providers ⁶ - 100% Choice/GRID+ Providers ⁷ - 100%	PPO/GRID Providers ⁶ - 90% Choice/GRID+ Providers ⁷ - 70%	Not Covered	Not Covered	Diagnostic & Preventative - 80% Basic - 60%
\$1,000 Preventative does apply towards Calendar Year Max	\$50 Indv / \$150 Family • Basic & Major	PPO/GRID Providers ⁶ - 100% Choice/GRID+ Providers ⁷ - 100%	PPO/GRID Providers ⁶ - 80% Choice/GRID+ Providers ⁷ - 70%	PPO/GRID Providers ⁶ - 50% Choice/GRID+ Providers ⁷ - 50%	Not Covered	Diagnostic & Preventative - 80% Basic - 60% Major - 40%
\$1,500 Preventative does not apply towards Calendar Year Max	\$50 Indv / \$150 Family • Basic & Major	PPO/GRID Providers ⁶ - 100% Choice/GRID+ Providers ⁷ - 100%	PPO/GRID Providers ⁶ - 90% Choice/GRID+ Providers ⁷ - 80%	PPO/GRID Providers ⁶ - 60% Choice/GRID+ Providers ⁷ - 50%	Not Covered	Diagnostic & Preventative - 80% Basic - 60% Major - 40%

⁶Blue Dental PPO Providers: The preferred network of coverage in the Blue KC service area. Lowest out-of-pocket costs for covered services. Outside our service area, providers are available through the GRID Blue Cross and Blue Shield national network.

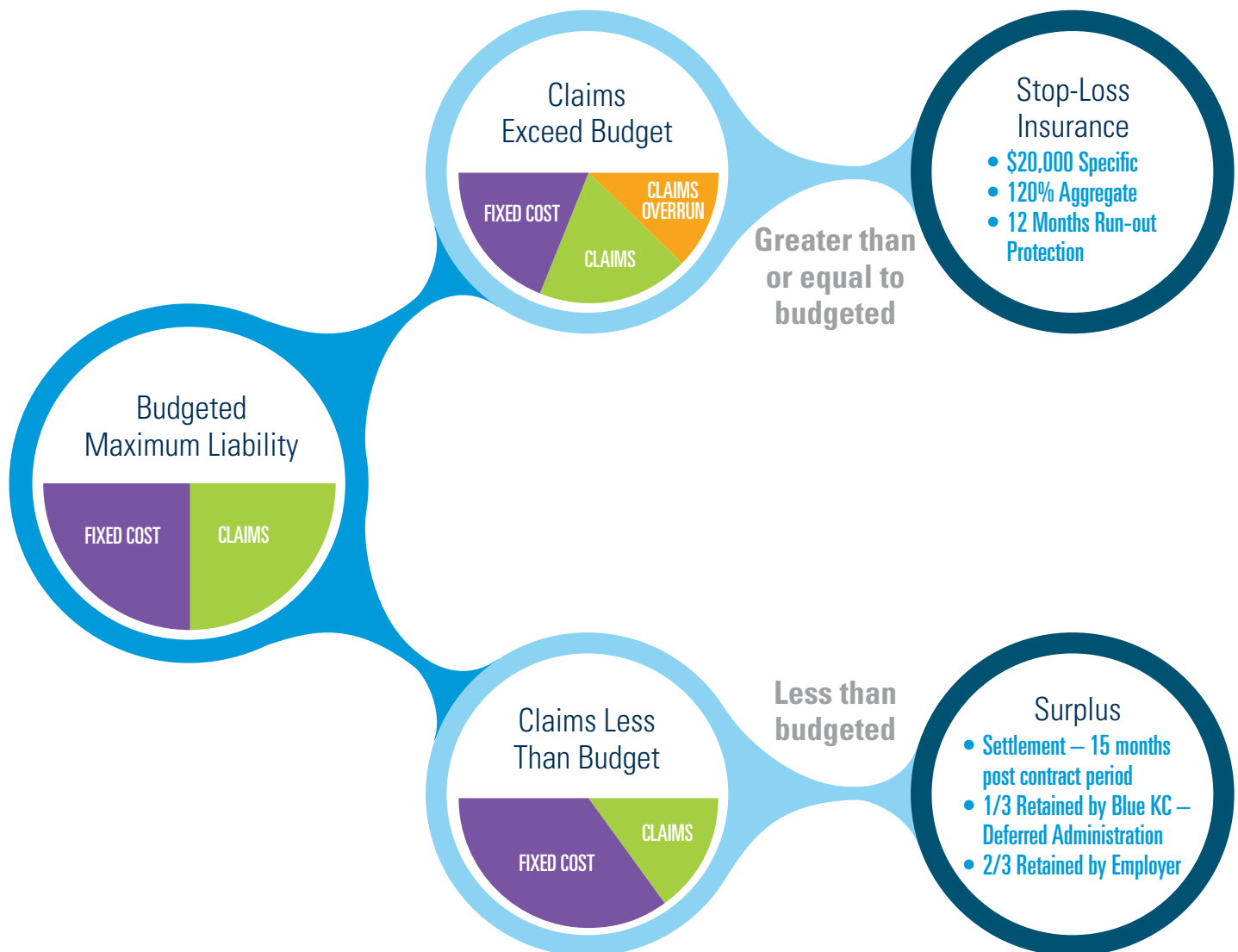
⁷Blue Dental Choice Providers: An additional network of coverage in the Blue KC service area. Higher out-of-pocket costs for covered services. Outside our service area, providers are available through the GRID+ Blue Cross and Blue Shield national network.

⁸Non-Participating Providers: Seeing a non-participating dentist results in the highest out-of-pocket costs for covered services. Members may be responsible for filing claims and may be balanced billed by the non-participating provider



UNDERSTANDING YOUR PLAN

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 applies to specified health insurance policies with policy years ending after September 30, 2012, and before October 1, 2029, and applicable self-insured health plans with plan years ending after September 30, 2012, and before October 1, 2029.



ADDITIONAL INFORMATION

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).

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

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.
- The Employee Benefits Security Administration's Guide *Understanding Your Fiduciary Responsibilities Under a Group Health Plan* available at <https://www.dol.gov/sites/default/files/ebsa/about-ebsa/our-activities/resource-center/publications/understanding-your-fiduciary-responsibilities-under-a-group-health-plan.pdf>.
- The Center for Consumer Information & Insurance Oversight, www.CMS.gov.
- Minimum Essential Coverage Reporting (section 6055) is the responsibility of the Group. More information is available at <https://www.cms.gov/ccio/index.html>.

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.



Chamber**CHOICE**

BlueKC.com/ChamberChoice

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