



BlueCross BlueShield
of Illinois

2023 New Business Training

What We Can Write & Best Ways to Write It

BCBSIL Sr. Sales Execs: Carol Metzger & Pam Rhodes

Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation,
a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

What We Can Write: Eligibility and Market Segment

- ❖ Groups are organized in various ways: Sole-Proprietor, LLC, Partnership, etc.
- ❖ Approximately 90% of what is written in Small Group are Corporations or LLCs.

STEP 1: Is the group Eligible?

- Is the group registered with the State of IL – IL Sec of State CyberDrive can search for a Corporation or LLC.
www.cyberdriveillinois.com/departments/business_services/corp.html.
- Is the group Headquartered in IL or is it an IL Branch of a company that is requesting quote?

* If you are not finding a group on the CyberDrive we need to know why, i.e. new entity, Sole Prop, DBA, etc.

STEP 2: What kind of entity is it:

- Newly Formed Business within 4 months or an Existing Business
- Is it a small husband/wife **ONLY** group (ie: no other employees)? Has to be set up as a Partnership with SS4 indicating 1065K1 filing, if not filed yet.
- All other types of groups – must have at least one other common law owner/employee (non-spouse of owner) in order to qualify the group: a full timer, part timer, 1099er regularly scheduled to work.

STEP 3: Is the case Small Group (1-50 ATNE) or Mid-Market (51-150 ATNE)

- ❖ Quoting is very different between SG and MM – we need to get that right from the start.
- ❖ ATNE determined by **Prior Calendar Year**.
- ❖ Is this case a **MM PUG (Previously Uninsured Group)**? Participation Load could be a factor.
- ❖ Are their Subsidiaries/Affiliates – required to file taxes together per IRS.

Best Ways To Write It: Things to remember

❖ Requested Effective Date

-Is the case SG for a January eff date, Open Enrollment (OE) Season? Groups wanting **Special Enrollment Period (SEP)**, with Relaxed Employer Contribution and Relaxed Employee Participation must file between 11/1-12/15.

-If a Blue Balance Funded SG or a PUG MM we need 30 days prior to Eff date.

-Is group wanting an HMO? HMO Group Health Plans no ACA 15th of the month eff date (only Mid-Market can have an HMO eff on the 15th), Employees must live within 30 miles of HMO Medical Group.

❖ Stage 2's can be done on all MM size cases and must be done prior to Enrollment.

❖ We can do non-Union carve outs, but that is the only carve out we will do. No Mgmt Carve Outs. But we can class out Employer Contribution for Mgmt and offer differences on Employer Contribution on specific plans.

❖ Situs Determination:

-Is the group head-quartered in IL?

-Is the healthcare decision maker for the Group in IL?

-Are the majority of employee in IL?

❖ 1099ers:

If an Employer decides to offer coverage to a 1099 Employee, that 1099er must be scheduled to work a minimum of 30 hours per week, and must be treated like a typical W2 employee being offered benefits. Those 1099ers will also then be counted as part of the ATNE, eligible employee count, when determining market segment size and participation.

❖ **PEOs:** Groups in a PEO can be written as long as the PEO Addendum is completed.

❖ **No paper checks necessary:** Billing is set up as a part of the account activation process and the group will be billed for the first month's premium

❖ 1 Life Groups:

We can write groups of 1 enrolling person, as long as there are at least 2 present at the group, i.e. an owner and an employee. Also, all paperwork has to check out, i.e. we are meeting participation requirements, etc.

Networks: MM & SG

Mid-Market Network Offerings Comparison

Plan Name	BluePrint PPO	Blue Choice Select PPO	Blue Choice Options	Blue Advantage HMO
Network Name	PPO (PPO)	Blue Choice PPO (BCS)	Tier 1 - Blue Choice OPT PPO (BCO) Tier 2 - PPO (PPO)	Blue Advantage HMO (ADV)
Network Type	Broad	Narrow	Tiered	Broad
Coverage	Statewide	Coverage area is Statewide except Sangamon, Lawrence and Wabash	Tier 1 - Statewide Tier 2 - Statewide	Cook, Lake, McHenry, DuPage, Kane, Grundy, Kankakee, Kendall, Will, Boone, DeKalb, Lee, Ogle, Stephenson, Winnebago, Fulton, Knox, Marshall, Peoria, Stark, Tazewell, Woodford, Cass, Christian, Logan, Macon, Mason, Menard, Morgan, Sangamon, and Schuyler counties
Must Live in Network Service Area	No	Yes	No	Yes
Medical Group Selection Required	No	No	No	Yes
Referral Required	No	No	No	Yes
OON Coverage	Yes, but member is not held harmless. The member can be billed up to the billed amount.	Yes, but member is not held harmless. The member can be billed up to the billed amount.	Yes, but member is not held harmless. The member can be billed up to the billed amount.	No with the exception of emergency or accident
BlueCard®/Away From Home Care® (AFHC)	Yes	Yes	Yes - Paid at Tier 1	Available for when members need emergency or urgent care services while outside their service areas, the BlueCard program will help them locate participating doctors and hospitals, allowing them to receive covered care.

Small Group Network Offerings Comparison

Plan Name	Participating Provider Organization	Blue Choice Preferred PPO	Blue Options	Blue Precision HMO
Network/Network Name	PPO	Blue Choice Preferred PPO (Network Code: BCE)	Tier 1 - Blue Options (Network Code: BCO) Tier 2 - PPO	Blue Precision HMO (Network Code: BAV)
Availability	1-50	1-50	1-50	1-50
Coverage	Statewide	Statewide	Tier 1 - Statewide Tier 2 - Statewide	Chicago, Peoria and partial Rockford rating areas
Medical Group Selection Required	No	No	No	Yes
Referral Required	No	No	No	Yes
OON Coverage	Yes	Yes	Yes	No
BlueCard®	Yes	Yes	Yes	Available for when members need emergency or urgent care services while outside their service areas, the BlueCard program will help them locate participating doctors and hospitals, allowing them to receive covered care.

Covering Exposures: Always in the Best Interest of the Client

No apologies

Not used car
salesman

Cover Exposures

Medical, Dental,
Vision, Life, STD
for Maternity leave.
Know the census.

Voluntary Benefits

Best way to
increase Employee
Portfolio

Inflation driving
people to look at
group coverage.



BlueCross BlueShield
of Illinois

Winning the Business

How to get the customer to say “Yes”

Senior Sales Executive
Carol Metzger.

New Business- Stage 1 and 2: We Want the Last Look!

Stage 1: 2-3 Business days turnaround

- Member- Level Census
- Group name, address with zip-code, SIC Code, ATNE

 BlueCross BlueShield of Illinois		
Quote ID: 1234567	Demo Group	Printed: 02/01/2023
No. of Employees: 93	Effective Date: 04/01/2023	Zip Code: 60191
County: DuPage	Proposal# Quote1	SIC: 4731
Quote Type: Solicitation	Producer: DIGITAL INSURANCE LLC	Proposal Expires: 04/30/2023
Middle Market Quote (Non-Underwritten)		

Stage 2: 3-5 Business days turnaround - may vary due to volume

- Initial Proposal (stage 1)
- “Gate Keeper” Form
- Most recent renewal
- SBC of current plans
- If over 100 lives enrolled, and/or ASO or Level Funded;
 - 12-24 months of claims and premium experience
 - 12-24 months Large claimants report

 BlueCross BlueShield of Illinois		
Quote ID: 1234567	Demo Group	Printed: 02/01/2023
No. of Employees: 89	Effective Date: 04/01/2023	Zip Code: 60563
County: DuPage	Proposal# Quote2	SIC: 3452
Quote Type: Underwritten	Producer: DIGITAL INSURANCE LLC	Proposal Expires: 04/30/2023
Middle Market Quote (Underwritten)		

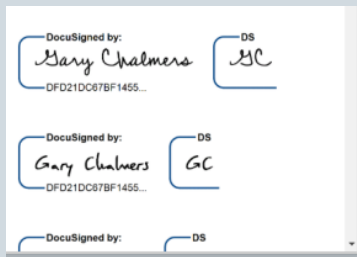
**Stage 2s can be processed for all Mid-Market (MM) cases, including those under 10 lives enrolling.*

New Business- Stage 3

Stage 3: 10-12 Business Days Turn Around

Required Paperwork;

- Benefit Plan Selection (BPS)
- Benefit Program Application (BPA)
- Employer Group Information (EGI)
- Prior Carrier Invoice – only if COBRA participants are enrolling
- Collective Bargaining Agreement- for Union members for overall ATNE
- Enrollment Census- Member Level



**BPS, BPA, and EGI all require either a docu-signed stamped signature, or a scanned “wet” signature.*

The collage displays three forms from BlueCross BlueShield of Illinois. The top form is the 'BENEFIT PLAN SELECTION (BPS)' (To Be Used for Mid-Market Group Accounts), which includes sections for account information, health products selection, and renewing groups. The middle form is the 'Employer Group Information (Mid-Market)', which includes sections for employer information, Medicare secondary payer acknowledgment, and a list of employees. The bottom form is the 'BENEFIT PROGRAM APPLICATION (BPA)', which includes sections for employer information, health plan selection, and a list of employees.

New Business- Stage 3 Timeline

Official submission will occur once final (no additional information/clarification needed) employer documents & enrollment census are received.

- Once the group has been entered into our system, the group will move to the Underwriting department.
- Please allow 5-7 business days for Underwriting to fully review the case. Once they have done their final review, they will a final rate offer letter.
- The final rate offer will be reviewed and sent to your attention.
- Once the letter is signed and returned, Underwriting will finalize the case and our team can begin activation of membership.
- Please allow 24 hours for members to become activated in our system

TIPS

Make sure all forms are complete for both Stage 2s & Enrollments

Advise if there are any ancillary products as Stage 2s need to reflect the Bundling Discounts, before Enrollment.

Advise your rep to “Approve” the Stage 2 the Enrollment submission must launch off the Stage 2, to capture the correct rates and discounts.

MID-MARKET MICROSITE

Everything you need, just a click away!!

https://www.bcbsilcommunications.com/small_group/renewal/mid-market-renewal.html



Blue Cross Blue Shield of Illinois



Blue Cross BlueShield of Illinois

Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation, 300 E Randolph, Chicago, IL 60601
 Dearborn Life Insurance Company, 701 E. 22nd St. Suite 300, Lombard, IL 60148

BENEFIT PROGRAM APPLICATION ("BPA")
Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation,
a Mutual Legal Reserve Company (herein called "BCBSIL")

(All items are applicable to 51-150 Grandfathered and Non-Grandfathered Insured Group Accounts unless otherwise specified.)
 (All items are applicable to the HMO plan and the non-HMO plan unless otherwise specified.)

Employer Group No (s): _____ Account No. (Blue Star®): _____	Section No (s): _____ y subsidiary or affiliated companies to be covered below.) State: _____ Zip Code: _____ State: _____ Zip Code: _____ Standard Industry Code (SIC): _____ is needed, use the Additional Provisions section: ted, use the Additional Provisions section: regated per IRS guidelines. Employer hereby confirms that employer under Internal Revenue Code Section 414(b), or Email: _____ Fax: _____ he Employer to access and maintain its account via BAE) Email: _____ Fax: _____ ticity Anniversary Date (month/day/year): ____/____/____ (ERISA) is a federal law that sets minimum standards for ll employer groups, insured or ASO, are subject to ERISA policies and public school districts, and "church plans" as (Date: ____/____/____ End Date: ____/____/____
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as an attachment to this Blue Cross and Blue Shield of Illinois Application, which requires
 a further provision of Blue Cross and Blue Shield of Illinois.

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 an ERISA, ERISA or ERISA. It is not a contract. It is not a contract. It is not a contract. It is not a contract.
 Cross and Blue Shield Plans.

Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue
 Cross Association.

Care Service Corporation, a Mutual Legal Reserve Company,
 Cross and Blue Shield Association.

2022 Mid-Market Group Plans

Blue Cross and Blue Shield of Illinois (BCBSIL) offers health care plans with the choice, flexibility and affordable options that growing companies want.

Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association



**BlueCross BlueShield
of Illinois**

BENEFIT PLAN SELECTION (BPS)
(To Be Used for Mid-Market Group Accounts)

Please complete & return this form in its entirety, including the required signatures

Section 1 - Account Information:

Employer Name:	Effective Date:	Anniversary Date:
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Health Products / Mid-Market Medical and/or Dental Plan Selection:

Section 2 - Renewing Groups Only: (*If New Business, skip to Section 3)

Please list current plan(s) below

1.	Renewing Plan(s)	Replacing Plan(s)
1.	☐ Yes ☐ No	1.
2.	☐ Yes ☐ No	2.
3.	☐ Yes ☐ No	3.
4.	☐ Yes ☐ No	4.
5.	☐ Yes ☐ No	5.
6.	☐ Yes ☐ No	6.
7.	☐ Yes ☐ No	7.
8.	☐ Yes ☐ No	8.

Section 2b - Renewing Groups Only: (*If New Business, skip to Section 3)

Adding Plan (Medical and/or Dental):

Please list new plan(s) below

1.
2.
3.
4.
5.
6.
7.

Section 3 - New Business: (*If Renewing Group, skip to Section 4)

Please list new plan(s) below

1.
2.
3.
4.
5.
6.
7.

Section 4 - New Business: (*If Renewing Group, skip to Section 5)

Please list new plan(s) below

1.
2.
3.
4.
5.
6.
7.

Section 5 - New Business: (*If Renewing Group, skip to Section 6)

Please list new plan(s) below

1.
2.
3.
4.
5.
6.
7.

Section 6 - New Business: (*If Renewing Group, skip to Section 7)

Please list new plan(s) below

1.
2.
3.
4.
5.
6.
7.

Section 7 - New Business: (*If Renewing Group, skip to Section 8)

Please list new plan(s) below

1.
2.
3.
4.
5.
6.
7.

Section 8 - New Business: (*If Renewing Group, skip to Section 9)

Please list new plan(s) below

1.
2.
3.
4.
5.
6.
7.

Section 9 - New Business: (*If Renewing Group, skip to Section 10)

Please list new plan(s) below

1.
2.
3.
4.
5.
6.
7.

Section 10 - New Business: (*If Renewing Group, skip to Section 11)

Please list new plan(s) below

1.
2.
3.
4.
5.
6.
7.

Section 11 - New Business: (*If Renewing Group, skip to Section 12)

Please list new plan(s) below

1.
2.
3.
4.
5.
6.
7.

Section 12 - New Business: (*If Renewing Group, skip to Section 13)

Please list new plan(s) below

1.
2.
3.
4.
5.
6.
7.

Section 13 - New Business: (*If Renewing Group, skip to Section 14)

Please list new plan(s) below

1.
2.
3.
4.
5.
6.
7.

Section 14 - New Business: (*If Renewing Group, skip to Section 15)

Please list new plan(s) below

1.
2.
3.
4.
5.
6.
7.

Section 15 - New Business: (*If Renewing Group, skip to Section 16)

Please list new plan(s) below

1.
2.
3.
4.
5.
6.
7.

Section 16 - New Business: (*If Renewing Group, skip to Section 17)

Please list new plan(s) below

1.
2.
3.
4.
5.
6.
7.

Section 17 - New Business: (*If Renewing Group, skip to Section 18)

Please list new plan(s) below

1.
2.
3.
4.
5.
6.
7.

Section 18 - New Business: (*If Renewing Group, skip to Section 19)

Please list new plan(s) below

1.
2.
3.
4.
5.
6.
7.

Section 19 - New Business: (*If Renewing Group, skip to Section 20)

Please list new plan(s) below

1.
2.
3.
4.
5.
6.
7.

Section 20 - New Business: (*If Renewing Group, skip to Section 21)

Please list new plan(s) below

1.
2.
3.
4.
5.
6.
7.

Section 21 - New Business: (*If Renewing Group, skip to Section 22)

Please list new plan(s) below

||
||
||

 **Blue Cross BlueShield of Illinois**

Take Charge of Your Health

Get information about the cost of procedures, find a doctor or request an ID card. You can do it all—simply and securely—on Blue Access for Members™ (BAA®).

With BAA you can:

- Find in-network doctors and hospitals.
- View your digital member ID, or order new or replacement IDs.
- Renew your benefits and dependent coverage.

Members ages 18 and older can log on to blueaccess.com.

Scan this QR code to visit blueaccess.com.

Let's get started

1. Go to blueaccess.com
2. Under Member Log In, use your member ID card to complete your register visit.

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a Mutual Indemnity Company, an Equal Opportunity Lender of the Blue Cross and Blue Shield Association

10/2020/000000

Summary of Benefits and Coverage (SBC) Tool Steps

No Login Requirements!

Login information is not required to access the **Summary of Benefits and Coverage (SBC) tool**. Use the link provided to the right or continue to use **Blue Access for EmployersSM** or **Blue Access for ProducersSM**.



The site contains helpful links and documents, such as a paperwork due date grid, plan portfolios, links / instructions for SBC Tools, Key Contact Lists, forms, and fliers.



**Blue Cross Blue Shield
of Illinois**

BENEFIT PLAN SELECTION (BPS) - ACA SMALL GROUP

Please complete & return this form in its entirety, including the required signatures

A. Employee Name: _____	B. SIC Code _____
C. Effective Date: _____	E. Anniversary Date: _____

Section 1: Account Information:

A. Account # _____

- ☐ Only Unreimbursed costs are billed out for each plan.
- ☐ A group may select only to bill health plan members.
- ☐ A group may select one tiered plan or two dental plans if (1) or more are enrolled.
- ☐ For additional information on the Billing method of Benefits and Coverage (BSC) and Product Plan Data.

Billing Method Selection:

Please select one of the following billing methods:

(For Existing Accounts: If no selection is made, your plans will default to their current billing method.)

- ☐ Comprehensive Billing
- ☐ Age Billed

Section 2a: Renewing Groups Only: (New Business updates to Section 3)

Current Plan	Renewing Plan
1. _____ Please list current group name	☐ Yes ☐ No
2. _____	☐ Yes ☐ No
3. _____	☐ Yes ☐ No
4. _____	☐ Yes ☐ No
5. _____	☐ Yes ☐ No
6. _____	☐ Yes ☐ No
7. _____	☐ Yes ☐ No

Renewing Plan:
Please list replacement plan to replace below

Section 2b: Renewing Groups Only: (New Business updates to Section 3)

Adding New Medical and/or Dental Plans: (New plans below)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____

[illegible]

A map of Illinois showing its 102 counties. Ten counties are highlighted in a light blue color, indicating they have the highest percentage of the population aged 65 and older. These counties are: Cook, DuPage, Kane, Kendall, Lake, Madison, McHenry, Peoria, Rock Island, and St. Clair. The remaining 92 counties are colored in a darker blue.

Due Dates for:	Plan Change at Renewal		Anniversary Date Change		Off-Cycle Plan Change	
Renewal/Effective Date	1 st of Month	15 th of Month	1 st of Month	15 th of Month	1 st of Month	15 th of Month
January	12/1/22	12/15/22	12/1/22	12/15/22	11/1/22	11/15/22
February	1/3/23	1/17/23	1/3/23	1/17/23	12/1/22	12/15/22
March	2/1/23	2/15/23	2/1/23	2/15/23	1/3/23	1/17/23
April	3/1/23	3/15/23	3/1/23	3/15/23	2/1/23	2/15/23
May	3/31/23	4/14/23	3/31/23	4/14/23	3/1/23	3/15/23
June	5/1/23	5/15/23	5/1/23	5/15/23	3/31/23	4/14/23
July	6/1/23	6/15/23	6/1/23	6/15/23	5/1/23	5/15/23
August	7/3/23	7/17/23	7/3/23	7/17/23	6/1/23	6/15/23
September	8/1/23	8/15/23	8/1/23	8/15/23	7/3/23	7/17/23
October	9/1/23	9/15/23	9/1/23	9/15/23	8/1/23	8/15/23
November	10/2/23	10/16/23	10/2/23	10/16/23	9/1/23	9/15/23
December	11/1/23	11/15/23	11/1/23	11/15/23	10/2/23	10/16/23

Starting January 1, 2023, some changes will be made to the prescription drug benefit.

11

The Value of Blue



WHY EMPLOYERS CONSISTENTLY CHOOSE BLUE



MEMBERSHIP

Personalized health care
nationwide

Nationwide: **114+M**

Our Membership: **17.7M**



STAYING BLUE

Unrivalled retention rates
over the last 5 years

ENA: **99.3%**

IL: **97.5%**

IL Rx in 2022: **94.3%**



MARKET SHARE

Nationally:



Our 5 States:



Illinois:



2.8M MEMBER GROWTH since 2017

CONTINUAL GROWTH

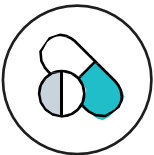
Growing at a faster pace than any time in the
90-year history employers have been choosing Blue

Medical
2.0M
MEMBER
S



NEW SALES

Feb '20-Dec '22



RX-ASO
743K
MEMBER
S

2022 AWARDS

WORLD'S **MOST ETHICAL** COMPANY
By Ethisphere – 7th consecutive year



Blue Cross and Blue Shield of Illinois has been
named by J.D. Power as “#1 in Member Satisfaction
with Commercial Health Plans in Illinois/Indiana.”



**BlueCross BlueShield
of Illinois**

ACA Small Group & Mid-Market BCBSIL Value Adds

Carol J Metzger, Senior Sales Executive



Accessing Enhanced Benefits

Value Add	Eligible Participants	Engagement	Cost to Member	Format	Plans
Hinge Health 07/01/2022	Non-HMO Members ACA/ Mid Market	BCBSIL Outreach	None	Virtual	Current Portfolio Plans
Livongo 07/01/2022	Non-HMO Members ACA/Mid Market	Claims Trigger	None	Virtual	Current Portfolio Plans
Wondr Health 07/01/2022	PPO & HMO Members ACA/Mid Market	BCBSIL Outreach	None	Virtual	Current Portfolio Plans
Learn to Live: Digital Mental Health 01/01/2022	Non-HMO Members ACA /Mid Market	Member Driven	None	Digital	Current Portfolio Plans
Member Rewards 07/01/2023	Non-HMO Members ACA/ Mid Market Mid-Market and 151+ eligible for Member Rewards at No Cost when paired with a Blue Print Standard Plan for Fully Insured and ASO	Member Driven	None	Digital	Current Plans on 07/01/2023 BSBSIL Mid-Market Product Portfolio for New Business or upon Renewal for existing clients.
EAP - ComPsych 07/01/2023	PPO & HMO Members - (Mid-Market Only) 5 sessions per occurrence for behavioral health. Note: HMO members must go through their Primary Care Physician for additional visits if related to the same behavioral health issue.	Member Driven	None	Virtual	Current Plans on 07/01/2023 BSBSIL Mid-Market Product Portfolio for New Business or upon Renewal for existing clients.

ENHANCED BENEFITS

At no added cost to
our Members!

Coaching members with needs related to:

- Joint and Back Pain
- Diabetes and Hypertension
- Stress and Weight Gain
- Mental Health





HINGE HEALTH

At-home, coach-led
program for members with
chronic back and joint pain

For Standard Plans 2-150 (Non-HMO)

Hinge Health is an independent company that has contracted with Blue Cross and Blue Shield of Illinois (BCBSIL) to provide an online musculoskeletal program for members with coverage through BCBSIL. BCBSIL makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.

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Hinge Health A Digital Coach-Led Musculoskeletal Solution

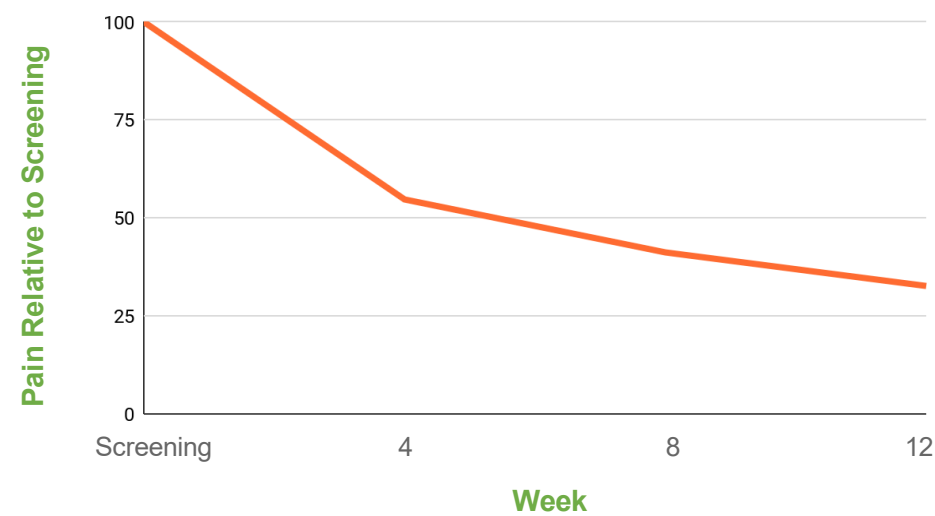
Based on proven non-surgical care guidelines, Hinge Health provides unlimited annual access to exercise therapy, a dedicated physical therapist and health coach, and education in all 5 Digital Care Pathways: back, hip, knee, neck and shoulder.

The out-of-the-box solution includes:

- **Exercise Therapy:** Tablet and wearable sensor technology provides real-time feedback and tracks adherence
- **Behavioral Support:** Unlimited 1-on-1 coaching with dedicated board-certified coach and access to a dedicated physical therapist
- **Personalized Education:** Empowers participant to navigate the appropriate care for their condition



Exercise therapy sessions completed	2-3/wk
Surgeries avoided	2 out of 3
Depression and anxiety reduction	58%
Average pain reduction	69% ¹



Hinge Health Member - Reported Outcomes

¹Pain reduction outcomes are member-reported.
Source: Bailey, J., et al. (2020) Digital Care for Chronic Musculoskeletal Pain: 10,000 Participant Longitudinal Cohort Study. Published in the Journal of Medical Internet Research, 5,doi:10.2196/18250. Results are based on a Hinge Health study and do not reflect the analysis of BCBSIL. Study authors include Hinge Health employees. Data based on Hinge Health results. These results may not be typical for every participant.



**BlueCross BlueShield
of Illinois**

LIVONGO[®]

Expanded Coaching Services for Diabetes and HBP

For Standard Plans 2-150 (Non-HMO)

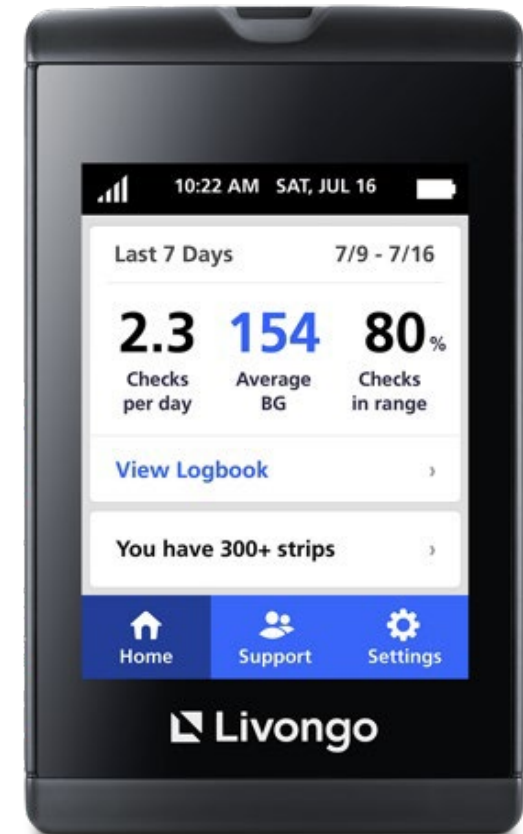
Livongo is an independent company that provides chronic condition management for Blue Cross and Blue Shield of Illinois. Livongo is solely responsible for the products and services that it provides. BCBSIL makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.
A Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

LIVONGO Diabetes Management Solution

Product Overview:

The program combines a connected glucose meter and personal support for supplemental in-home therapy. Members receive:

- Real-time personalized messaging on the Livongo connected blood glucose meter
- Certified diabetes educators available 24/7/365
- Instant interventions when blood glucose readings are out of range
- Optional notifications for high and low readings to give loved ones and providers insight
- Test strips and lancets at no extra cost, delivered right to the member's door
- Member-initiated reports (with blood glucose readings and trends) enable more focused conversations with a clinician



LIVONGO Hypertension Management Solution

Program Overview

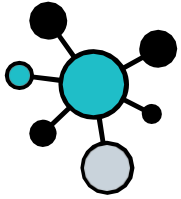


The program combines a connected blood pressure cuff and personal support for supplemental in-home therapy.

Members receive:

- Easy remote monitoring via wireless-connected blood pressure cuff
- Licensed professionals provide live coaching and 24/7 digital alerts
- Notifications for high blood pressure readings and reminders to check blood pressure
- Intuitive mobile experience to track progress and receive personalized, clinically-grounded coaching and educational content
- Member-initiated reports (with blood pressure readings and trends) enable more focused conversations with a clinician

LIVONGO Leading the Way in Applied Health Signals



Data Science

Livongo's team of data scientists, behavioral specialists and clinicians interprets health data and information to create actionable, personalized and timely health signals, insights and support when needed most.



Behavioral Enablement

Livongo aggregates multiple data sets (including from Livongo devices, apps and coaches), as well as from partners, and combines them to interpret and extract the drivers of behavior change.



Clinical Impact and Cost Savings

Livongo demonstrates reduced HbA1c 0.8 points sustained over three years while reducing hypoglycemia 15%, improved blood pressure -9mmHg, and reduced weight by 6.5%.



The Only Company Delivering Results at Scale

Livongo has a 95% retention rate with 700+ clients ranging from small to large employers, representing 25% of Fortune 500 and 20+ industries.



Wondr™

(Formerly Naturally Slim)

Behavioral counseling program for metabolic syndrome reversal and weight management



**BlueCross BlueShield
of Illinois**

Wondr Health™ is an independent company that provides Metabolic Syndrome Management for Blue Cross and Blue Shield of Illinois. Wondr Health is solely responsible for the products and services that it provides. BCBSIL makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.

Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association



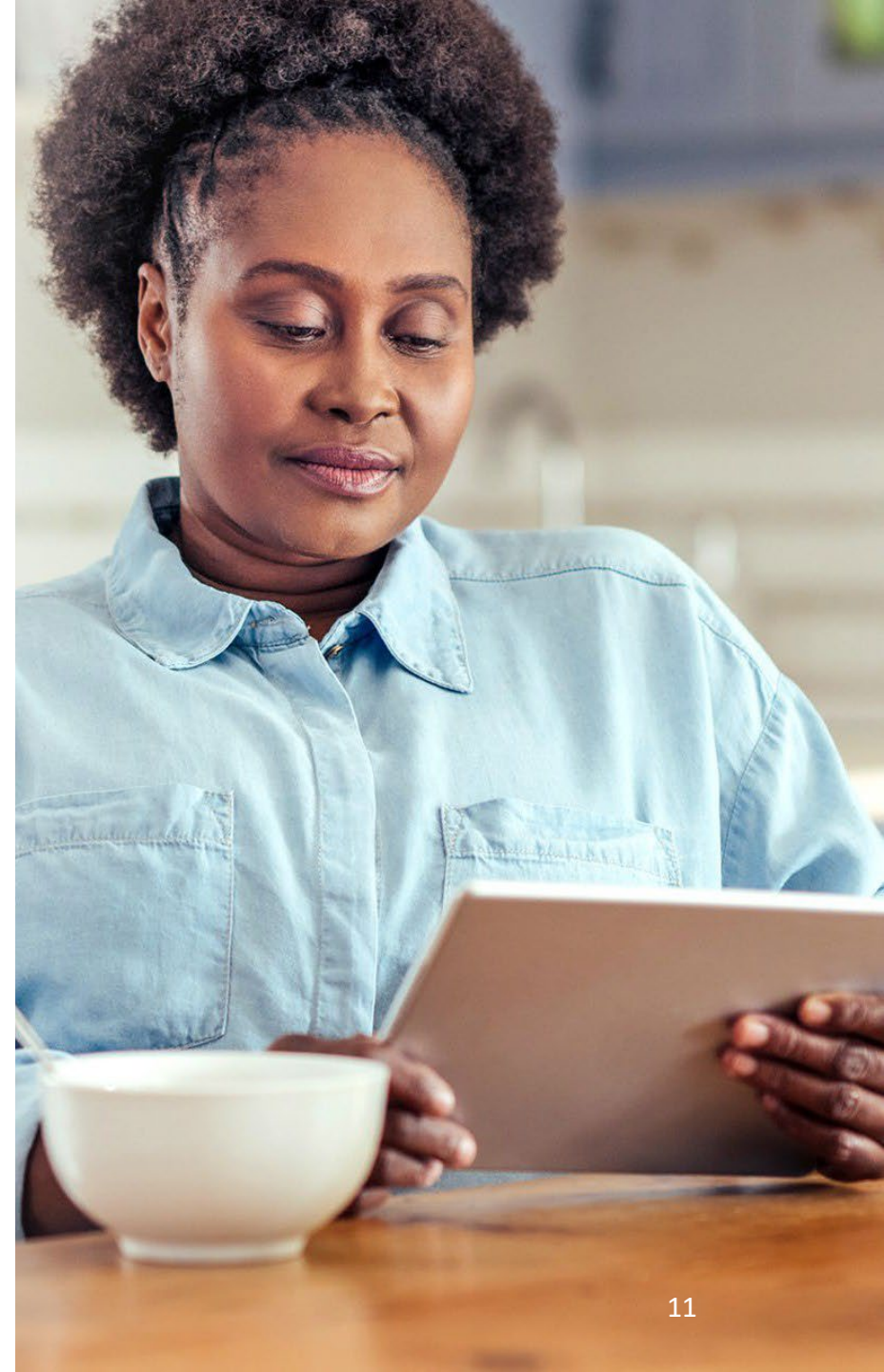
Metabolic Syndrome Reversal Program

There are no points, plans, nor counting calories. Wondr teaches members the science behind their eating habits allowing them to continue to enjoy their favorite foods, lose weight, sleep better, stress less and so much more. Members will learn simple, behavioral skills that are clinically proven to improve health.

Features include:

- 12 weeks of counseling (personalized for skill building)
12 weeks (customized for skill reinforcement)
28 weeks (customized for skill maintenance)
- Weekly, self-paced, informative, online video sessions (including mobile app for on-the-go access, skill reinforcement and habit formation)
- Interactions with health coaches and online community for social support

*National Institutes of Health guidelines define metabolic syndrome as having at least three of the following five traits (or taking medication to control them): large waist circumference; high triglyceride level; reduced HDL (good) cholesterol; increased blood pressure; elevated fasting blood sugar.
Wondr Health is an independent company that provides Metabolic Syndrome Management for Blue Cross and Blue Shield of Illinois. Wondr Health is solely responsible for the products and services that it provides.



What Members Get With Wondr

1

WondrSkills™

Simple, repeatable skills through weekly master classes.

2

WondrUp™

Reinforce and practice WonderSkills through weekly personalized curriculum.

3

WondrLast™

Build momentum toward healthiest self in the maintenance phase of the program.



A 100% digital, on-the-go experience and Wondr app



Clinically proven skills for lasting results



Welcome kit complete with tools and encouragement



Expert team of instructors via the digital platform



Weekly master classes that are tailored to member



Personalized support and reminders through daily texts and nudges



The WondrLink™ online community for social support



The Wondr Blog for other relevant resources



BlueCross BlueShield
of Illinois

LEARN TO LIVE: Digital Mental Health

For Standard Plans 2-150 (Non-HMO)



Learn To Live: Digital Mental Health



Targeted, online programs and services based on proven cognitive behavioral therapy principles



Private, convenient entry point for mental health concerns

- Depression, Stress, Anxiety & Worry, Social Anxiety, Insomnia, Substance Use



No cost to employee



https://ltlcontent.s3.amazonaws.com/videos/LEARNTOLIVE_LearnToNavigate.mp4



CLINICAL OUTCOMES



Reduction in psychometric scores:

Social Anxiety:

22% LOWER

Depression:

30% LOWER

Anxiety:

29% LOWER

Insomnia:

31% LOWER

Vendor data, 2018. Results vary by group and are not guaranteed.

Learn To Live, Inc. is an independent company that has contracted with Blue Cross and Blue Shield of Illinois to provide cognitive behavioral therapy coaching for members with coverage through BCBSIL. BCBSIL makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.



Blue Access for Members (BAM) Wellness Services:

- Wellness Guidelines – Preventative Care tips
- Articles – A variety of health topics
- Connect with a Cancer Specialist – Support/Info
- Women's and Family Health – Maternity specialists
- Fitness Program/Fitness Works – Staying active tips

Well onTarget®

learntolive

wondr™

Blue365

Hinge Health

LIVONGO®



BlueCross BlueShield
of Illinois



What's New??

A Whole LOT!!

Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation,
a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

Introducing a New Bonus for You, Our Partner in Health



Earn a Partner in Health Bonus

- Clients who choose BCBSIL stay with us – 97% membership retention of Illinois members in 2022*
- Serving over 7.4 million Illinois members
- Peace of mind that comes from having a BCBS ID Card in their wallet

How it Works

- New, fully insured and Blue Balance FundedSM group business to accounts who may lose coverage **due to their current carrier’s exit from the health insurance market.**
- Applies to **new business** with effective dates from **April 1, 2023, to January 1, 2024**

Bonus Schedule

Tier	Total Contracts Sold	Bonus Paid Per Contract
1	1-150	\$60
2	151-300	\$65
3	301+	\$70
Calculation of bonus amount is based on final cumulative total of eligible contracts.		



BlueCross BlueShield
of Illinois



MEMBER REWARDS

Guiding Members to Cost-Effective, Quality Options

Expanding to Standard PPO Plans: 2-150

Automatically added to plans
as of the account's renewal date



Small Groups

Effective with renewal/start dates
on/after January 1, 2023



Mid-Market Groups

Effective with renewal/start dates
on/after July 1, 2023



Member Rewards

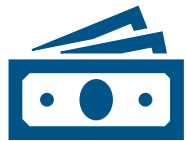
What is Member Rewards?



Member Rewards is a voluntary program



Members have the final choice in where they receive their health care.



Members who shop for services are offered **a cash reward** to use cost-effective locations for their eligible service.



Member Rewards transforms members into smarter, active health care consumers!

Member Rewards **WILL NOT** apply to these SG, MM networks/segments:

- Members with HMO plans
- Blue Balance Funded plans
- Grandfathered and Transitional Plans
- Closed Renewal Options (CRO's Mid-Market)
- Retail members
- Government programs

**Rewards earned may be taxable; refer to Tax Information slide.*

END-TO-END CONSUMER ENGAGEMENT



Awareness

This is transparency – clear price information for facilities and providers



Activation

This is shopping – understanding choices through categorized, ordered options



Conversion & Redirection

This is Member Rewards – consumers selecting more cost-efficient care with value-aligned incentives

Top Procedures Summary

November 2020 – January 2022



Top Shopping Procedures

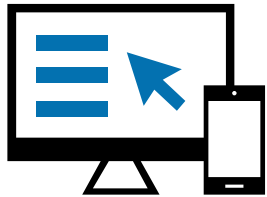
MRI	110,590
CT Scan	48,556
Colonoscopy	37,646
Mammogram	37,228
Lab/Blood Work	34,041
Ultrasound	15,471
Bariatric Surgery	12,169
Upper GI	5,034
Cataract Removal	3,676
Bone Density	3,344

Top Net Incentive Claims Savings Summary

MRI	\$3,682,439
Colonoscopy	\$2,627,152
CT Scan	\$1,539,857
Knee Replacement	\$842,347
Bariatric Surgery	\$726,650
Cataract Removal	\$631,834
Hip Replacement	\$542,856
Upper GI	\$437,618
Shoulder Surgery	\$310,321
Gall Bladder Surgery	\$286,789

3 SIMPLE STEPS TO EARN REWARDS

Search+Select+Schedule



Search online via
Provider Finder® to find a
reward-eligible location for
your procedure or service



Get the procedure or
service at your chosen
reward-eligible location



Receive a cash reward by
check, which will be mailed
directly to your home, after your
claim is paid and the location
is verified as reward-eligible

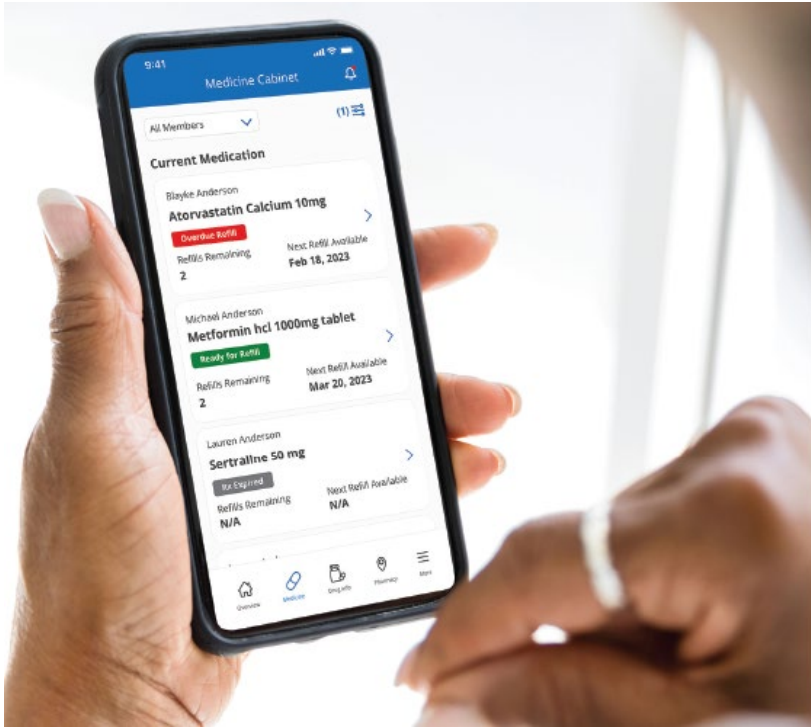


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The Cost of Your Health Care Depends on
WHERE YOU PARK YOUR CAR



- Compare drug costs at different pharmacies
- Find available lower-cost drug options
- Manage prescription drug care for your family*
- Access information about your prescription drugs, including medication details, claims history, coverage, pre-approvals and refills
- Get reminders when it's time to refill your prescription
- Search for and contact in-network pharmacies

MyBlueRx -Your Virtual Medicine Cabinet Is Here

Save On Prescriptions With Just A few Clicks

- MyBlueRxIL is a personalized pharmacy app
- Making it easy to understand and manage prescription drugs and out-of-pocket costs

Scan a QR code to download the free app.

Use your Blue Access for MembersSM login, or create a new account to get started.



MyBlueRxIL (iOS)



MyBlueRxIL (Android)



2023: Newly Added Mid-Market Plans

Two Blue Choice Options HSA plans include higher deductibles:

- **MICOE3013**-Blue Choice Options 3013-HSA
(\$6,000/ \$7,000 Ded / \$7,000 /\$7,500 OPX/ 80%/ 60% coins)
- **MICOE3023**-Blue Choice Options 3023 – HSA
(4,000 / \$5,700/ \$4,000 / \$7,500 OPX/ 100%/ 80% coins)

Two BlueEdge HSA aggregate plans individual deductible will increase from \$1,500 to \$1,600:

- MIEEA2000-BlueEdge HSA 2000 to **MIEEA3003**-BlueEdge HSA 3003
- MIEEA2010-BlueEdge HSA 2010 to **MIEEA3013**-BlueEdge HSA 3013

****New plans include the preventative drug list program.**

HSA Preventative Drug Program



All HSA compatible HDHPs include the HSA Preventive Drug program.

Program includes categories of prescription drugs that are often used for preventive purposes.

Waives the need to meet the deductible first for the listed preventive drugs.

2023 Mid-Market Plan Changes

7/1/22 Plan ID	7/1/23 Plan ID
MIEEA2030	MIEEA3033
MIEEA2070	MIEEA3093
MIEEE2043	MIEEE3043
MIEEE2063	MIEEE3063
MIEEE1051	MIEEE3053
MIESA2110	MIESA3113
MIESE1151	MIESE3153
MIESE2181	MIESE3183
MICOE1071	MICOE3073
MICOE2063	MICOE3063

BEHAVIORAL HEALTH

Spotlight on Behavioral Health

- Behavioral health has emerged as one of the most prominent health care concerns throughout the country.
- Employers are seeking a full spectrum of options
- Timely access to quality care for mental health issues.



Expanding Access to Behavioral Health - Virtual Visits Powered by MDLive

Behavioral Health

- Depression and anxiety
- Marital problems
- Child behavior and learning issues
- Financial hardship
- Coping with loss and grief
- Stresses and challenges of everyday life

Pediatric Care

- Cold and flu
- Earache
- Nausea



Non-Emergency Medical Conditions

- Allergies
- Cold and flu
- Diarrhea
- Earache
- Fever
- Headache
- Insect bites
- Nausea
- Pinkeye
- Sore throat

Virtual Visits

Care When and Where You Need It

Convenient, secure access to board-certified doctors for non-emergency medical and behavioral health needs

24/7/365 VIRTUAL CARE

Enhanced Customer Experience

- **Access** via mobile app, online video or telephone*
- **Integrated** contracting, billing and reporting
- **Seamless access for members** from Blue Access for MembersSM, Benefits Value Advisor, Health Advocacy Solutions, 24/7 Nurseline, Transparency Tools and the BCBSIL Mobile App
- **Text registration and triage with MDLIVE's chatbot – Sophie**
- **BCBSIL Branded** communication materials and web portal
- **Behavioral Health** included for fully insured groups; optional for ASO



A virtual visit is, on average:

- **\$75 LESS THAN** an in-person PCP visit
- **\$156 LESS THAN** an urgent care visit
- **\$1,048 LESS THAN** an emergency room visit

*Service availability and communication mode dependent upon member's location at time of service.

MDLIVE, an independent company, operates and administers the virtual visit program and is solely responsible for its operations and that of its contracted providers. "Sophie" and the online virtual assistant are owned and operated by MDLIVE.

COMPREHENSIVE BEHAVIORAL AND MENTAL HEALTH SUPPORT FOR YOUR MEMBERS

Core Behavioral Health Product Features

-  Inpatient Management
-  Outpatient Management
-  Case Management
-  Specialty Management
-  Call Center Support
-  Digital Mental Health



Employee Assistance Program (EAP) Product Features

-  Counseling Sessions
-  Legal Services
-  Financial Guidance
-  Family & Caregiver Support

Access to **five** counseling sessions per issue at **no cost** to members



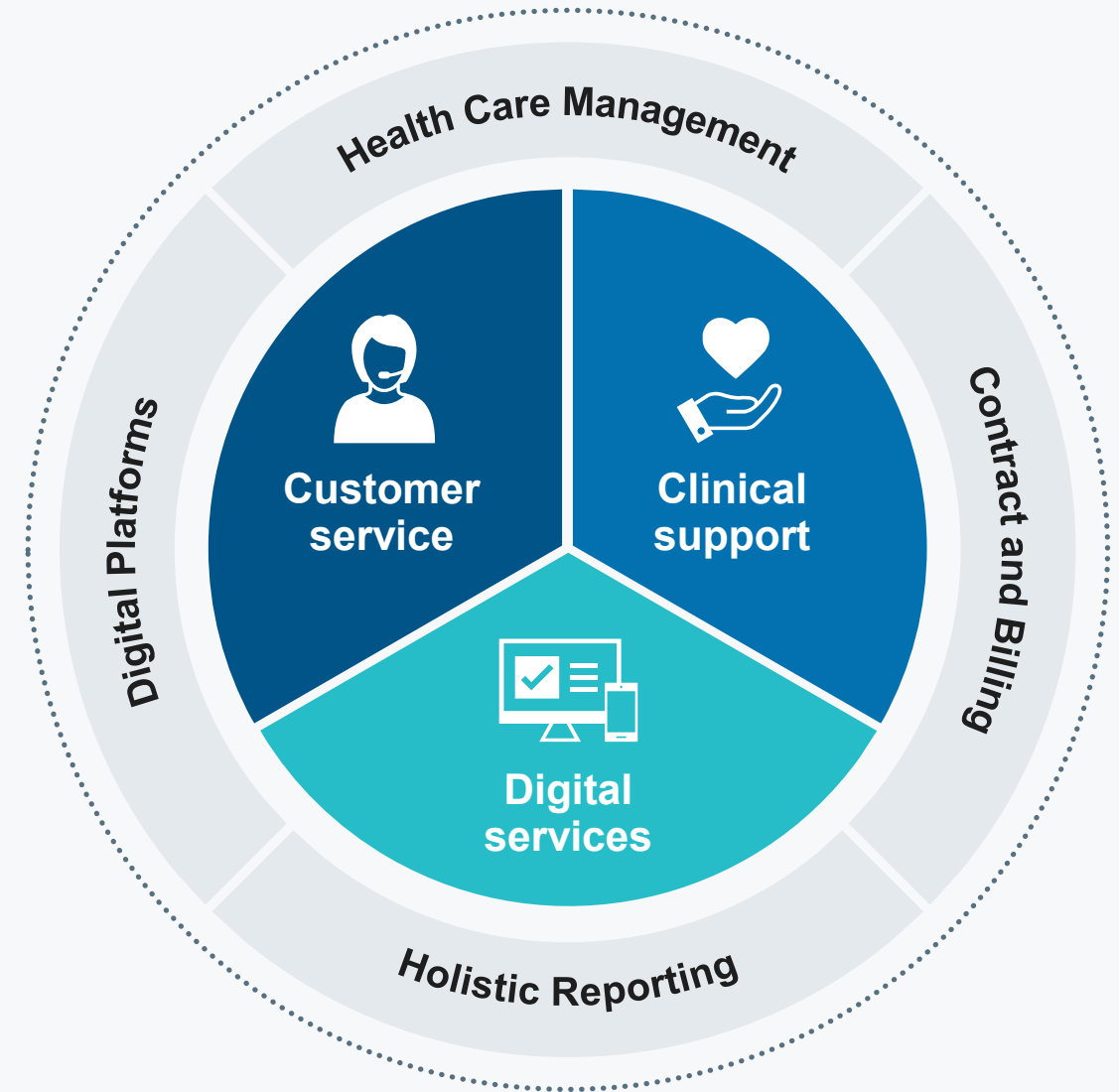
Integrated & Comprehensive Support

- ✓ Integrated Health Care Management
 - Streamlined care across the care continuum and within the provider network
 - One stop shop for mental health support
- ✓ Embedded Program
- ✓ Standardized Services (i.e., non-configurable)
 - Addresses SDoH needs at key member journey milestones

Coming in July 2023

Integrated Employee Assistance Program (EAP)*

- Essential services – counseling, supervisory training, work/life services, critical incident management
- One-stop shop experience for mental health needs
- Active support at key member journey milestones
- Delivers a clear path to address members' mental health needs and optimize their benefits
- Holistic reporting across behavioral health and EAP services



ComPsych EAP –Mid-Market and Blue Balance Funded



Standard Features

Counseling and Well-being Services:

- 5 sessions with licensed network providers
- Telephonic or digital assessment by and referral to licensed clinicians
- Toll-free access 24/7 365 days a year
- Telephonic and in-person sessions
- Web portal and digital app
- Digital platform with online interactive tools, resources and services, including cognitive behavioral resources

Work/Life Assistance

- Legal Services
- Financial counseling
- Family and caregiver support resources
- Online resource guides for various issues
- Online learning and support communities

Additional Features (Billed per Engagement)

Workplace Services:

- Critical incident management

Get to Know Your Employee Assistance Program



ComPsych GuidanceResources is an Employee Assistance Program (EAP) included with your Blue Cross and Blue Shield of Illinois (BCBSIL) plan.

Employees & their family members can use EAP services — no copays or deductibles needed.

Don't be afraid to reach out for help. Health records are kept private from the employer, as required by law.

Make a Positive Change.

Have Legal Questions Answered.

Get Help with Finances

EAP includes 5 free therapy sessions per issue. Once the free sessions are used, the employee can use their BCBSIL network benefits to keep seeing the same therapist in most cases.

Specialists can save you time by searching for local services so you don't have to. They can help find:

- Therapists
- Childcare, elder care or pet care
- Movers or home repair services
- And much more

Operational Overview: What does this mean for our Mid-Market accounts and members today?

Timing & Eligibility



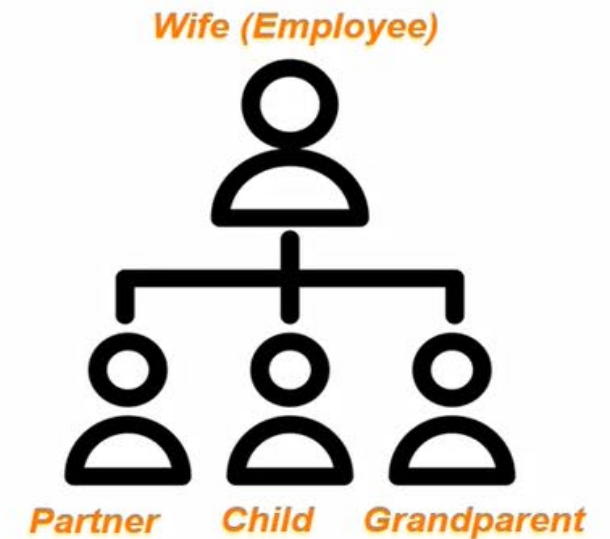
Coverage

Enterprise Nature of EAP:

Employee A: BCBS Health Plan
Employee B: Alternative Health Plan

COMPSYCH®
— The GuidanceResources Company® —

EAP access for the family member & household¹:



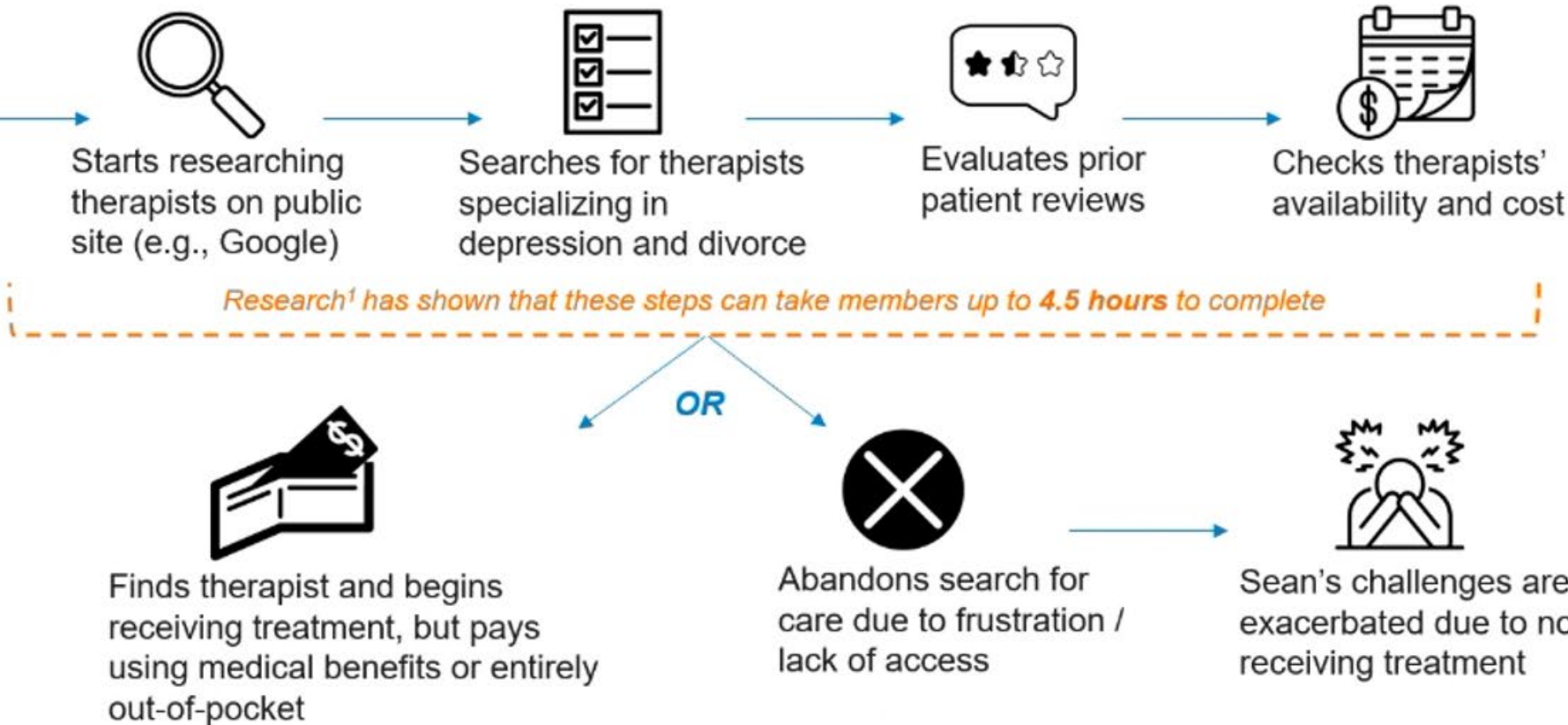
Today, the burden of finding affordable, in-network counseling services falls on our members; members often have little-to-no access to work / life resources

Meet Sean



- 35-year-old single dad
- Recently divorced
- Struggling w/ depression

Current Member Journey



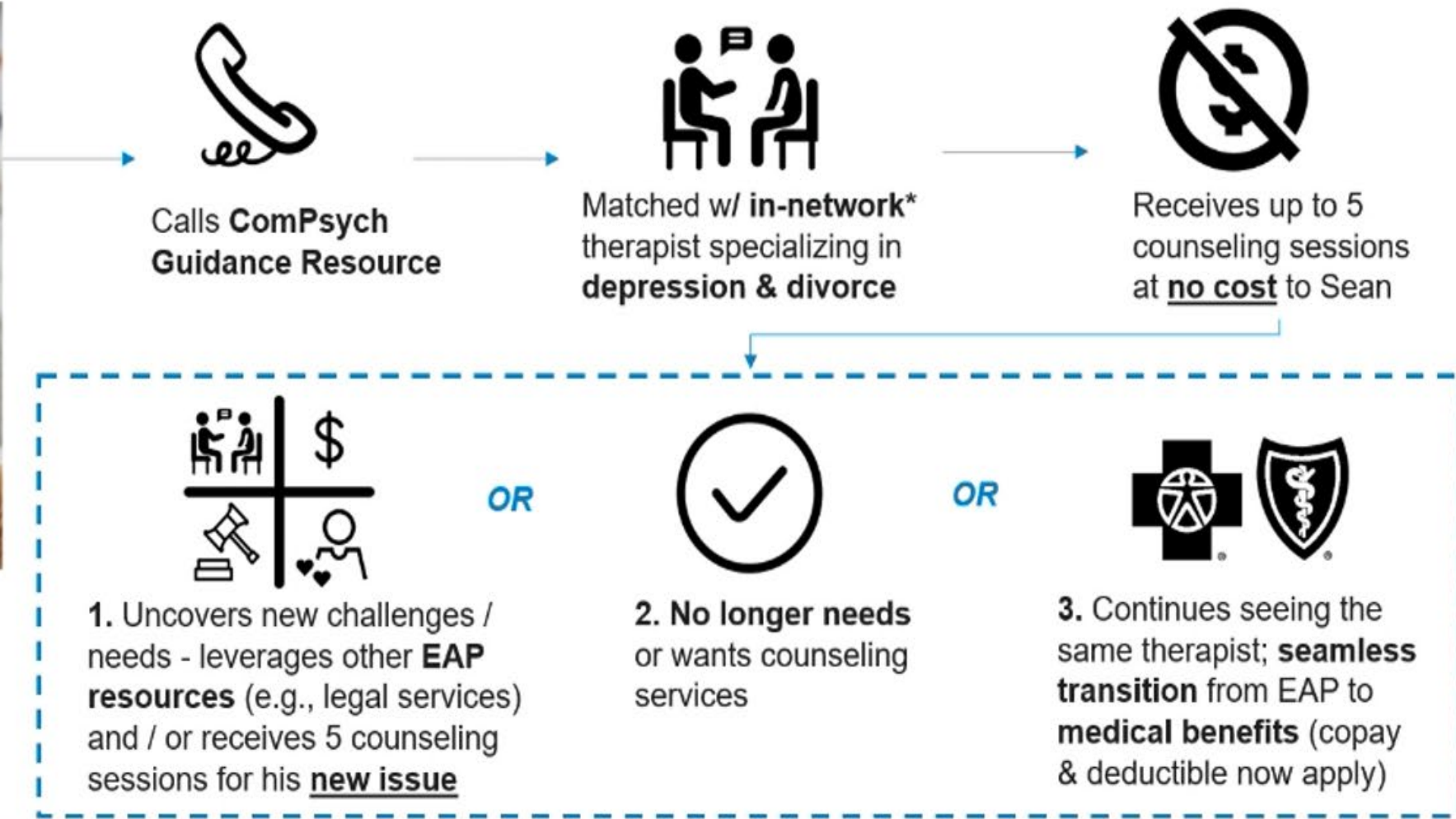
With ComPsych, members have access to 5 counseling sessions at no cost to them and can seamlessly transition from the EAP to their medical benefits

Meet Sean

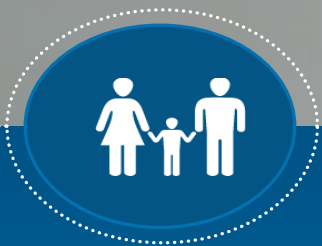
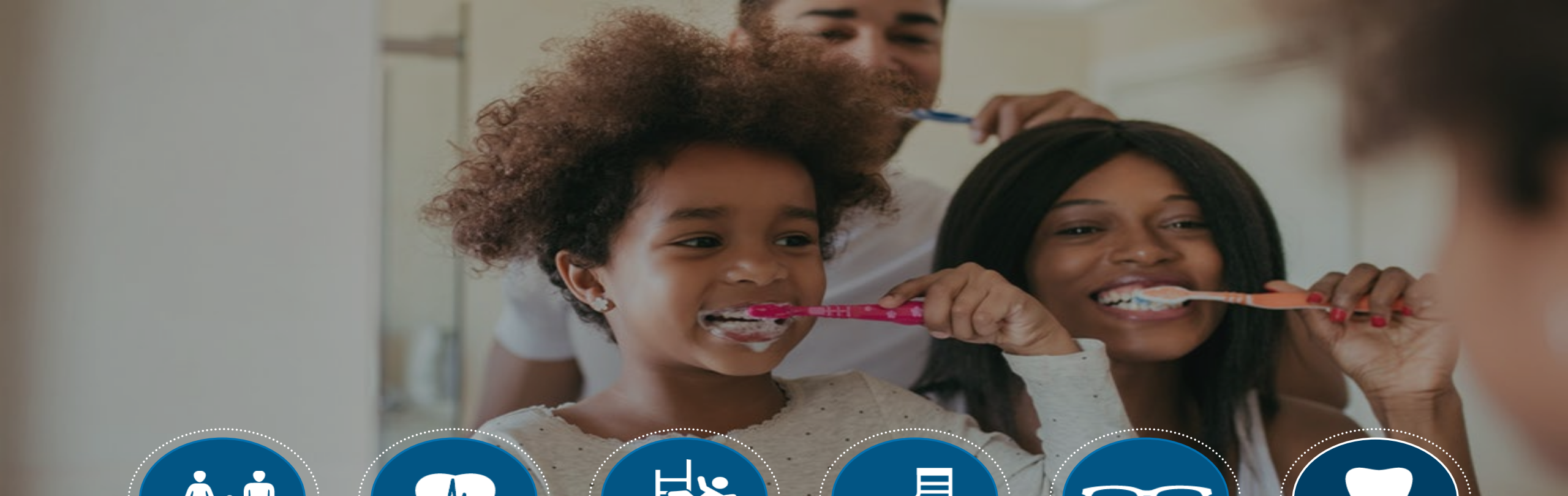


- 35-year-old single dad
- Recently divorced
- Struggling w/ depression

Member Journey with ComPsych ^{New!}



ComPsych Corp. is an independent company that has contracted with Blue Cross and Blue Shield of Illinois to provide employee assistance services for members with coverage through BCBSIL. BCBSIL makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.



BlueCare DentalSM & BCBSIL Ancillary

7/1/2023 BCBSIL Middle Market New Dental PPO Plan Design Overview

- Effective 7/1/2023, there are **four** new BCBSIL Middle Market Dental PPO plans rolling out
 - Two are Contributory (DINHR30 & DINHR35)
 - Two are Voluntary (DINHR45 & DINLM49)

IL Plan Code			DINHR30	DINHR35	DINHR45	DINLM49
Segment			Contributory	Contributory	Voluntary	Voluntary
Coinsurance	In Network	Class I	100%	100%	100%	100%
		Class II	80%	90%	90%	80%
		Class III	50%	60%	60%	50%
		Class IV	50%	50%	50%	NA
Coinsurance	Out of Network	Class I	100%	100%	100%	100%
		Class II	80%	80%	80%	80%
		Class III	50%	50%	50%	50%
		Class IV	50%	50%	50%	NA
Plan Type			Passive	Active	Active	Passive
Allocation			High	High	High	Low
Deductible Waived ¹			Yes	Yes	Yes	Yes
Annual Maximum			\$5,000	\$2,000	\$2,000	\$1,000
Ortho Lifetime Maximum			\$2,000	\$2,000	\$2,000	NA
Deductible INN/OON (3x Family Limit)			\$25/\$25	\$0/\$0	\$25/\$75	\$50/\$50
OON Reimbursement			90th R&C	90th R&C	90th R&C	MAC
Waiting Periods			No	No	Yes	Yes
Implants ²			Yes	Yes	No	No

¹ Waived Deductible applies to all Class I services and Class IV Orthodontic services

² Implants are covered at the same percentage as prosthodontics.

BCBSIL Middle Market Dental Rate Negotiation

- **BCBSIL Middle Market Medical Proposals & Medical Renewals include initial BCBSIL Dental rates**
 - **After reviewing the initial Dental rates, if you find that they have room for improvement, please send the Dental RFP information to the BCBSIL Dental Sales team**
 - **The Dental Sales team will work with Dental UW on the Dental RFP to see if the group's initial Dental rates can be improved***
 - **Dental RFP information to send to the Dental Sales Team:**
 - The Dental census (with Dates of Birth, Genders, Zip Codes, Dental plan elections, Dental tier elections) coverage
 - The Dental Highlight sheet(s) and/or Dental Certificate booklet(s) with allocation of Endodontics, Surgical Periodontics & Oral Surgery Services, with the out-of-network reimbursement level (MAC or U&C)
 - Employer/Employee Dental contribution percentages (to help determine if Voluntary or Contributory)
 - The incumbent Dental carrier current AND renewal rates

*Improvement of the Dental rates is not guaranteed with submission of this information

BlueCare Dental Enhanced BenefitSM

At-risk and high-risk members with diabetes, heart disease or who are pregnant

After standard benefits are exhausted, members are eligible for one of the following additional benefits:

- **Routine cleaning**
- **Periodontal scaling and root planing**
- **Periodontal maintenance**

Medical and dental clinical staff are also available to help manage their condition.



VIRTUAL DENTAL VISITS*

Powered by



Blue Cross and Blue Shield of Illinois (BCBSIL) now offers virtual dental visits, powered by [Teledentistry.com](https://www.teledentistry.com), for members who:

- Have a dental emergency and can't see their dentist
- Need access to a dentist after business hours
- Want to consult a dentist without leaving home, or while traveling

Virtual dental visits are meant to supplement your current dental plan.

EMPLOYER BENEFITS:

- Cost savings realized when employees use virtual dental visits instead of emergency rooms
- Convenience for employees, with dentists available 24/7 online
- Potential for lower employee absenteeism due to timely dental care, and improved workforce productivity

***This is currently available to BCBSIL Dental PPO members only (not available to Dental HMO members)**

Virtual visits may not be available on all plans.

Teledentistry.com is an independent company that operates and administers the virtual dental visits program for Blue Cross and Blue Shield of Illinois. Teledentistry.com is solely responsible for its operations and for those of its contracted providers. Teledentistry.com® and the Teledentistry.com logo are registered trademarks of Teledentistry.com, and may not be used without permission.

Mid Market Package Pricing

- Reduce BCBSIL Medical premiums when combining Dental and Ancillary lines of coverage through Blue Ancillary

Qualifying Ancillary Option(s)		Fully Insured Medical Savings
	Dental (Insured) BlueCare Dental SM	1%
	Life ¹ Basic Life Insurance	.50%
	Disability (Insured) Short-Term Disability (STD)	.25%
	Long-Term Disability (LTD)	.25%
	Supplemental Health ² Both Accident <u>and</u> Critical Illness Voluntary ³	.25%
	Both Accident <u>and</u> Critical Illness, with at least one of Accident or Critical Illness Employer Paid ³	.50%
	Vision ²	.50%
=		Up to 3%

Blue PointsSM — Rewards for Healthy Living



Earn Points Instantly

Get Extra Points

Easily Manage Your Points

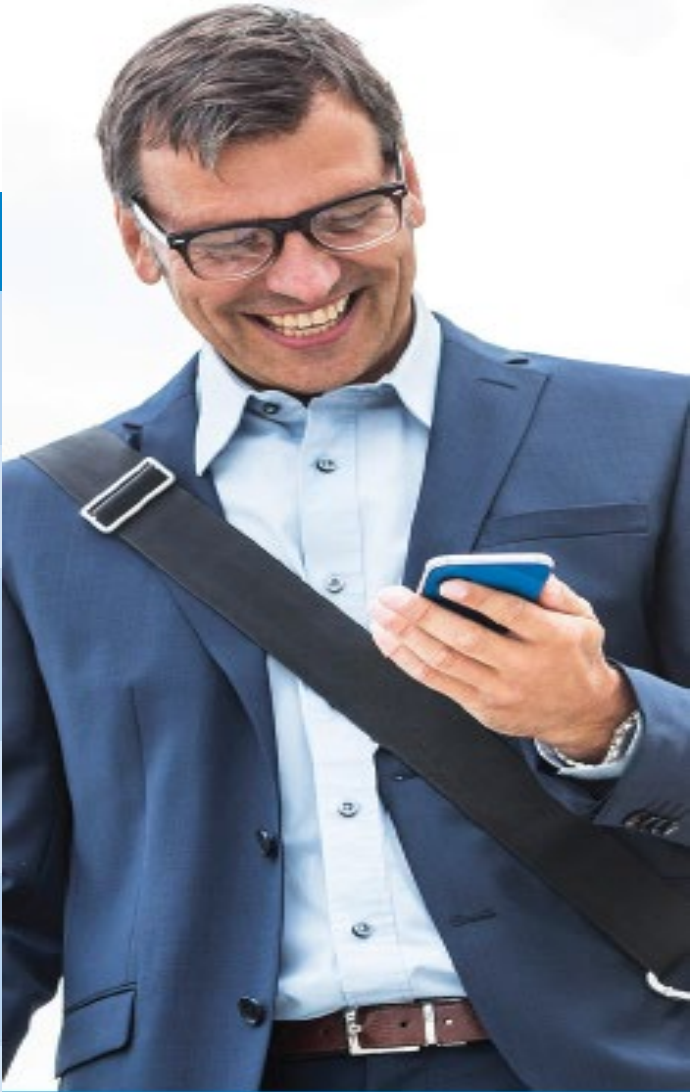
Choose from a Large Selection of Rewards

- Redeem your points in our expanded online shopping mall.
- Reward categories include apparel books, health and personal care, jewelry, electronics and more.

Participate in Activities That Match Your Goals

Look how quickly your Blue Points can add up! Here are some sample activities you can complete to earn Blue Points:

Activities	Potential Blue Points Amounts
Completing the Health Assessment every six months ⁴	2,500 points every six months
Complete a Self-management Program	1,000 points per quarter
Using the trackers to track your progress toward your goals	10 points, up to a maximum of 70 points per week
Enrolling in the Fitness Program	2,500 points
Adding weekly Fitness Program center visits to your routine	Up to 300 points each week
Completing Progress Check-ins	Up to 250 points per month
Connecting a compatible fitness device or app to the portal	2,675 points
Tracking progress using a synced fitness device or app	55 points per day



Log on to wellontarget.com today to find all the interactive tools and resources you need to start racking up Blue Points. Keep yourself motivated to earn more points by heading over to the online shopping mall and checking out all the rewards you can earn for adopting — and continuing — healthy habits.

A New Way to Experience Wellness



Members can go to wellontarget.com and use their Blue Access for MembersSM credentials to join.

Well onTarget[®] gives you the tools and resources to create your healthy journey — no matter where you may be on the path to wellness.

Member Wellness Portal

Available at wellontarget.com, the portal links you to a suite of innovative programs and tools.



Health Assessment (HA)¹



Self-Management Programs



Health Coaching



Wellness Challenges



Tools and Trackers



Fitness Tracking



Blue PointsSM Program^{2,3}



Health and Wellness Content



Fitness Program⁴



AlwaysOn[®] Wellness Mobile App



BlueCross BlueShield of Illinois

Ancillary Products & Review

Miguel Munoz

Sales Representative Small Group

Blue Cross and Blue Shield of Illinois, a Division of
Health Care Service Corporation, a Mutual Legal Reserve Company,
an Independent Licensee of the Blue Cross and Blue Shield Association



- Small Group (2-50 lives) Plans Available through e-Sales

- Prior to January 1st, 2023

- Basic Life and AD&D
- Short-Term Disability
- Vision (Available as of January 1st, 2023)
- Critical Illness (Available as of January 1st, 2023)
- Accident (Available as of January 1st, 2023)

- As of May 1st, 2023

- Basic Life and AD&D
- Supplemental Life and AD&D
- Short-Term Disability (Employer Paid and Voluntary)
- Long-Term Disability (Employer Paid and Voluntary)
- Vision (Employer Paid and Voluntary)
- Critical Illness (Employer Paid and Voluntary)
- Accident (Employer Paid and Voluntary)

E-Sales



Portfolio of Ancillary Solutions

Small Group Employer-Paid and Voluntary Insurance Plans

Life, Short- and Long-Term Disability, Vision, Critical Illness, Accident, and Dental available through E-Sales.



BlueCross BlueShield
of Illinois



Life Insurance

- Accidental Death & Dismemberment
- Integrated LTD claim management / life waiver of premium
- DearbornCaresSM



Vision Care

- Popular vision plans with additional discounts, such as 40% off additional pair of glasses
- The right mix of independent, national and retail providers



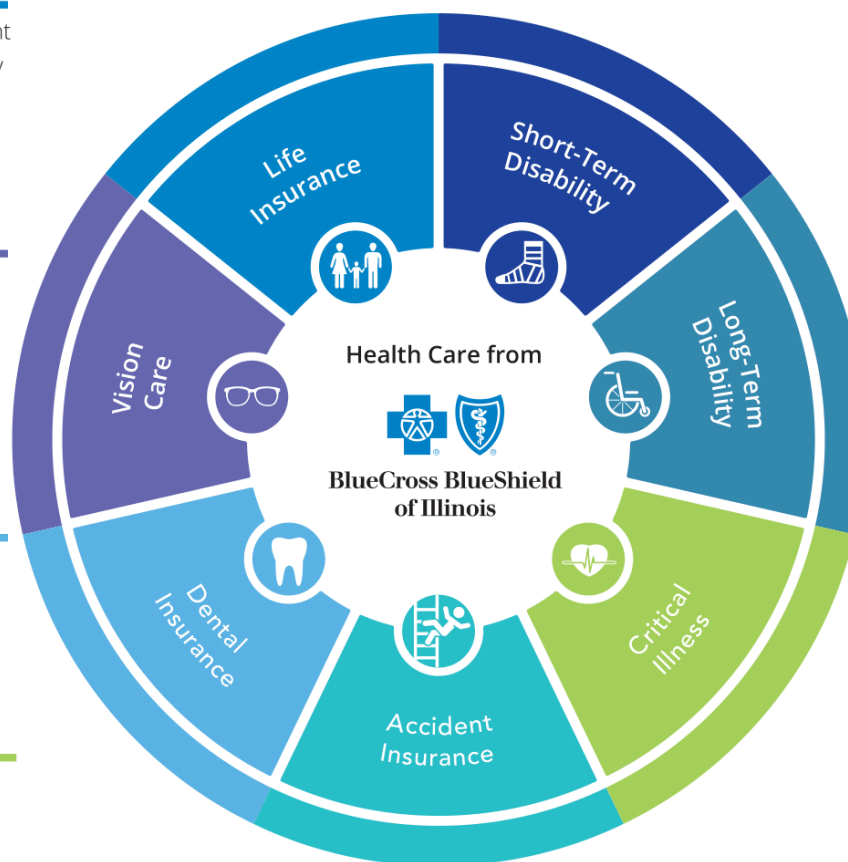
Dental Insurance¹

- One of the largest dental networks²
- Wellness Plan: BlueCare Dental ConnectionSM



Critical Illness

- Complements a high-deductible medical plan
- Pays a wellness benefit to members
- Guarantee issue benefits
- HSA-compliant plan design



Short-Term Disability

- Insured and ASO Programs
- Online claim intake for all group sizes
- My Benefits: online self-service tool



Long-Term Disability

- Employee Assistance Program included: Disability Resource Services^{TM3}
- Flexible plan designs
- Integrated STD / LTD claim management
- My Benefits: online self-service tool
- Online claim intake for all group sizes



Accident

- Guarantee issue for employees, spouses and children
- Designed to encourage the use of high value providers
- HSA compliant
- Smart Plan options



BlueCross BlueShield of Illinois

Choosing Employee Benefits Just Got Easier

Ancillary Set Plans in E-Sales

Life, Short- and Long-Term Disability



LIFE INSURANCE

Basic Life Plans	Plan Benefit	Benefit Maximum	Guarantee Issue	Dependent Basic Life Plans
Plan 1	\$15,000	–	2–9 Lives: \$50,000 or 10–50 Lives: \$200,000	Spouse \$10,000
Plan 2	\$25,000	–		
Plan 3	\$50,000	–		
Plan 4	\$100,000	–		Child \$5,000
Plan 5	1x Salary	\$150,000		
Plan 6	2x Salary	\$200,000		

Supplemental Life (Employee/Spouse/Child):

	Plan Benefit	Guarantee Issue
Employee	\$10,000–\$500,000 (in \$10,000 increments)	2–5 Lives: Fully Underwritten 6–9 Lives: \$30,000 10–25 Lives: \$50,000 26–50 Lives: \$100,000
Spouse*	\$5,000–\$150,000 (in \$5,000 increments)	2–9 Lives: Fully Underwritten 10–50 Lives: \$25,000
Child	\$10,000	



SHORT-TERM DISABILITY

Employee: 60% Weekly Earnings, Max \$750, \$1,000 or \$1,500

Elimination Period: 0/7, 7/7, 14/14

Maximum Benefit Duration: 13 or 26 Weeks



LONG-TERM DISABILITY

Employee: 60% Monthly Earnings, Max \$3,500 or \$6,000

Elimination Period: 90 or 180 days

Maximum Benefit Duration: SSNRA or 5 Years



BlueCross BlueShield of Illinois

Choosing Employee Benefits Just Got Easier

Ancillary Set Plans in E-Sales

For groups with 2–50 eligible employees

VISION INSURANCE

	Frequency Eye/Lens/ Frame	Lens Copay	Allowance (Frame & Contacts)	Funded Fit and Follow up	Funded Standard Progressive	Funded Scratch Coating	Funded Kids Polycarb
Plan 1	12/12/24	\$25	\$100	No	No	No	No
Plan 2	12/12/24	\$10	\$130	No	No	Yes	No
Plan 3	12/12/24	\$10	\$130	Yes	No	Yes	No
Plan 4	12/12/12	\$10	\$130	No	No	Yes	No
Plan 5	12/12/24	\$10	\$150	No	No	Yes	No
Plan 6	12/12/12	\$10	\$150	No	No	Yes	No
Plan 7	12/12/12	\$10	\$150	No	Yes	Yes	No
Plan 8	12/12/24	\$25	\$130	No	No	Yes	No
Plan 9	12/12/24	\$25	\$150	No	No	Yes	No
Plan 10	12/12/12	\$25	\$150	No	No	Yes	No



ACCIDENT INSURANCE*

Plans Offered: Plan 1, Plan 2, Smart Plan 1, Smart Plan 2

See Accident Insurance plan designs for detailed benefit information



CRITICAL ILLNESS INSURANCE*

Employee: \$5,000 or \$10,000

Spouse: \$2,500 or \$5,000 (Not to exceed 50% of employee amount)

Child: \$2,500 (Not to exceed 50% of employee amount)

• Bundling Discounts are Now Available for Small Groups

Products that are eligible for discounts are:

- Basic Life
- Basic Short-Term Disability
- Basic Long-Term Disability

Requirements

- Three or more ancillary products have to be purchased. Any other lines purchased (incl. dental) outside of the three coverage eligible for discounts would qualify as part of the minimum.
- Products have to be quoted and enrolled via the portal
- Groups with 10+ eligible lives

How much of a discount does each eligible line of coverage receive?

- 10% per line of coverage

Bundle-Up



*The content of the slide is subject to change.

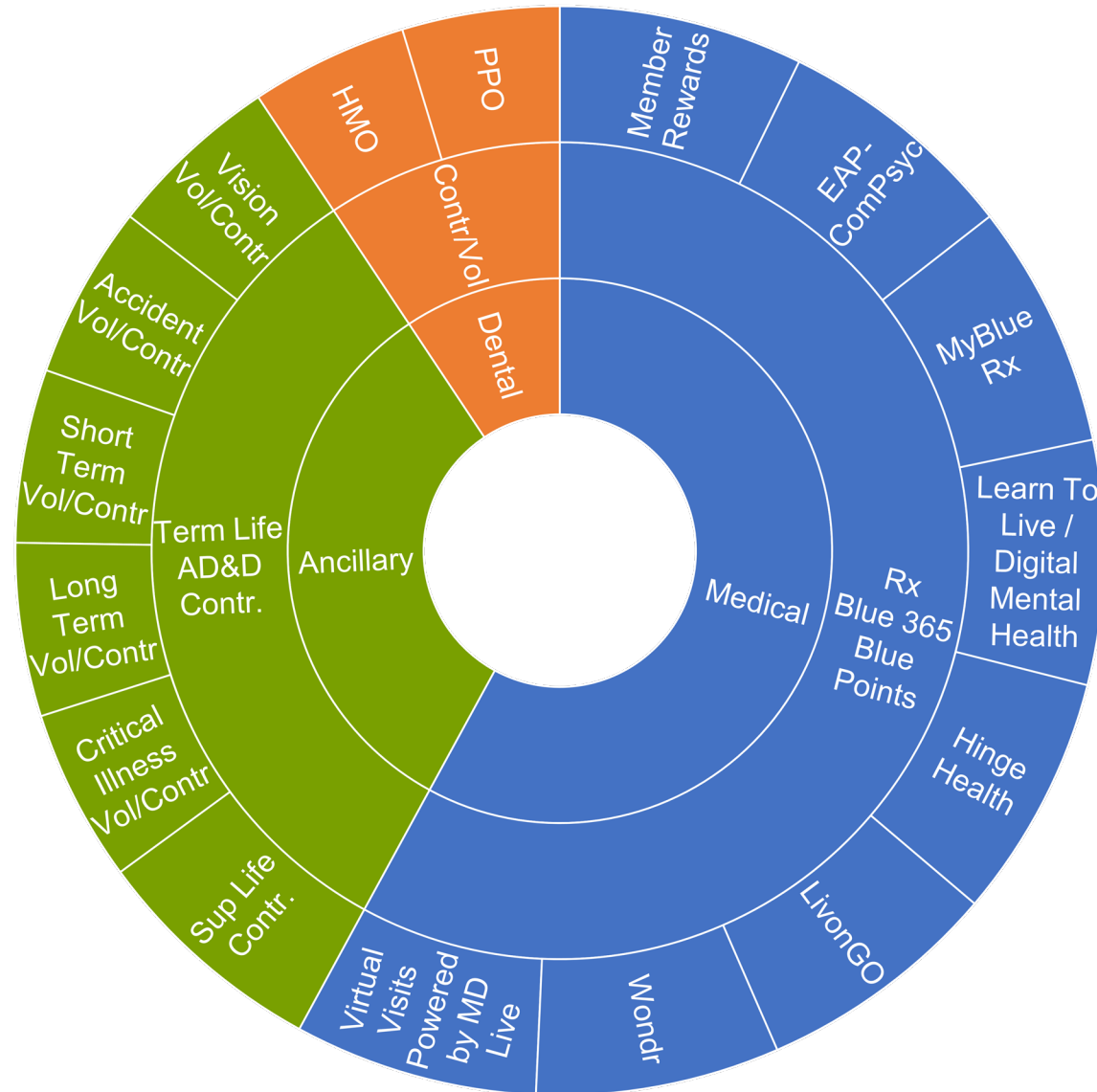


BlueCross BlueShield
of Illinois

Appendix

Benefits of BCBSIL Membership – Mid-Market

*Not all benefits apply to HMO plans, so ask your GA



Benefits of BCBSIL Membership – **Small Group** *Not all benefits apply to HMO plans, so ask your GA



Tax Forms: Why?????

>UW needs to see: an Employer/Employee Relationship, Who is eligible, Who are Owners.

>Audits can be done to confirm should an inquiry be made.

Groups in Business Less 4 Months or have NOT filed annual taxes:

- Articles of Incorporation / Partnership Agreement / Incorporation Papers / Articles of Organization
- SS-4 with FEIN# from IRS
- Owner/Partner Full Time Cert Form
- Most Recent Payroll Report, reconciled (FT/PT/T/W)
 - If no payroll or if new employee not on payroll, W4 Form or W9 Form if 1099er.
 - Letter on Group's Letterhead listing Employees, reconciled with hours

Groups In Business more than 4 Months or HAVE filed annual taxes:

- “S” Corps: 1120S K1
- Partnerships: 1065 K1
- Sole Proprietor: 1040 SE & C
- Farms: 1040 SE & F Schedules
- Corporations: UI3/40, preferred, other states will have their version. Sometimes IL 941, with UW approval
- Owner/Partner Full Time Cert Form

*If group has not filed their taxes we may need additional paperwork, including tax extension form.

**The K1s can be in the name of another company, it must be explained by the group on company letterhead.

And More Forms

Existing New Group

- Standard Group Documents:
 - BPA
 - BPS
 - EGI
 - Employee Apps or Census
 - W&T UI3/40 reconciled (not need for Mid-Market), Payroll Summary Report if new hires, W4s if not on payroll yet. If owner not on W&T, we need the Owner/Partner Full Time Cert form and prior year's tax doc
 - Prior Carrier Bill if COBRA members.

New Group Entity

- Standard Group Documents:
 - BPA
 - BPS
 - EGI
 - Employee Apps or Census
 - W&T UI3/40 reconciled (not needed if Mid-Market) if not available, Payroll Summary Report if new hires, W4s if not on payroll yet. If owner not on W&T we need the Owner/Partner Full Time Cert form
 - Sec. of State of IL Letter if not showing on the IL CyberDrive

*This slide deck in no way replaces the UW reference guide. It is to only be used as a tool to assist in enrolling clean cases for group submissions. ** For Internal Use Only.

Quick Glance: Partnership vs Non-Partnership



- **Partnerships:**

- Partners only with no other employees (i.e. Husband/Wife group)
- Prior Year's 1065 K1 for each Partner.
- If NEW Partnership entity, need a "Partnership Agreement", SS-4, and Sec. of State Letter.

- **Non-Partnerships:**

- Must average 1 employee in Prior Calendar Year (can be the owner but MUST BE reflected on the EGI form), and at least 2 employees in Current Year (i.e. owner & non-spouse employee).
- Employee can be a 1099er, or W4 employee. A 1099er would require prior year's 1099, if no 1099 yet, W9. For W4 employees, we need quarterly W&T or payroll, if new employee need W4.
- If new entity, Articles, SS-4, Sec. of State Letter.

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** For Internal Use Only.

TIPS



Ensure all required documents are attached in the tool.



Benefit Program Application (BPA)

EIN & Affiliate Info – matches EGI
Effective Date/Anniversary Date – matches BPS
Address – matches W&T
Erisa
Waiting Period & Domestic Partner
Employer Contributions
Completed Proxy, though optional helps identify signer.



Employer Group Information (EGI)/MSP

Employer Name – matches BPA, BPS and W&T
Number of employees and Current Year
Partnership – verify.



Wage and Tax

EIN & Employer Name – Be sure it matches the BPA and EGI



Census Enrollment/Application

SSN's
Waiver Reason
DOB
DOH



Benefit Plan Selection (BPS)

Policy Effective Date/Anniversary Date
Billing Method (Age Rated vs. Composite Rated)

Member Rewards: How to Shop for Rewards



Gottlieb Memorial Hospital

General Acute Care Hospital

LOCATION

Gottlieb Memorial Hospital
701 W North Ave, Melrose Park, IL 60160
[Get directions](#) (est. 9.9 miles away)

CONTACT INFORMATION

Phone: 708-681-3200

4.4 View 351 ratings

Blue Distinction Plus + 2 More Awards

Member Rewards Cash Reward

\$100 Claim Your Reward

Your Estimated Cost

\$431

[Cost Details](#)

In your network

Compare

View Profile



Rush Oak Park Hospital

General Acute Care Hospital

LOCATION

Rush Oak Park Hospital
520 S Maple Ave, Oak Park, IL 60304
[Get directions](#) (est. 8.8 miles away)

CONTACT INFORMATION

Phone: 708-383-9300

4.6 View 351 ratings

2 Awards

Your Estimated Cost

\$419

[Cost Details](#)

In your network

Compare

View Profile

Select up to 4 Providers to Compare

John H Stroger Jr Hosp Cook Cnty
General Acute Care Hospital

Insight Hospital Medical Ctr Chi
General Acute Care Hospital

Gottlieb Memorial Hospital
General Acute Care Hospital

Rush Oak Park Hospital
General Acute Care Hospital

Clear all providers

Compare 4/4



Compare Providers



John H Stroger Jr Hosp Cook Cnty

View Profile



Insight Hospital Medical Ctr Chi

View Profile



Gottlieb Memorial Hospital

View Profile



Rush Oak Park Hospital

View Profile

Cost

Total estimated cost	\$192	\$236	\$431	\$419
Member Rewards	\$460	\$390	\$100	—

Overview

Quality

Compare up to 4 providers

How to Shop for Rewards (cont'd.)



U Of Il Hospital U Health

General Acute Care Hospital

LOCATION

U Of Il Hospital U Health
1740 W Taylor St, Chicago, IL 60612
[Get directions](#) (est. 5.1 miles away)

CONTACT INFORMATION

Phone: 312-996-7000

★★★★★ 5.0 [View 1 rating](#)

 Blue Distinction Plus + 7 More Awards

☐ Compare

[View Profile](#)

Member Rewards Cash Reward

\$355 [Claim Your Reward](#)

Your Estimated Cost

\$262

[Cost Details](#)

 In your network



Gottlieb Memorial Hospital

General Acute Care Hospital

LOCATION

Gottlieb Memorial Hospital
701 W North Ave, Melrose Park, IL 60160
[Get directions](#) (est. 9.9 miles away)

CONTACT INFORMATION

Phone: 708-681-3200

★★★★☆ 4.4 [View 351 ratings](#)

 Blue Distinction Plus + 2 More Awards

☐ Compare

[View Profile](#)

Member Rewards Cash Reward

\$100 [Claim Your Reward](#)

Your Estimated Cost

\$431

\$1,725 Your plan's estimated cost
\$2,156 Total estimated cost

[Close](#)

 In your network



Rush Oak Park Hospital

General Acute Care Hospital

LOCATION

Rush Oak Park Hospital
520 S Maple Ave, Oak Park, IL 60304

★★★★☆ 4.6 [View 35 ratings](#)

 2 Awards

☐ Compare

[View Profile](#)

Your Estimated Cost

\$419

\$1,477 Your plan's estimated cost

6. Click on “View Profile” for any Provider/Facility location name to select that option

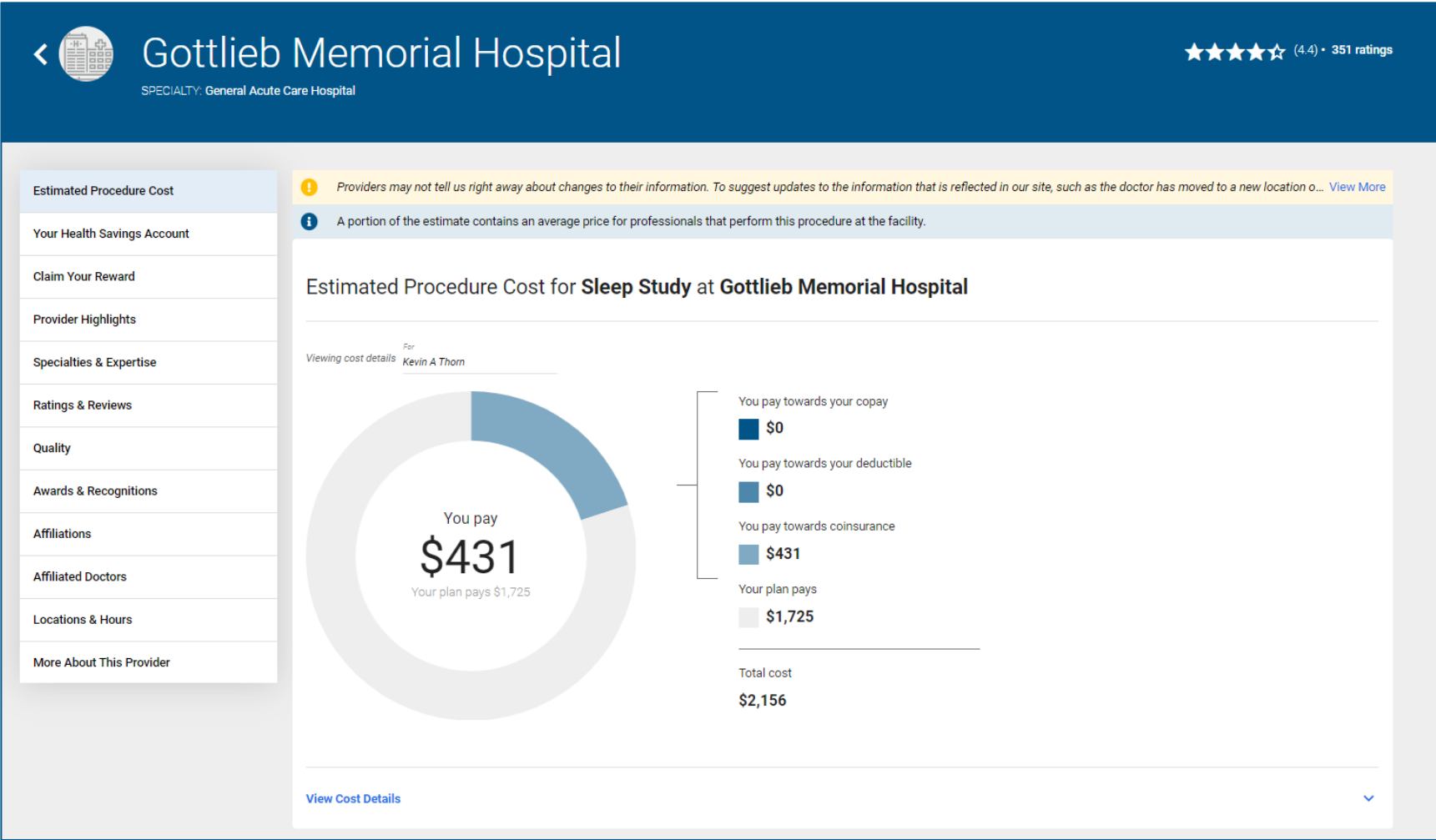
[illegible]

Lowest Total Cost
and Highest
Reward
Opportunity

How Results are Displayed

Highest Total Cost
and Lowest/No
Reward
Opportunity

How to Shop for Rewards (cont'd.)



The Member can review Profile information on selected provider/facility.

How to Shop for Rewards (cont'd.)

7. If the lowest cost option is NOT selected, a pop-up will display after several seconds. This is intended to redirect the Member to the lowest cost option.

8. The Member can either select the lower cost option or click the "X" in the top right-hand corner of the pop-up and continue with their selection.

The screenshot displays the Gottlieb Memorial Hospital website with a pop-up titled "Save on your Sleep Study". The pop-up offers three provider options, each with an estimated cost and a member rewards cash reward. A red arrow points from the "X" button in the top right corner of the pop-up to the text in box 7. Another red arrow points from the "Select this Provider" button for the lowest cost option (John H Stroger Jr Hosp Cook Cnty) to the text in box 8.

Provider	Your Estimated Cost	Member Rewards Cash Reward	Distance (est.)
Gottlieb Memorial Hospital	\$431	\$100	9.9 miles
John H Stroger Jr Hosp Cook Cnty	\$192	\$460	4.8 miles
Insight Hospital Medical Ctr Chi	\$236	\$390	6.7 miles

How to Shop for Rewards (cont'd.)

9. Once the Member selects a provider/facility, then this concludes their shopping requirements.

The Member should follow the instructions in the “Claim Your Reward” section of the provider profile.

The screenshot displays the 'Claim Your Reward' interface for John H Stroger Jr Hosp Cook Cnty. On the left, a sidebar menu lists various options, with 'Claim Your Reward' highlighted and circled in red. The main content area features a green banner stating: 'Your Sleep Study at John H Stroger Jr Hosp Cook Cnty is eligible for a \$460 Member Rewards Cash Reward.' Below this, a search confirmation number 'PBM D5TTLPJN' is shown. A vertical process flow on the right includes three steps: 'Compare' (marked with a checkmark), 'Schedule' (marked with a right arrow and circled in red), and 'Earn' (marked with an empty circle). A red arrow points from the text box above to the 'Schedule' step. The 'Schedule' step text reads: 'Your next step is to receive your procedure or service at this chosen location.'

How to Earn a Reward

- \$ Member shops for the Reward-eligible service and completes the procedure at the eligible location within 12 months.
- \$ BCBSIL receives the claim from the provider and adjudicates the claim.
- \$ HCSC sends a weekly claims file to Sapphire Digital.
- \$ Sapphire ingests the file and compares the claims data with their recorded shopping history for the eligible members.
- \$ Sapphire compares the procedure code and date of service against the Member's search history. The date of service must occur after the date of the Member's search.
- \$ Once validated, Sapphire will cut a check for the shopped reward amount and mail it to the Member.

- Checks are distributed from Sapphire. They are not labeled from employer name, BCBSIL, or HCSC.

- Distribution date is approximately 4-6 after the claim is processed (NOT based on date of service).

- HCSC does NOT pay out rewards on denied or pending claims.

Only claims that are approved and processed are eligible for a Reward.

The image shows a check from MDX MEDICAL, LLC (160 CHUBB AVENUE SUITE 301, LYNDHURST, NJ 07071) to TEST PAYEE105 (500 MAIN ST., MIAMI, FL 33101). The check is for \$100.00, dated 06/29/2022, with check number 500006. It includes a table of details: Check No. 500006, Check Date 06/29/2022, Check Amount \$100.00, Confirmation code XYZ12345, and Payment Ref# 300006. The check is signed by an authorized person and includes a VOID watermark. The bottom of the check features a MICR line: *0000500006* 00610000521 334037233806*.

MDX MEDICAL, LLC
160 CHUBB AVENUE SUITE 301
LYNDHURST, NJ 07071

RETURN SERVICE REQUESTED

Check No.	500006
Check Date	06/29/2022
Check Amount	\$100.00
Confirmation code	XYZ12345
Payment Ref#	300006

TEST PAYEE105
500 MAIN ST.
MIAMI, FL 33101

Thank you for using Member Rewards!

Enclosed is your Member Rewards check, and we hope that you'll use Member Rewards again when you're shopping for health care. Please note - rewards are subject to tax.

The Member Rewards program, administered by Sapphire Digital as part of your health plan benefits, is a great way to better manage your health care costs. Becoming an active shopper for your health care procedures and services can put cash in your pocket and make the most efficient use of your health care plan - a win-win situation. Remember, you can always log on to Provider Finder® through Blue Access for Members™ to help you make more informed decisions. You can check costs before your appointment, find in-network health care providers in your area and compare third-party quality indicators.

Page 1 of 1

MDX MEDICAL, LLC
160 CHUBB AVENUE SUITE 301
LYNDHURST, NJ 07071

500006
June 29, 2022
\$100.00
VOID AFTER 180 DAYS

Amount: "One Hundred Fifty dollars and 00 cents"

Pay to the order of TEST PAYEE105

Bank of America N.A.
Georgia

DEMO CUSTOMER

AUTHORIZED SIGNATURE

VOID

0000500006 00610000521 334037233806*

How to Earn a Reward (cont'd.)

NOTE:

- Member must shop for each service or procedure, each time, to earn the reward.
 - Example: Member needs an MRI and Knee Replacement. The Member must shop separately for the MRI and then again for the Knee Replacement if they wish to receive rewards for both procedures.
 - Example: Member needs an MRI and plans to go to same location as last time, where they earned a reward. The Member must shop again prior to their appointment to earn the reward this time.
- Dependents are eligible for rewards; however, an adult Member must shop on their behalf for dependents younger than 18.

Tax Information

- All rewards may be taxable for the Member.
- HCSC does not provide tax advice.
- This information is included in all communications and collateral provided to Member.
- Sapphire Digital will automatically issue a 1099 form directly to the Member if they earn \$600+ in rewards within a calendar year.
- Members may call the Customer Service number on the back of their medical ID card to inquire about reward amounts accumulated.

Compensation Schedule – Group Markets Product Lines

GROUP HEALTH PRODUCT LINES – SMALL GROUPS		
GROUP SIZE	COMPENSATION RATES	
	SINGLE	FAMILY
1-50	\$27.00	\$50.00
GROUP HEALTH PRODUCT LINES - MID-MARKET GROUPS		
ANNUAL PREMIUM VOLUME	COMPENSATION RATES	
	GROUP SIZE AT OED/AD 2-3 LIVES	GROUP SIZE AT OED/AD 4-150 LIVES
\$1 - \$50,000	2.00% Flat Rate	8.00%
\$50,001 - \$100,000	2.00% Flat Rate	4.25%
\$100,001 - \$150,000	2.00% Flat Rate	4.00%
\$150,001 or more	2.00% Flat Rate	3.75%
BLUECARE DENTAL SMALL GROUP PRODUCTS LINES		
ANNUAL PREMIUM VOLUME	COMPENSATION RATES	
	GROUP SIZE AT OED/AD 2-3 LIVES	GROUP SIZE AT OED/AD 4-150 LIVES
\$1 - \$50,000	2.00% Flat Rate	8.00%
\$50,001 - \$100,000	2.00% Flat Rate	4.25%
\$100,001 - \$150,000	2.00% Flat Rate	4.00%
\$150,001 or more	2.00% Flat Rate	3.75%
LARGE GROUP HEALTH AND DENTAL PRODUCT LINES		
Large Group, Non-Premium and HMOI only cases are negotiated and require approval. All negotiated rates must be submitted on an Individual Case Commission Addendum (ICCA).		

*The following compensation schedule applies to both new and renewal groups sold under the Standard Producer Agreement and replaces any Standard Producer Compensation Schedule in effect prior to the effective date of this schedule. Renewal compensation under this schedule will begin upon the account's renewal on or after the effective date of this schedule. For purposes of determining commissions, new and existing, any Affordable Care Act Health Insurer Fee or Reinsurance Fee included within premium will be excluded. In no event will compensation be payable with respect to any such fees.

NOTE: IT IS THE PRODUCER'S RESPONSIBILITY TO ENSURE THE ACCURACY OF EACH MONTHLY COMMISSION STATEMENT. BLUE CROSS AND BLUE SHIELD OF ILLINOIS LIMITS COMMISSION ADJUSTMENTS TO 24 MONTHS FOR NON-PAYMENT OR UNDER-PAYMENT OF COMMISSIONS ON NON-NEGOTIATED COMMISSION AMOUNTS.

**OED = ORIGINAL EFFECTIVE DATE / AD = ANNIVERSARY DATE

Questions?