



An Executive Summary for South Koochiching Rainy River ISD #363

March 2025

You & Blue.SM Better together.

REDUCING YOUR TOTAL COST OF CARE

Using the four key components indicated below, Blue Cross and Blue Shield of Minnesota can recommend a health plan that will reduce the total cost of care for you and your employees.



Network and benefit design

- Network discounts
- Value-based payment arrangements
- High-performance networks
- Centers of excellence
- Virtual care
- Benefit design based on your population's health

Member engagement

- Blue Care Advisor advocacy and navigation
- Wellness incentives and discounts
- On-site health screenings
- Employee assistance program
- Nurse line
- Expert medical opinion services



**RACIAL AND HEALTH EQUITY
EMBEDDED IN ALL OF
OUR SERVICES**

Clinical programs

- Holistic case and condition management
- Intensive case management for complex, high-cost cases
- Integrated behavioral healthcare
- Combined medical and pharmacy benefits
- Gender affirmation support
- Quitting tobacco support
- Guided virtual physical therapy
- Diabetes prevention and management program
- Online cognitive behavioral therapy

Cost protection

- Insight-driven analytics and reporting
- Pre- and post-payment reviews
- Fraud, waste and abuse prevention
- Nonparticipating provider negotiation services
- Payment integrity program

HIGHLIGHTS

Your plan will provide everything your employees need for superior coverage and access to the very best care wherever they live, work or travel.

MORE THAN 90 YEARS OF CARING EXPERIENCE

Since 1933, Blue Cross has remained committed to promoting good health for the individuals, families and communities we serve.



Serving Minnesota as a nonprofit for more than 90 years.

NONPROFIT MISSION

As a nonprofit organization, our priority is the health of our members, not profit. Approximately 90 cents of every healthcare dollar we receive is used to pay for members' healthcare costs.

BROADEST NETWORK NATIONWIDE

With the largest provider network nationwide, 97 percent of claims are paid in network,¹ resulting in substantial cost savings for you.

VALUE-BASED CARE

More than 634,000 value-based providers are in-network with Blue Cross—three times more than any of our competitors.

NAVIGATION SUPPORT

Our navigation solution, Blue Care Advisor, surrounds your plan members with personalized guidance and advocacy—allowing them to easily access the right care when they need it.

ACCOUNT MANAGEMENT

Our account managers and implementation specialists have many years of health insurance experience. They will go the extra mile to ensure you are satisfied.

RACIAL AND HEALTH EQUITY

Blue Cross strives to make healthcare equally accessible and beneficial for all. We are highly attuned to the wide-ranging needs of the diverse communities we live in and serve.

MOST TRUSTED HEALTH PLAN

Thousands of employers, including 81 percent of Fortune 100 employers,² and more than 114 million people⁴ put their trust in Blue Cross. One in three Americans is covered with a Blue Cross plan.⁴ As the nation's preferred health plan,³ Blue Cross is also the plan ranked highest in trust.⁴

IN GOOD COMPANY

81% FORTUNE 100 COMPANIES²

69% MINNESOTA FORTUNE 500 COMPANIES⁵

¹ Blue Cross Blue Shield Association network portfolio statistics, December 2021, Leading Consulting Firm CY2019 Discount Benchmark. Blue Cross Blue Shield Advancing Affordable and Equitable Health Care for Everyone, November 2023

² Blue Cross Blue Shield Association, internal data, November 2023

³ Blue Cross Blue Shield National Key Metrics, Brand attribute study

⁴ "Is a company I can trust," Brand Strengths Measure, Blue Cross Blue Shield Association, 2014 - 2021; results based on approximately 70,000 online interviews with an 8, 9, or 10 response (scale of 1 to 10). "Is a name you can trust," Brand Strengths Measure Survey, Blue Cross Blue Shield Association, 2010 - 2013, results based on approximately 800 interviews (half members/half non-members) collected through a random digit dial telephone survey.

⁵ Blue Cross, internal data, November 2023

Network access wherever your employees live, work and travel

Your employees will be covered wherever they live, work and travel—in large cities, small towns or rural areas. All Minnesota networks include coverage while traveling domestically (BlueCard® PPO) and overseas (Blue Cross Blue Shield Global® Core network).

Unlike other carriers, we own all our networks. This provides you with network strength and stability, without the unpredictability of rented networks that may not be available to your employees in the future, disrupting their relationships with trusted providers.

In addition to broad access, your employees will get the right information and transparency tools so they can confidently and consistently select higher-performing providers who deliver quality care at the lowest possible cost.

MINNESOTA COVERAGE



The Aware® network – Our broadest open-access network includes 100 percent of hospitals and 98 percent of doctors in Minnesota and bordering communities in-network. No referral is necessary to see a physician or specialist in this network, including at the Mayo Clinic.

High Value Network (HVN) – As an alternative or in addition to the broad Aware network, the statewide HVN offers the savings of a narrower network without sacrificing choice. With HVN, your employees have access to the full range of care from primary to specialty care at some of the largest healthcare systems in Minnesota. On average, HVN delivers 7 percent to 9 percent lower claims costs.

BEGINS LOCALLY AND SCALES NATIONALLY



100+
MILLION
MEMBERS

1 in 3
AMERICANS
has Blue Cross and
Blue Shield insurance

Source: Blue Cross and Blue Shield Association, May 2020.

NATIONWIDE AND GLOBAL COVERAGE

National coverage – BlueCard® PPO provides the industry's leading discount advantage with access to more than 1.7 million providers nationwide—more than any other carrier. BlueCard delivers 4 percent to 9 percent lower per member per month cost (PMPM savings compared to competitors' PPOs, a \$24 PMPM savings).

Global coverage – Blue Cross Blue Shield Global® Core provides access to leading medical providers in more than 190 countries and territories.

LOW-COST TELEHEALTH

Doctor On Demand – With 24/7 access to doctors, psychiatrists, psychologists, therapists and other medical experts, care is always available, anytime and anywhere via Doctor On Demand. Doctor On Demand offers urgent, behavioral health, preventive health and chronic care—all without leaving the comfort and convenience of your home or workplace.



VALUE-BASED CARE

Through our value-based care initiatives, providers are paid based on their ability to help our members improve their health, reduce the effects and incidence of chronic disease, and live healthier lives. Our value-based care initiatives result in lower costs, improved care, reduced risks, better health outcomes, superior member satisfaction and a healthier workforce for you.

Total Care – A national designation program by Blue Cross that recognizes doctors and hospitals for their efforts in coordinating total patient care. Total Care demonstrates meaningful improvements in diabetes, asthma and cardiovascular disease management. It is also driving a significant increase in preventive care, including pediatric health screenings and immunizations.

CENTERS OF EXCELLENCE

Blue Distinction® Specialty Care – Our nationwide centers of excellence program that makes it easier to maximize quality and savings by encouraging plan members to choose providers who are delivering higher-quality care at a lower cost. Blue Distinction Centers (BDCs) deliver better results, fewer complications and lower readmission rates on 11 high-cost specialty care areas:

- Bariatric surgery
- Cancer care
- Cardiac care
- Cellular immunotherapy – CAR-T
- Fertility care
- Gene therapy – ocular disorders
- Knee and hip replacement
- Maternity care
- Spine surgery
- Substance use treatment and recovery
- Transplants

Blue Distinction addresses the high cost of complex care while improving quality for employees in need of specialty care and procedures.

Blue Distinction Center+ (BDC+) – These providers meet the same quality standards as BDCs while also demonstrating a lower cost of care relative to non-BDC+ providers. **The average savings per episode of care at a BDC+ is more than 20 percent.**

PROVEN RESULTS

Cost savings overall for BDC facilities compared to non-BDC facilities¹

23% BARIATRIC

34%+ TRANSPLANTS

27% SPINE SURGERY

21% KNEE AND HIP REPLACEMENT

¹ BDC+ eligible facilities versus relevant comparison group.

Powerful personalized navigation, support and wellbeing programs

Blue Care Advisor redefines the healthcare journey, changes the way health plan members engage with care, and reduces costs for you, your employees and their enrolled dependents.

Blue Care Advisor, created in collaboration with Castlight Health, surrounds your plan members with personalized guidance, navigation and support. Featuring an ecosystem of personalized online resources and data-driven insights and recommendations, it helps members take the next best step toward better health.

Features include:

One convenient location – Members appreciate the convenience of one online location for benefits, wellbeing programs and care navigation. Through Blue Care Advisor, they can learn more about their health plan benefits, receive healthcare reminders, get the care they need when they need it, and stay on track with their health goals.

Personalized next best action – Powerful technology synthesizes data from historical medical and pharmacy claims, health risk assessment responses, health goals and in-app behaviors to create personalized health recommendations based on an individual's health benefits.

Provider cost and quality transparency –

Data is curated from more than 30 quality data sources to identify providers who are best suited to meet the needs of the member. Comprehensive cost transparency guides members to higher-value providers, reducing costs for both employers and members.

Wellbeing – Blue Care Advisor makes it easy for members to address specific wellbeing needs with a goal-setting tool, an NCQA-certified health assessment, and activity tracking via integrated fitness devices or manual entry.

Incentive program options – Wellbeing incentive programs motivate participants and drive ongoing engagement. When members complete incentivized activities, they earn points to redeem for electronic gift cards.

Blue Care Advisor and our wellbeing programs are designed to reduce absenteeism, strengthen the resiliency of your workforce, prevent disease and injury, enhance morale, and contain your healthcare spend. They ensure that members are getting the most out of their health plan benefits. And they are also an attractive benefit when recruiting top talent.

CONNECT EVERYTHING EMPLOYEES NEED TO MANAGE HEALTHCARE



Data-driven

Predictive analytics, machine learning/artificial intelligence models and real-time recommendations



Transparent

Medical, pharmacy, dental comparison, spend management, provider quality ratings and plan design



Engaging

Fun, interactive challenges, incentives, personalized content, social community, biometric health screenings*



Connected

Seamless connections to all Blue Cross and Blue Shield of Minnesota benefits and programs

Blue Cross and Prime Therapeutics:

The advantages of integrated pharmacy benefits

Prime Therapeutics, the pharmacy benefit manager for Blue Cross, provides affordable, nationwide service and pharmacy access to nearly 38 million plan members. Through real-time data sharing across medical and pharmacy benefits, we offer you a powerful, integrated pharmacy benefit strategy that:

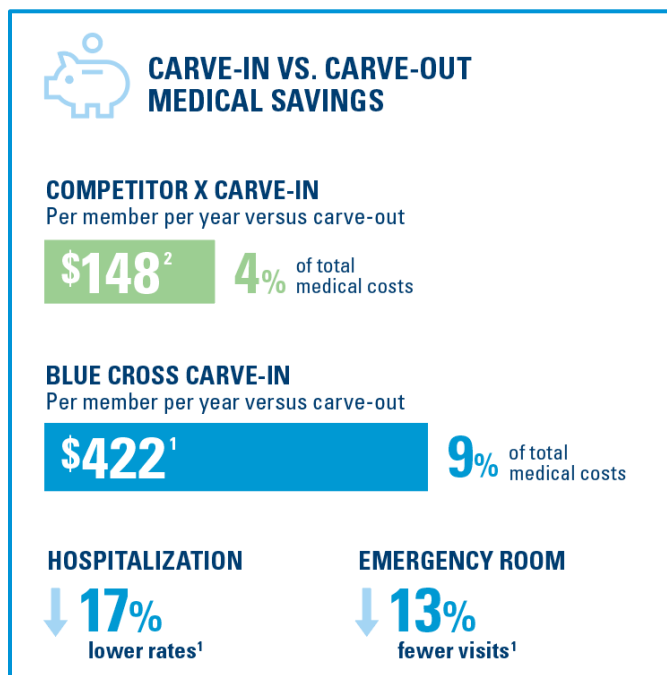
- Reduces both short-term drug costs and total net healthcare costs over time.
- Improves medical management by gaining unprecedented insight into a member's overall health that we can use to identify any potential gaps of care. This allows us to initiate clinical outreach and guidance, such as medication monitoring or case management, when necessary.
- Helps avoid unnecessary procedures. Unnecessary and low-value testing, unwarranted interventions and avoidable pain management procedures can be replaced with proper drug treatment.
- Ensures greater safety and protection when medications, including opioids, are prescribed.

By choosing Blue Cross and Prime, your plan members will experience broad access to 66,000 pharmacies, top-notch member service and the convenience of having their medical and pharmacy information on one I.D. card and one website.

CARVING IN PBM BENEFITS IS KEY TO COST SAVINGS

A recent two-year analysis demonstrated that carving in pharmacy benefits, rather than carving them out, results in medical savings of \$422 per member per year—equivalent to 9 percent of total medical costs.¹

By comparison, the savings generated by the Blue Cross integrated plan was almost three times greater than a well-known competitor's carve-in savings of \$148 per member per year.² Additionally, carve-in data showed a 17 percent lower rate of hospitalization and 13 percent fewer emergency room visits compared to the carve-out model.¹



¹ Gleason, Patrick and Qiu, Yang. Blue Cross and Blue Shield of Minnesota: Pharmacy Benefit Analysis, December 2022.

² Competitor X analysis, 2023.

UNIQUE ADVANTAGES OF OUR INTEGRATED SOLUTION

Administrative ease – Both medical and pharmacy claims payments can be made by our spending account administrator, Further by HealthEquity, allowing you to streamline the number of vendors you work with daily.

Flexibility – Choose from a selection of pharmacy networks, formularies, utilization management strategies and benefit designs that range from lightly to heavily managed.

Cost-saving generics – We increase the utilization of generic drugs through our formularies, benefits and home delivery. For retail pharmacies, we incentivize pharmacists to dispense generics by paying higher dispensing fees and enacting aggressive reimbursement rates for them.

Cost competitiveness – Prime's discounts and rebates are benchmarked in each market to ensure our pricing is always competitive.

Smarter specialty drug management – Our Specialty Pharmacy Network provides deeper discounts and high-touch member support for targeted high-cost drugs typically used to treat chronic conditions.

Pharmacy utilization management – To rein in costs and encourage safe use, utilization management programs are included at no additional cost:

- **Prior authorization** ensures appropriate use and prescribing before a drug will be covered.
- **Quantity limits** control the quantity of medication that can be dispensed over a period of time.
- **Step therapy** requires members to try another drug that may be safer, more clinically effective and, in some cases, less expensive, before a more expensive drug will be approved.
- **Split fill** provides a partial or "split" fill of oral oncology medications with a prorated copay so members can try a drug before spending on a medication they may not be able to tolerate.

Transparency – There are no hidden revenue streams that add to your costs.



One-stop dental, vision and health spending account solutions

Vision – Blue Cross Vision plans leverage the Davis Vision Network which features a strong mix of private practice and optical chains plus four out of the top five optical retailers—Visionworks, Costco, Walmart and Sam's Club. In addition, all plans have embedded enhanced benefits at Visionworks stores. Vision benefits can be offered on a voluntary or nonvoluntary basis.

Dental – Choose from a wide range of competitively priced dental plans to help your employees protect their oral health. Blue Cross Dental plan members have access to the national United Concordia Advantage Plus AXS Network with more than 11,000 access points. All plans include 100 percent coverage for in-network preventive care and discounts on non-covered services provided by nine out of 10 network dentists. Dental plans can be offered on a voluntary or contributory basis.

Spending accounts – Since 1989, Further by HealthEquity has been driving innovation in medical spending accounts. Further's powerful platform provides the convenience of crossover claims integration to seamlessly connect health and finance. A full range of accounts are available, including health savings accounts (HSAs), flexible spending accounts (FSAs) and health reimbursement arrangements (HRAs).

Blue Cross alternative health plan, designed by Coupe Health

Cost certainty and simplicity in value-driven healthcare.

Our alternative health plan, designed by Coupe Health,¹ takes the complexity and uncertainty out of healthcare. It provides plan members with a seamless guided experience through price certainty and quality care.

Using our BlueCard PPO network, its ranked providers and aligned copays encourage members to shop on both price and quality. Members always know the price of services before accessing them. There are no upfront out-of-pocket costs, no provider bills and no confusing Explanations of Benefits (EOBs)—just one simple monthly statement where the amount billed matches the price that they saw up front.

Coupe is a true win-win: employer plan sponsors can spend less on employee health insurance while employees can enjoy a simple and convenient health plan experience.

COUPE HEALTH

- 10% – 20% average plan savings
- Broad network tiered by cost
- Simplified user interface

Davis Vision is an independent company providing vision benefit management services and access to the Davis network. United Concordia Companies, Inc. is an independent company providing dental benefit management services and access to the Blue Cross Blue Shield Medicare Advantage dental network. Further Operations, LLC, a wholly owned subsidiary of HealthEquity, Inc. is an independent company providing account administration services. Coupe Health, LLC is an independent company that provides health plan design services.



Account management you can count on

Our account managers are the first point of contact for your day-to-day needs including everything from billing and reporting questions to healthcare strategy and cost-saving measures.

Our account management team consists of client executives and implementation specialists who understand the healthcare needs of public sector employees, monitor legislative mandates and are expert at working with unions. They also understand the needs public sector groups have in balancing the cost of their employee healthcare benefit with public pressure to be good stewards of taxpayer dollars. Many of our public sector client executives live and work in the communities they serve. They will work closely with you to find ways to keep costs in check, including customized benefit designs, health and wellbeing program options, and region-specific networks that offer the best discounts on healthcare services.

Blue Cross values in action

For more than 90 years, Blue Cross has nurtured deep connections with Minnesotans. We are homegrown, locally operated and committed to the communities we serve.

Over the decades, through community leadership, philanthropy, health literacy efforts, employee volunteerism and grants to social service agencies, we've walked hand in hand with communities facing substantive healthcare disparities. We've helped people get access to better health, healthy food and affordable housing, better education, safer neighborhoods, and family and social support.

In the past year:

- **\$16.5 million** was donated to charitable organizations—99 percent remaining within Minnesota
- Our employees donated almost **\$1 million** to 600 charitable organizations and volunteered more than **14,000 hours** for community causes
- **\$6 million** was granted to 26 community organizations by our Center for Prevention to support health equity, access to nutritious foods, and commercial tobacco control
- More than **534,000 pounds** of food were distributed or donated to individuals, children and families facing food insecurity through our Center for Prevention's Health POWER initiative
- 57 grants, totaling **\$4.4 million**, were provided through the Blue Cross Foundation to support early childhood care and education, safe and welcoming communities, and access to healthcare coverage
- More than **\$5 million** was donated to 40 organizations by the Racial Equity Action Committee for Health

Racism is a public health crisis. Systemic racism has taken a toll on the health of our state and on the physical and mental wellbeing of thousands of Minnesotans. We're making it our business to address the contributing factors to racism. We purposely recruit talent from all races, cultures, gender identifications, sexual orientations and generations to work for Blue Cross. This helps us provide the best quality of care for the diverse populations we serve. We also seek diversity in our suppliers so businesses owned and operated by those who are traditionally underrepresented can grow and prosper, and we can engage with the most talented and capable vendors to fulfill our needs. Externally, through philanthropic and volunteer efforts, we are pitching our corporate strength behind measures to create a more equitable and compassionate society.



Blue Cross was the first health plan in Minnesota designated as a **Beyond the Yellow Ribbon** company for our efforts to hire and retain veterans. We also received the **Above and Beyond Award** from the Employer Support of the Guard and Reserve for excellence in providing benefits to employees who serve in the military and their family members. We work with veterans' organizations to provide the best care and resources to veterans. Blue Cross also provides financial stability and a successful transition into and back from deployment for our employees who serve in the armed forces.

Health and wellbeing programs

	FULLY INSURED	SELF-INSURED
Blue Care AdvisorSM Essential Health and wellbeing platform, personalized care navigation.	Included	Not available
Blue Care AdvisorSM Essential Plus Adds group-level vendor integration/configurability.	Not available	Included
Blue Care AdvisorSM Essential Plus with Incentives Features standard and configurable reward program options and related reporting.	Buy-up	Buy-up
Blue Care AdvisorSM Premium Care navigation and third-party vendor benefit/network design configurability, Customer Success Manager and enhanced concierge member service and care management. Includes Wellness Coaching and Nurse Line.	Buy-up	Buy-up
Blue Care AdvisorSM Premium with Incentives Customizable options include activities (tracking, challenges), structure (points, reward increments) and fulfillment (premium reduction, HSA/HRA, reward center).	Buy-up	Buy-up
Blue Care AdvisorSM Biometric Health Screenings¹ Offered via onsite event, Quest lab, home test kit, flu shot clinic or physician form.	Buy-up	Buy-up
Blue Care AdvisorSM Expert Medical Opinion (Alight)²	Not available	Buy-up
Blue Care AdvisorSM Get Active Program³ (Step/Equivalent Tracking Rewards)	Included	Buy-up
Blue Care AdvisorSM Health Assessments	Included	Included
Blue Care AdvisorSM Wellness Coaching⁴	Buy-up	Buy-up
Care Cost Look Up	Included	Included
Diabetes and Heart Disease Prevention (Omada[®])⁵	Included	Buy-up
Diabetes Management (Omada[®])⁵	Included	Buy-up

¹ Available add-on to the Essential Plus and Premium tiers (with Incentives) as part of a reward program.

Flu shot clinics must be paired with screening option.

² Available add-on to the Essential Plus and Premium tiers (with and without Incentives). Alight provides medical decision support.

³ Included in the Essential and Essential Plus with Incentives tiers.

⁴ Available add-on to the Essential Plus with Incentives tier and included at no additional cost in the Premium tiers.

⁵ Omada Health, Inc. is an independent company providing digital care programs.

	FULLY INSURED	SELF-INSURED
Musculoskeletal (MSK) Condition Management Program (Hinge Health⁶)	Not available	Buy-up
Mental Health First Aid Skills training for recognizing/responding to signs of mental illness/substance use.	Buy-up	Buy-up
Nurse Line⁷	Buy-up	Buy-up
Online Behavioral Health Therapy (Learn to Live⁸)	Included	Buy-up
Online Care (Doctor On Demand⁹)	Included	Included
Quitting Tobacco Support	Included	Included
Standard Case and Chronic Condition Management with Navigation Team Includes maternity and behavioral health.	Included	Included
Utilization Management	Included	Included
Wellness Discount Marketplace (Blue365[®]) Offers significant savings on products and services that complement overall health.	Included	Included

Disclaimer: With ACOs and other Narrow Networks, exclusions apply.



A SOLUTION FOR RETIREE BENEFITS

Help your employees transition into retirement and fill the gaps in Original Medicare with a Group Medicare plan. Our Group Medicare health plan options are designed for many kinds of employees and organizations—from publicly and privately held corporations to nonprofits and public sector entities. We have a variety of plan options available to fit your needs. We're ready to help you choose the best plans for your retirees.

⁶ Hinge Health is an independent company providing musculoskeletal care services.

⁷ Health Dialog is an independent company providing symptom check support services through its Nurse Advice Line.

⁸ Learn to Live, Inc. is an independent company offering online tools and programs for behavioral health support.

⁹ Doctor On Demand by Included Health is an independent company offering telehealth services from Board-certified providers.

South Koochiching Rainey River ISD 363

Coverage Effective Date: 07/01/2025

Rate Summary

	Total		T25075 Aware HSA \$3,300 Ded 0% Coins	T25032 Aware \$500 Ded 20% Coins	T25049 Aware \$1,500 Ded 20% Coins
Health Plan Structure	--		CMM	CMM	CMM
Health Plan Actuarial Value					
Using MV calculator *	--		0.732	0.846	0.768
Using AV calculator	--		0.807	0.893	0.819
Provider Network Type	--		Broad	Broad	Broad
Commissions (PMPM)	\$0.00		\$0.00	\$0.00	\$0.00
Total Premium, First 12 Mos, Excl Commissions	\$311,021		\$236,947	\$51,582	\$22,492
Total Premium, Excl Commissions (PMPM)	\$785.41		\$731.32	\$1,074.63	\$937.16
Expected Members	33		27	4	2
Expected Contracts by Tier					
Single	18		12	4	2
Family	4		4	0	0

* The required Minimum Value calculator has not been updated since 2013 and does not reflect current minimum value definitions

South Koochiching Rainey River ISD 363

Proposal Rates

Coverage Effective Date: 07/01/2025

Months In Proposed Plan 12

		Total Contracts	22	Proposed Rates
PLAN 1	T25075 Aware HSA \$3,300 Ded 0% Coins	Single Family	12	\$870.28
			4	\$2,325.56
			Plan Total	\$236,947
PLAN 2	T25032 Aware \$500 Ded 20% Coins	Single Family	4	\$1,074.63
			0	\$2,871.62
			Plan Total	\$51,582
PLAN 3	T25049 Aware \$1,500 Ded 20% Coins	Single Family	2	\$937.16
			0	\$2,504.28
			Plan Total	\$22,492
			Group Total	\$311,021

- No agent commission included in rates

TURN KEY RATES

Effective Date: 07/01/2025

AWARE NETWORK OPTIONS

Plan	Description	Single	Family
Deductible Copay Plans			
T25001	\$0/\$0 Ded, 10%, \$2,500/\$5,000 OOPM, OV-\$25, Rx-20/50/75/120, Aware	\$1,204.69	\$3,219.19
T25032	\$500/\$1,500 Ded, 20%, \$2,000/\$4,000 OOPM, OV-\$25, Rx-20/50/75/120, Aware	\$1,074.63	\$2,871.62
T25110	\$500/\$1,500 Ded, 30%, \$4,000/\$8,000 OOPM, OV-\$40, Rx-20/50/75/120, Aware	\$1,011.58	\$2,703.14
T25613	\$500/\$1,000 Ded, 30%, \$5,250/\$10,500 OOPM, OV-\$35/\$70, Rx-20/50/75/120, Aware	\$1,005.10	\$2,685.83
T25046	\$1,000/\$3,000 Ded, 20%, \$3,000/\$6,000 OOPM, OV-\$25, Rx-20/50/75/120, Aware	\$997.04	\$2,664.29
T25111	\$1,000/\$3,000 Ded, 30%, \$5,000/\$10,000 OOPM, OV-\$40, Rx-20/50/75/120, Aware	\$941.92	\$2,517.00
T25615	\$1,000/\$2,000 Ded, 30%, \$5,250/\$10,500 OOPM, OV-\$35/\$70, Rx-20/50/75/120, Aware	\$954.87	\$2,551.61
T25049	\$1,500/\$4,500 Ded, 20%, \$4,000/\$8,000 OOPM, OV-\$25, Rx-20/50/75/120, Aware	\$937.16	\$2,504.28
T25050	\$2,000/\$6,000 Ded, 30%, \$4,500/\$9,000 OOPM, OV-\$40, Rx-20/50/75/120, Aware	\$880.06	\$2,351.69
T25617	\$2,000/\$4,000 Ded, 30%, \$5,250/\$10,500 OOPM, OV-\$35/\$70, Rx-20/50/75/120, Aware	\$884.95	\$2,364.76
T25051	\$2,500/\$7,500 Ded, 20%, \$5,500/\$11,000 OOPM, OV-\$40, Rx-20/50/75/120, Aware	\$848.86	\$2,268.34
T25027	\$4,000/\$12,000 Ded, 30%, \$9,200/\$18,400 OOPM, OV-\$40, Rx-20/50/75/120, Aware	\$722.76	\$1,931.37
Deductible with Rx Copay Plans			
T25002	\$500/\$1,500 Ded, 20%, \$2,500/\$5,000 OOPM, OV-D/C, Rx-20/50/75/120, Aware	\$1,027.31	\$2,745.17
T25066	\$1,000/\$3,000 Ded, 30%, \$3,500/\$7,000 OOPM, OV-D/C, Rx-20/50/75/120, Aware	\$941.26	\$2,515.23
T25006	\$1,500/\$4,500 Ded, 20%, \$4,000/\$8,000 OOPM, OV-D/C, Rx-20/50/75/120, Aware	\$912.05	\$2,437.17
T25112	\$2,500/\$7,500 Ded, 20%, \$5,500/\$11,000 OOPM, OV-D/C, Rx-20/50/75/120, Aware	\$831.55	\$2,222.06
T25118	\$4,000/\$12,000 Ded, 30%, \$7,000/\$14,000 OOPM, OV-D/C, Rx-20/50/75/120, Aware	\$742.99	\$1,985.41
T25036	\$5,000/\$15,000 Ded, 30%, \$9,200/\$18,400 OOPM, OV-D/C, Rx-20/50/75/120, Aware	\$683.11	\$1,825.41
HSA-Compatible Plans with 100% Coinsurance			
T25030*	\$2,000/\$4,000 Ded, 0%, \$2,000/\$4,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$959.76	\$2,564.68
T25075	\$3,300/\$6,600 Ded, 0%, \$3,300/\$6,600 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$870.28	\$2,325.56
T25068	\$3,500/\$7,000 Ded, 0%, \$3,500/\$7,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$856.53	\$2,288.82
T25081	\$4,000/\$8,000 Ded, 0%, \$4,000/\$8,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$824.28	\$2,202.64
T25069**	\$4,500/\$9,000 Ded, 0%, \$4,500/\$9,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$794.93	\$2,124.22
T25083**	\$5,000/\$10,000 Ded, 0%, \$5,000/\$10,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$767.84	\$2,051.82
T25122**	\$5,500/\$11,000 Ded, 0%, \$5,500/\$11,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$742.72	\$1,984.71
T25015**	\$6,000/\$12,000 Ded, 0%, \$6,000/\$12,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$719.46	\$1,922.54
T25124**	\$6,500/\$13,000 Ded, 0%, \$6,500/\$13,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$697.52	\$1,863.91
T25134**	\$7,000/\$14,000 Ded, 0%, \$7,000/\$14,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$677.29	\$1,809.87
T25105**	\$8,300/\$16,600 Ded, 0%, \$8,300/\$16,600 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$629.84	\$1,683.06
HSA-Compatible Plans with 100% Coinsurance and Value Based Design			
T25030P*	\$2,000/\$4,000 Ded, 0%, \$2,000/\$4,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$964.13	\$2,576.34
T25619P*	\$2,700/\$5,400 Ded, 0%, \$2,700/\$5,400 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$900.68	\$2,406.80
T25075P	\$3,300/\$6,600 Ded, 0%, \$3,300/\$6,600 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$875.96	\$2,340.74
T25068P	\$3,500/\$7,000 Ded, 0%, \$3,500/\$7,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$862.35	\$2,304.36
T25081P	\$4,000/\$8,000 Ded, 0%, \$4,000/\$8,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$830.89	\$2,220.30
T25069P	\$4,500/\$9,000 Ded, 0%, \$4,500/\$9,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$801.94	\$2,142.95
T25083P**	\$5,000/\$10,000 Ded, 0%, \$5,000/\$10,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$775.37	\$2,071.95
T25122P**	\$5,500/\$11,000 Ded, 0%, \$5,500/\$11,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$750.65	\$2,005.90
T25015P**	\$6,000/\$12,000 Ded, 0%, \$6,000/\$12,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$727.79	\$1,944.79
T25124P**	\$6,500/\$13,000 Ded, 0%, \$6,500/\$13,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$706.37	\$1,887.57
T25134P**	\$7,000/\$14,000 Ded, 0%, \$7,000/\$14,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$686.55	\$1,834.59
T25105P**	\$8,300/\$16,600 Ded, 0%, \$8,300/\$16,600 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$640.02	\$1,710.26

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South Koochiching Rainey River ISD 363

TURN KEY RATES

Effective Date: 07/01/2025

AWARE NETWORK OPTIONS (cont)

Plan	Description	Single	Family
HSA-Compatible Plans			
T25025*	\$2,000/\$4,000 Ded, 25%, \$3,000/\$6,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$912.18	\$2,437.53
T25060	\$3,300/\$6,600 Ded, 25%, \$4,500/\$9,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$827.32	\$2,210.76
T25071	\$3,500/\$7,000 Ded, 25%, \$5,400/\$10,800 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$797.71	\$2,131.64
T25079	\$4,000/\$8,000 Ded, 25%, \$6,000/\$12,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$767.57	\$2,051.11
T25100**	\$4,500/\$9,000 Ded, 25%, \$8,300/\$16,600 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$711.53	\$1,901.35
T25090**	\$5,000/\$10,000 Ded, 25%, \$8,300/\$16,600 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$696.06	\$1,860.02
T25093**	\$6,000/\$12,000 Ded, 25%, \$8,300/\$16,600 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$669.63	\$1,789.38
T25130**	\$6,500/\$13,000 Ded, 25%, \$8,300/\$16,600 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$658.52	\$1,759.71
HSA-Compatible Plans with Value Based Design			
T25025P*	\$2,000/\$4,000 Ded, 25%, \$3,000/\$6,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$916.67	\$2,449.53
T25060P	\$3,300/\$6,600 Ded, 25%, \$4,500/\$9,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$833.13	\$2,226.30
T25071P	\$3,500/\$7,000 Ded, 25%, \$5,400/\$10,800 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$803.79	\$2,147.89
T25079P	\$4,000/\$8,000 Ded, 25%, \$6,000/\$12,000 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$774.18	\$2,068.77
T25100P**	\$4,500/\$9,000 Ded, 25%, \$8,300/\$16,600 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$719.20	\$1,921.83
T25090P**	\$5,000/\$10,000 Ded, 25%, \$8,300/\$16,600 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$703.86	\$1,880.86
T25093P**	\$6,000/\$12,000 Ded, 25%, \$8,300/\$16,600 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$678.09	\$1,811.98
T25130P**	\$6,500/\$13,000 Ded, 25%, \$8,300/\$16,600 OOPM, OV-D/C, Rx-D/C, HSA, Aware	\$667.25	\$1,783.02
Deductible Plans			
T25042**	\$9,200/\$18,400 Ded, 0%, \$9,200/\$18,400 OOPM, OV-D/C, Rx-D/C, Aware	\$589.53	\$1,575.33

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South Koochiching Rainey River ISD 363

TURN KEY RATES

Effective Date: 07/01/2025

HIGH VALUE NETWORK OPTIONS

Plan	Description	Single	Family
Deductible Copay Plans			
T25621	\$0/\$0 Ded, 10%, \$2,500/\$5,000 OOPM, OV-\$25, Rx-20/50/75/120, High Value	\$1,105.56	\$2,954.28
T25034	\$500/\$1,500 Ded, 20%, \$2,000/\$4,000 OOPM, OV-\$25, Rx-20/50/75/120, High Value	\$986.20	\$2,635.32
T25113	\$500/\$1,500 Ded, 30%, \$4,000/\$8,000 OOPM, OV-\$40, Rx-20/50/75/120, High Value	\$928.31	\$2,480.62
T25614	\$500/\$1,000 Ded, 30%, \$5,250/\$10,500 OOPM, OV-\$35/\$70, Rx-20/50/75/120, High Value	\$922.36	\$2,464.72
T25047	\$1,000/\$3,000 Ded, 20%, \$3,000/\$6,000 OOPM, OV-\$25, Rx-20/50/75/120, High Value	\$914.95	\$2,444.94
T25114	\$1,000/\$3,000 Ded, 30%, \$5,000/\$10,000 OOPM, OV-\$40, Rx-20/50/75/120, High Value	\$864.46	\$2,310.02
T25616	\$1,000/\$2,000 Ded, 30%, \$5,250/\$10,500 OOPM, OV-\$35/\$70, Rx-20/50/75/120, High Value	\$876.23	\$2,341.45
T25076	\$1,500/\$4,500 Ded, 20%, \$4,000/\$8,000 OOPM, OV-\$25, Rx-20/50/75/120, High Value	\$859.97	\$2,298.01
T25077	\$2,000/\$6,000 Ded, 30%, \$4,500/\$9,000 OOPM, OV-\$40, Rx-20/50/75/120, High Value	\$807.62	\$2,158.13
T25618	\$2,000/\$4,000 Ded, 30%, \$5,250/\$10,500 OOPM, OV-\$35/\$70, Rx-20/50/75/120, High Value	\$812.12	\$2,170.14
T25052	\$2,500/\$7,500 Ded, 20%, \$5,500/\$11,000 OOPM, OV-\$40, Rx-20/50/75/120, High Value	\$778.94	\$2,081.49
T25028	\$4,000/\$12,000 Ded, 30%, \$9,200/\$18,400 OOPM, OV-\$40, Rx-20/50/75/120, High Value	\$663.28	\$1,772.42
Deductible with Rx Copay Plans			
T25033	\$500/\$1,500 Ded, 20%, \$2,500/\$5,000 OOPM, OV-D/C, Rx-20/50/75/120, High Value	\$942.71	\$2,519.12
T25035	\$1,000/\$3,000 Ded, 30%, \$3,500/\$7,000 OOPM, OV-D/C, Rx-20/50/75/120, High Value	\$863.80	\$2,308.25
T25031	\$1,500/\$4,500 Ded, 20%, \$4,000/\$8,000 OOPM, OV-D/C, Rx-20/50/75/120, High Value	\$836.97	\$2,236.55
T25115	\$2,500/\$7,500 Ded, 20%, \$5,500/\$11,000 OOPM, OV-D/C, Rx-20/50/75/120, High Value	\$763.08	\$2,039.10
T25119	\$4,000/\$12,000 Ded, 30%, \$7,000/\$14,000 OOPM, OV-D/C, Rx-20/50/75/120, High Value	\$681.79	\$1,821.87
T25037	\$5,000/\$15,000 Ded, 30%, \$9,200/\$18,400 OOPM, OV-D/C, Rx-20/50/75/120, High Value	\$626.93	\$1,675.29
HSA-Compatible Plans with 100% Coinsurance			
T25038*	\$2,000/\$4,000 Ded, 0%, \$2,000/\$4,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$880.72	\$2,353.46
T25041	\$3,300/\$6,600 Ded, 0%, \$3,300/\$6,600 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$798.64	\$2,134.11
T25072	\$3,500/\$7,000 Ded, 0%, \$3,500/\$7,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$786.08	\$2,100.56
T25082	\$4,000/\$8,000 Ded, 0%, \$4,000/\$8,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$756.47	\$2,021.44
T25073**	\$4,500/\$9,000 Ded, 0%, \$4,500/\$9,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$729.51	\$1,949.38
T25084**	\$5,000/\$10,000 Ded, 0%, \$5,000/\$10,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$704.66	\$1,882.98
T25123**	\$5,500/\$11,000 Ded, 0%, \$5,500/\$11,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$681.66	\$1,821.52
T25044**	\$6,000/\$12,000 Ded, 0%, \$6,000/\$12,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$660.24	\$1,764.30
T25125**	\$6,500/\$13,000 Ded, 0%, \$6,500/\$13,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$640.15	\$1,710.61
T25135**	\$7,000/\$14,000 Ded, 0%, \$7,000/\$14,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$621.51	\$1,660.81
T25106**	\$8,300/\$16,600 Ded, 0%, \$8,300/\$16,600 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$578.03	\$1,544.60
HSA-Compatible Plans with 100% Coinsurance and Value Based Design			
T25038P*	\$2,000/\$4,000 Ded, 0%, \$2,000/\$4,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$884.82	\$2,364.41
T25620P*	\$2,700/\$5,400 Ded, 0%, \$2,700/\$5,400 OOPM, OV-D/C, Rx-D/C, High Value	\$826.53	\$2,208.64
T25041P	\$3,300/\$6,600 Ded, 0%, \$3,300/\$6,600 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$803.92	\$2,148.24
T25072P	\$3,500/\$7,000 Ded, 0%, \$3,500/\$7,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$791.37	\$2,114.69
T25082P	\$4,000/\$8,000 Ded, 0%, \$4,000/\$8,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$762.55	\$2,037.69
T25073P	\$4,500/\$9,000 Ded, 0%, \$4,500/\$9,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$735.98	\$1,966.69
T25084P**	\$5,000/\$10,000 Ded, 0%, \$5,000/\$10,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$711.53	\$1,901.35
T25123P**	\$5,500/\$11,000 Ded, 0%, \$5,500/\$11,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$688.93	\$1,840.95
T25044P**	\$6,000/\$12,000 Ded, 0%, \$6,000/\$12,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$667.91	\$1,784.79
T25125P**	\$6,500/\$13,000 Ded, 0%, \$6,500/\$13,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$648.21	\$1,732.16
T25135P**	\$7,000/\$14,000 Ded, 0%, \$7,000/\$14,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$630.11	\$1,683.77
T25106P**	\$8,300/\$16,600 Ded, 0%, \$8,300/\$16,600 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$587.28	\$1,569.33

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South Koochiching Rainey River ISD 363

TURN KEY RATES

Effective Date: 07/01/2025

HIGH VALUE NETWORK OPTIONS (cont)

Plan	Description	Single	Family
HSA-Compatible Plans			
T25053*	\$2,000/\$4,000 Ded, 25%, \$3,000/\$6,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$837.10	\$2,236.90
T25061	\$3,300/\$6,600 Ded, 25%, \$4,500/\$9,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$759.25	\$2,028.86
T25074	\$3,500/\$7,000 Ded, 25%, \$5,400/\$10,800 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$732.02	\$1,956.10
T25080	\$4,000/\$8,000 Ded, 25%, \$6,000/\$12,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$704.39	\$1,882.27
T25101**	\$4,500/\$9,000 Ded, 25%, \$8,300/\$16,600 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$652.97	\$1,744.87
T25091**	\$5,000/\$10,000 Ded, 25%, \$8,300/\$16,600 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$638.83	\$1,707.08
T25094**	\$6,000/\$12,000 Ded, 25%, \$8,300/\$16,600 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$614.51	\$1,642.09
T25131**	\$6,500/\$13,000 Ded, 25%, \$8,300/\$16,600 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$604.33	\$1,614.89
HSA-Compatible Plans with Value Based Design			
T25053P*	\$2,000/\$4,000 Ded, 25%, \$3,000/\$6,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$841.20	\$2,247.85
T25061P	\$3,300/\$6,600 Ded, 25%, \$4,500/\$9,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$764.53	\$2,042.99
T25074P	\$3,500/\$7,000 Ded, 25%, \$5,400/\$10,800 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$737.70	\$1,971.28
T25080P	\$4,000/\$8,000 Ded, 25%, \$6,000/\$12,000 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$710.47	\$1,898.52
T25101P**	\$4,500/\$9,000 Ded, 25%, \$8,300/\$16,600 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$659.98	\$1,763.59
T25091P**	\$5,000/\$10,000 Ded, 25%, \$8,300/\$16,600 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$645.97	\$1,726.15
T25094P**	\$6,000/\$12,000 Ded, 25%, \$8,300/\$16,600 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$622.31	\$1,662.93
T25131P**	\$6,500/\$13,000 Ded, 25%, \$8,300/\$16,600 OOPM, OV-D/C, Rx-D/C, HSA, High Value	\$612.39	\$1,636.44
Deductible Plans			
T25043**	\$9,200/\$18,400 Ded, 0%, \$9,200/\$18,400 OOPM, OV-D/C, Rx-D/C, High Value	\$541.02	\$1,445.70

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Contingencies & Assumptions

We base rates on group makeup, including age and area, employer contribution assumptions, historic claims costs, a forecast of future claims costs, administrative costs, taxes and assessments.

- 1) Rates are contingent upon the Blue Cross plans being the only health plans you offer.
- 2) Rates are based upon the benefit description and expected enrollment shown for each plan.
We reserve the right to make changes to the rates if you request different benefits,
if your actual enrollment varies from expected by more than 10%,
or if there is a change to age or area mix of greater than 5%.
- 3) Minimum enrollment is 50% of all eligible employees regardless of waivers.
- 4) Employees who work a normal work week of less than 30 hours per week are not eligible for coverage unless Blue Cross provides the group an exception to the 30 hour requirement.
In no case will an exception be granted for employees working less than 20 hours per week.
- 5) You must contribute at least 50 percent of the single rate for the lowest cost health plan offered to each employee.
- 6) Quoted rates are subject to change if released more than 120 days before the proposed effective date of the plan.
- 7) If you choose more than one benefit option, each plan must have a minimum enrollment of 1 contract.
- 8) Consulting / service fees, if applicable, are reflected on the rate display.
- 9) An electronic Summary of Benefits (SBC) document will be provided by Blue Cross. You must finalize your benefit design at least 30 days prior to open enrollment or 60 days prior to the effective date in order to have SBC's available by the due date. You are responsible for any penalties associated with noncompliance if your benefit plan is not finalized in a timely manner.
- 10) For HRA and HSA plans, an additional fee to administer the personal spending account may be charged by the selected vendor.

This proposal expires on the last day of the month before the effective date.

If you furnished us with incomplete or inaccurate information, we may revise our proposal at any time before the Effective Date, even though you may have already accepted our proposal offer.

Please note these requirements constitute material terms of our offer.

All assumptions must remain valid throughout the term of your contract.

Failure to comply with any of the requirements may result in cancellation, non-renewal, or change in rates or benefits.



2025 FEE SCHEDULE

Health and Wellbeing Solutions – Fully Insured



Solution	Fees
Care Cost Look Up	No additional charge
Quitting Tobacco Support ^{2 4}	No additional charge
Blue Care Advisor SM	For fees related to Blue Care Advisor optimal health and wellbeing and personalized member care navigation, see the Blue Care Advisor Fee Schedule.
Standard Case Management <ul style="list-style-type: none"> Case and Condition Management Maternity Management Navigation Team 	No additional charge Contact your Blue Cross representative with questions.
Utilization Management	No additional charge
Wellness Discount Marketplace (Blue365)	No additional charge
Online Care (Doctor on Demand)	No additional charge. Member claims are paid according to the benefit design.
Online Behavioral Health Therapy (Learn to Live) ^{3 4}	No additional charge
Omada Health ¹ <ul style="list-style-type: none"> Omada for Prevention Omada for Diabetes Management Omada for Hypertension 	No additional charge
MOBE ⁵	No additional charge
Musculoskeletal (MSK) Condition Management Program (Hinge Health) ¹³	Available for Turnkey+ clients only. 90 days and 51 members minimum required for implementation. Contact your Blue Cross Representative for offerings and fees.
Nurse Line	\$0.97 per contract per month 60 days minimum required for implementation.
Associate (non-health plan) Membership <ul style="list-style-type: none"> Online Health and Wellbeing Platform ¹ <ul style="list-style-type: none"> Health Assessment Online Tools and Education Quitting Tobacco Support ⁴ 	\$0.50 per contract per month 60 days minimum is required for implementation. For fees related to Blue Care Advisor optimal health and wellbeing and personalized member care navigation, see the Blue Care Advisor Fee Schedule.

¹ Eligible Members must be 18 years of age or older.

² Available to Associate Members. For Online Behavioral Health Therapy (Learn to Live) and Health Screenings, refer to Associate Membership detail for applicable fees in addition to specific program fees. Please contact your Blue Cross representative with questions.

³ Available for non-Blue members without the purchase of Associate Membership. Applicable non-blue implementation and program fees will apply. Non-Blue members will **NOT** have access to Quitting Tobacco Support.

⁴ Must be 13 years of age or older to participate.

⁵ Only applies to applicable members that meet the MOBE criteria.

Updated 5/8/2024

2025 FEE SCHEDULE

BLUE CARE ADVISOR SM



Tier	Solution / Description	Fees
<u>Essential</u> <i>Fully Insured, Level-funded and Stability</i> Includes Small Group, Mid-market, and Large Group employers with turnkey, turnkey plus, or custom plans	Care Navigation / Online Health and Wellbeing / Get Active Program <ul style="list-style-type: none"> Optimal health and wellbeing platform with personalized member care navigation Supportive online tools and resources Get Active Reward Program – incentives for completing the Health Assessment and Steps/Step Equivalent Tracking Quitting tobacco support Next best actions, supporting user needs and interests. No customizable vendor integration or configurability at a group level No buy-ups 	Included – no additional cost. Blue Cross funds incentives up to \$240 annually (select electronic gift cards) for each eligible participant on the Blue Cross health plan contract.
<u>Essential Plus</u> <i>Self-insured</i> Includes self-insured Large and National Groups	Care Navigation / Online Health and Wellbeing <ul style="list-style-type: none"> Optimal health and wellbeing platform with personalized member care navigation Supportive online tools and resources Health Assessment Quitting tobacco support Next best actions, supporting user needs and interests Vendor integration available at a group level 	Included – no additional cost. Contact your Blue Cross representative with questions.
<u>Essential Plus with Incentives</u> <i>Available for self-insured and select fully insured</i>	All Essential Plus features with Incentive Program Options (Select one – see Fees): *Get Active Reward Program – incentives for completing the Health Assessment and Steps/Step Equivalent Tracking <ul style="list-style-type: none"> Default incentive program for fully insured clients Buy-up program for self-insured clients Fully insured clients may opt out of Get Active Rewards and purchase Best Practice or Configurable Rewards. <i>(4-month implementation preferred)</i> **Best Practice Reward Program – standard incentives for select components (not configurable): <ul style="list-style-type: none"> Health Assessment Healthy Habits Activity Tracking (Steps/Step Equivalents, Nutrition, Sleep) Earn and Explore Health Check Preventive Care Program Quest Health Biometric Screenings (Optional – fees below) <i>(4-month implementation preferred)</i> Wellness Coaching (non-incentivized) may be added for an additional fee – see Fees.	*Get Active Reward Program: No cost for fully insured. \$0.65 per contract per month (PCPM) for self-insured for the entire plan year. For fully insured, Blue Cross funds incentives (e-gift cards) up to \$240 annually for each eligible participant on the Blue Cross health plan. For self-insured, the employer funds incentives. **Best Practice Reward Program: \$0.65 PCPM for the entire plan year. Employer funds incentives/ rewards for qualifying members. If Sweepstakes are offered as a Best Practice option, a minimum \$2,000 annual contribution is required, funded by the employer. Wellness Coaching – \$0.20 PCPM

Tier	Solution / Description	Fees
<u>Premium</u>	Configurable Care Navigation / Online Health and Wellbeing / Concierge-level Advocacy <ul style="list-style-type: none"> • Optimal health and wellbeing platform with personalized member care navigation • Supportive online tools and resources • Health Assessment • Next best actions, supporting user needs and interests. • Customer Success Manager to drive strategy, implementation and evaluation • Configurability with third-party vendors not currently part of the Blue Care AdvisorSM ecosystem (benefit/network design) • Enhanced integrated member service and clinical support • Nurse Line, Quitting Tobacco Support and Wellness Coaching included • Performance guarantees including return on investment (ROI) • Client-customized communication campaigns • Mission Control reporting access included <i>(6-month implementation preferred)</i>	Contact your Blue Cross representative for pricing. <p>Minimum of 1,000 members required. Must be purchased for the entire membership (for example, including retirees).</p>
<u>Premium with Incentives</u>	All Premium features with Incentive Program Options: <ul style="list-style-type: none"> • Incentives program including customization of program components, points, reward increments and fulfillment options (employer-sponsored premium reduction, HSA/HRA) • Rewardable activities within the expanded ecosystem • Participation in an employer-sponsored event • Milestone functionality and flexibility • Specific rewards for specific activities • Quest Health Biometric Screenings (Optional – fees below) <i>(6-month implementation preferred)</i>	Contact your Blue Cross representative for pricing. <p>Employer to confirm reward program components, based on Best Practice Rewards, with configuration available. Employer funds incentives/ rewards for qualifying members.</p> <p>Minimum of 1,000 members required. Must be purchased for the entire membership (for example, including retirees).</p>
<u>Non-buy-up Participant Reports</u>	For employers providing self-administered incentive programs, up to two reports per year will be available for Health Assessment and/or Preventive Exam completion.	Contact your Blue Cross representative for pricing.
<u>Biometric Health Screenings</u> <p><i>Available in Essential Plus with Incentives and Premium with Incentives as part of a Reward program</i></p>	Quest Health Biometric Screening Opportunities <ul style="list-style-type: none"> • Onsite Events: Fingerstick • Onsite Events: Venipuncture • Quest Labs: Venipuncture • At-home Test Kits • Physician Forms* • Physician Form Denials • Flu Shot Clinics* <p>*Must be paired with onsite events, Quest labs or at-home kits. <i>(90-day implementation required)</i></p>	<p>\$52.00 per participant \$57.00 per participant \$57.00 per participant \$60.00 per participant \$18.75 per participant \$11.00 per participant \$43.00 per participant</p> <p>Minimum participation required.</p>
<u>Expert Medical Opinion and Decision Support</u> <p><i>Available for self-insured</i></p>	ConsumerMedical/Alight <p>Fully integrated expert medical opinion and surgery decision support services within the Blue Care Advisor experience</p>	See the 2025 ConsumerMedical/Alight Fee Schedule.
<u>Associate Membership</u> <p>(Non-Blue Health Plan Members)</p>	Online Health and Wellbeing Platform <ul style="list-style-type: none"> • Health Assessment • Supportive online tools and resources Quitting Tobacco Support	Associate Membership \$0.50 PCPM <p><i>Best Practice and Configurable Rewards and Biometric Health Screenings are available for program fees combined with Associate Membership.</i></p>