Coordinated care that everybody can count on

A connected approach that brings coverage and care together

2027 | **Excellus BlueCross BlueShield Small Business Plan Designs**

Excellus

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SECTION 1

Our approach

1. People come first
2. Service is simple
3. Our network is unmatched. Period.

Coordinated care.
Complete coverage.
Greater value.
Everybody benefits.

Health care works best when it works together. That's why Excellus BCBS provides a coordinated, caring, personalized and holistic health insurance experience that connects the dots for you and your employees, improving care and helping to manage costs for everyone.

So how do we do it?

Our approach is built around three ideas:

1

People come first

We address all types of member health conditions personally and proactively, with comprehensive programs and a combination of medical expertise and data.

2

Service is simple

We make it easier for members to understand their benefits, and we help make claims management and processing more efficient and transparent for employers.

3

Our network is unmatched. Period.

We bring the largest network to you and your employees, covering a wide range of providers across the country.

Our approach

1

People come first

So members get care that's built just for them

Sounds obvious, right? But at Excellus BCBS, we're working to prove it every day. We're talking about comprehensive programs that address all aspects of member wellbeing — including care management and disease management programs for:

- **Diabetes**
- **Behavioral health**
- **Oncology**
- **Cardiac conditions**
- **Pharmacy utilization**
- **Chronic kidney disease**
- **High-cost claimants**
- **And more**

Through a combination of referrals, direct outreach, sophisticated data analytics and coordination with providers, **we tailor our approach to each member's specific needs — assessing the whole person to develop a personalized care plan.** And we emphasize proactive and preventive care, encouraging members to use their plan to stay ahead of issues.

That way, members become invested in their health, set goals, and take necessary steps toward managing their conditions and overall wellness — leading to higher overall member satisfaction.

97%
member satisfaction
with care management programs*

Members that engage in care management/disease management see:

41%
reduction in emergency department visits**

32%
reduction in readmissions**

52%
reduction in inpatient admissions**

65%
reduction in preventable inpatient admissions**

An average baseline cost savings of $1,500 per engagement*

*Member reported satisfaction outcomes are based on 2025 CM/DM satisfaction surveys sent at time of case closure and represent Commercial members engaged in Case Management.
**Management Outcomes data based on 2024 claims experience for Commercial members engaged in CM/DM.

Member story

Delivering the right help to live healthier

The setting:

A 36-year-old female with type 2 diabetes, Mia* was looking for ways to help manage her condition by losing weight and reducing her blood sugar levels.

The solution:

Mia began working with a case manager via phone calls and using the Wellframe® app. Together, they discussed the benefits of carbohydrate counting, proper portion sizes, and exercise to help her make healthier lifestyle choices. Instead of going out to eat for most meals, Mia now cooks at home at least three days a week. She also began exercising on her lunch break, and she found additional motivation by joining a web-based exercise challenge.

The results:

Time spent working with Excellus BCBS Care Manager:

6 months

Amount of weight that Mia has lost so far:

18 pounds

Decrease in average blood sugar levels:

9.1% to 6.9%

* Member name has been changed.

2

Service is simple

So everyone has the support they need to thrive

Strong benefits and member cards that open doors are essential, but we know that how happy members and employers are with their health plans ultimately comes down to the experience we deliver in real life, every day. That's why we work hard to provide next-level service for everyone.

We're here to help members understand their benefits and know how to use them, ensuring any **questions are answered quickly and clearly:**

of all customer care inquiries are closed within 10 days*

* 2024 Health Plan data

We make things easy for employers too — with a focus on transparency, consistency, and claims processing that avoids frustrations and drives savings:

30 million
claims processed in 2024
(More than 1 million processed through automation)**

99.9%
of claims processed within 30 days**

~$87.5 million
prepay savings annually**

$146 million
postpay savings annually**

** 2024 Health Plan data

Our approach

For employer groups, better service means better outcomes

A more seamless support experience makes a big difference, and no one can speak to it better than the people we work with every day.

2024 Employer Group satisfaction:

90% ease of doing business*

93% claims processing*

98% enrollment*

* Health Plan data, mid/large employers (>100 contracts)

What our clients are saying:

"Carestream has been with Excellus BCBS since 2019. With over 90% of Carestream employees on our medical plan, and with employees in most states, we needed the right partner to provide quality health care to our geographically diverse workforce. Excellus BCBS has been proactive, extremely responsive to our requests and a partner who truly works to understand our unique needs."

Kristen Goodman
Director of Global Benefits & HR Carestream Health

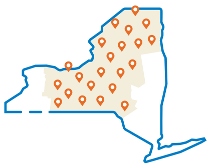
Our approach

3

Our network is unmatched. Period.

So the right care is always in easy reach

When you work with the largest health plan provider in the region, the benefits are everywhere. No matter where they go, our members have access to the high-quality care they need, at a price we work hard to keep affordable:



99%

in-area physician participation[1]

Access to the largest hospital and physician networks in the U.S., with

more than 2 million

unique, in-network providers[2]

Global network with providers in more than

190 countries[2]

1 2025 Health Plan data
2 Blue Cross Blue Shield Association, January 2024

It goes beyond in-person visits too:

Vori Health Virtual Physical Therapy for musculoskeletal (MSK) conditions[3]

MD Live® telemedicine for 24/7 access to both physical and behavioral health care

3 Embedded for Fully Insured groups, Buy-up for Self-Funded groups

2024 Employer Group Satisfaction:

98% satisfaction with the network[4]

4 2024 Health Plan Employer Loyalty Survey, Mid/Large Employers (>100 contracts)

Our approach

Accountable Cost and Quality Agreements

Excellus BCBS also collaborates with providers to improve care through Accountable Cost and Quality Agreements (ACQAs). These agreements compensate providers for the quality and efficiency of care they provide — not the quantity.

The result is lower costs and better outcomes for people throughout our communities. Providers engaged in ACQAs achieved[1]:

Nearly 17% fewer

emergency department visits

resulting in an average annual savings of $3.1 million.

$158.3 million

savings through clinical and pharmacy initiatives

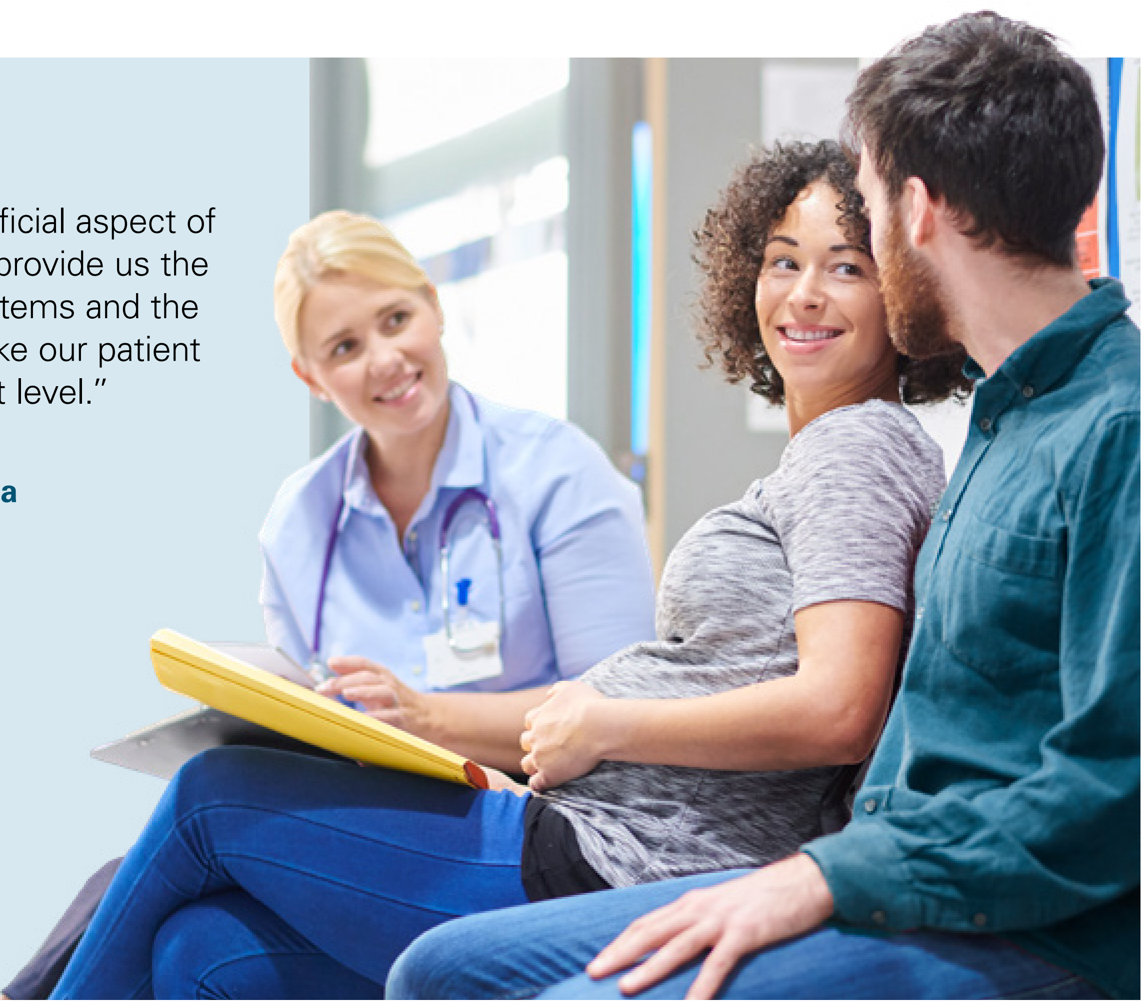
100%

of ACQA providers outperformed non-ACQA providers in key quality measures

"The most beneficial aspect of an ACQA is to provide us the information systems and the resources to take our patient care to the next level."

Dr. Lou Bonavita

CNY Family Care LLP, ACQA Provider



1 Based on internal data reporting from 2019-2024.

Why Excellus BCBS?
This is what we do.

It's our mission to help people in our communities live healthier and more secure lives through access to high-quality, affordable health care. It's what guides everything we do and every decision we make.

We're also built for everybody's benefit. Our clients. Our members. Our in-network doctors and care providers. Entire communities. We have a responsibility to them all — and we're in a position to meet that responsibility every day. We have the most doctors and hospitals in our network, the most businesses and members under our care, and the innovative tools and data it takes to improve quality and help people live healthier. Simply put, we are a force for health in the communities we serve.

It's why so many area employers trust us to care for their teams and, ultimately, their businesses. Because when a leading name in health care lives its mission to make communities healthier, **everybody benefits.**

SECTION 2

What's new for 2027

What you need to know in 2027

Take a look at what's in store for 2027[1] and rediscover the great programs and services already available.

Wellbeing and incentive programs

Excellus BlueCross BlueShield offers members access to a wide range of reward and incentive programs, with savings on fitness, weight loss, travel, and more.

Build healthy habits and earn rewards with ThriveWell[SM]

ThriveWell is a digital home base designed to engage teams in their health journey. Supported by Personify Health, it empowers employees to make small everyday changes, build healthy habits, have fun with friends, and enjoy the lifelong rewards of improved overall wellbeing.

Care management

Personalized care management is at the core of our approach, building meaningful employee connections while supporting physical and emotional well being through flexible, individualized programs.

New! Woman and family health support through Ovia Health[2] by Labcorp

Ovia Health is a comprehensive solution that supports women and families through every stage of life—from fertility and pregnancy to postpartum, parenting, and menopause. With personalized guidance, digital tools, and 1:1 access to specialists and/or licensed health care professionals, Ovia Health connects members to the care and support they need for better health outcomes and greater confidence throughout their journey. Ovia Health is embedded in all Small Group plans.

Connect with a personalized Care Manager with Wellframe®

Wellframe provides employees with personalized, on demand care management through an easy to use mobile app. Members have direct access to a dedicated care manager, nurses, dietitians, all in one place. With personalized care plans, secure messaging, progress tracking, and proactive tips and reminders, Wellframe helps employees stay engaged, supported, and on track with their health goals.

Mental and behavioral health care made affordable

We're committed to reducing costs and access barriers for our members. Outpatient mental and behavioral health services, including Substance-Related and Addictive Disorder support, are covered in full for most plans, subject to deductible where applicable. This benefit applies to all Non-Standard plans.

To learn more about 2027 Open Enrollment, contact your sales consultant.

Pharmacy programs

We offer proven programs that make medications more affordable, support proper use, member health and deliver the lowest net cost.

New! Updating our preventive drug list for smarter, more sustainable coverage

Effective January 1, 2027 Excellus BCBS will update the preventive drug list to better align coverage on high value, clinically appropriate preventive medications. As part of this update, select non preferred drugs, multi source brands, and high cost generics will no longer be included on the preventive drug list. These changes are designed to support more sustainable pharmacy costs while maintaining access to effective preventive care. This change applies to all groups regardless of renewal date.

New! Pharmacy Concierge

A high-touch program designed to control costs by optimizing medication use. Pharmacy Concierge leverages a dedicated, in-house team of pharmacists who proactively review pharmacy claims to identify savings opportunities across the population.

This team works directly with prescribing physicians to recommend lower-cost, clinically appropriate alternatives—ensuring members receive effective treatment at the best possible value.

Our comprehensive approach delivers measurable savings. The Pharmacy Concierge team evaluates a wide range of optimization opportunities, including:

- Multi-source brands
- Dose efficiency
- Channel optimization
- High-cost generics
- Dosage form optimization
- Specialty medications

New! Sempre Health

A smarter way for group plans to boost adherence and reduce costs for members managing chronic conditions. Sempre Health is an SMS-based program that helps eligible members save on prescriptions while improving medication adherence.

Enrollment is easy. Once signed up, members unlock copay discounts at their regular pharmacy by refilling their medications on time. With text reminders and increasing incentives, members are rewarded for staying adherent and keeping their refills on schedule.

Integrated benefits and services

Our partner, Lifetime Benefit Solutions[3] (LBS), a company that offers administrative services, is a national leader in workplace management solutions, providing tools and support that help groups remain compliant while improving efficiency and financial performance.

Health Savings Accounts (HSAs)

HSAs help employers keep health coverage affordable by offering a tax advantaged way for employees to save for current and future health care expenses, with no "use it or lose it" requirement. Through LBS, employers and employees can manage HSAs—along with eligible FSAs and HRAs—on a single, integrated platform. LBS delivers simple administration, flexible contributions, and 24/7 access to account funds through an online portal or debit card.

Virtual care and digital resources

Our suite of digital tools and other resources gives members instant access to benefits, tools, and member-only resources.

New! Deductible removed for telemedicine

Members enrolled in a deductible plan can now access telemedicine 24/7 before meeting their deductible, improving access to timely, personalized care that is more convenient and affordable.

Members can take advantage of a broad range of telemedicine services, with the ability to connect to board-certified providers by phone or video—often within minutes.

Vori Health: virtual musculoskeletal care

- **Personalized care for back, neck, and joint pain ($0 before deductible)** Virtual access to board-certified physical therapists and specialists who provide an individualized treatment plan, along with ongoing support to help reduce pain, restore movement and avoid unnecessary tests or procedures.

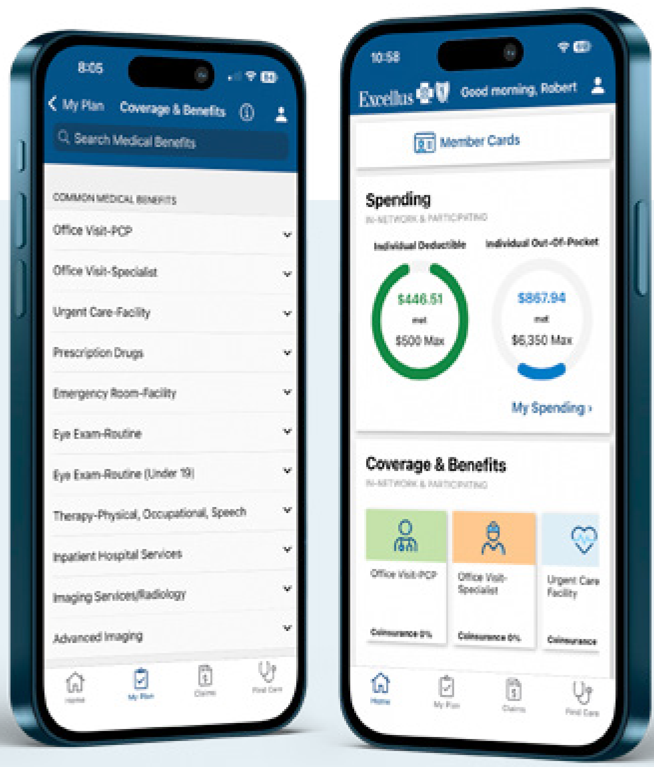
MD Live® virtual care: medical and behavioral health

- **Urgent care ($0 before deductible)** Care for common conditions like colds, flu, sinus infections, cough, allergies and more.
- **Behavioral health support ($0 before deductible)** Access to mental health therapy and psychiatry.
- **Dermatology (specialist cost share before deductible)** Connect with board-certified dermatologists for thousands of skin, hair, and nail conditions, including acne, rashes and eczema.

Members can take their health plan with them 24/7

With the Excellus BCBS app, members can easily connect to care anytime, anywhere, making it simple to find support and manage their health in one convenient place.

Access 24/7 telemedicine, check benefits and deductible status, view claims, use digital ID cards, find a doctor and more.



[1] Subject to DFS approval
[2] Subject to final contract terms
[3] Lifetime Benefit Solutions is a company offering administrative services in the Excellus BCBS service area.

Personify Health is an independent company and offers a digital wellbeing service on behalf of Excellus BCBS.
Ovia Health by Labcorp is an independent company offering digital women's health solutions to Excellus BCBS members. Pending contract finalization.
Wellframe is an independent company that provides a health and wellness support mobile app to Excellus BCBS members.
Vori Health is an independent company that offers virtual musculoskeletal (back, neck and joint) health care and physical therapy services to Excellus BCBS members.
MDLIVE Medical Group (DE), P.A, MDLIVE Medical Group, PA and other MD Live related independent professional entities provide the clinical services made available by MD Live.
MD Live is an independent company providing virtual care services to Excellus BCBS members.

Small business plan updates for 2027

To comply with 2027 HCR guidelines, some benefit coverage is changing. See below for a summary of what is changing. If your plan is not listed below, there were no changes to the plan.

The changes identified below will be implemented on a group's renewal date beginning 1/1/2027. Groups and members will be notified of the changes in their Annual Rate Notice(s).

SimplyBlue Plus Bronze updates

Plan name	Coverage	Impacted benefits	2026 benefits	2027 benefits
SimplyBlue Plus Bronze 3	In-network	Single deductible	$5,500	**$6,500**
		Out-of-pocket maximum	$7,500	**$8,500**
SimplyBlue Plus Bronze 4	In-network	Single deductible	$8,500	**$8,700**
		Out-of-pocket maximum	$8,500	**$8,700**
SimplyBlue Plus Bronze 5	In-network	Single deductible	$6,000	**$6,500**
		Out-of-pocket maximum	$7,500	**$8,500**
SimplyBlue Plus Bronze 7	In-network	Single deductible	$10,600	**$11,750**
		Out-of-pocket maximum	$10,600	**$11,750**
	Out-of-network	Single deductible	$10,600	**$12,000**
		Out-of-pocket maximum	$10,600	**$12,000**

SimplyBlue Plus Silver Updates

Plan name	Coverage	Impacted benefits	2026 benefits	2027 benefits
SimplyBlue Plus Silver 2	In-network	Single deductible	$3,250	**$3,450**
		Coinsurance	20%	**25%**
		Out-of-pocket maximum	$8,500	**$8,700**
SimplyBlue Plus Silver 6	In-network	Single deductible	$3,600	**$4,250**
		Out-of-pocket maximum	$9,600	**$10,000**
	Out-of-network	Out-of-pocket maximum	$10,000	**$12,000**
SimplyBlue Plus Silver 17	In-network	Single deductible	$3,700	**$4,000**
		Out-of-pocket maximum	$7,400	**$8,000**
SimplyBlue Plus Silver 18	In-network	Out-of-pocket maximum	$10,150	**$11,500**
	Out-of-network	Single deductible	$10,150	**$12,000**
		Out-of-pocket maximum	$10,150	**$12,000**
SimplyBlue Plus Silver 19	In-network	Single deductible	$3,600	**$4,000**
		Out-of-pocket maximum	$8,000	**$8,700**
SimplyBlue Plus Silver 20	In-network	Single deductible	$6,750	**$7,350**
		Out-of-pocket maximum	$6,750	**$7,350**

Plan name	Coverage	Impacted benefits	2026 benefits	2027 benefits
SimplyBlue Plus Standard Silver	In-network	Single deductible	$2,450	**$3,750**
		Out-of-pocket maximum	$10,150	**$12,000**
	Out-of-network	Single deductible	$5,000	**$6,000**
		Out-of-pocket maximum	$10,150	**$12,000**

SimplyBlue Plus Gold Update

Plan name	Coverage	Impacted benefits	2026 benefits	2027 benefits
SimplyBlue Plus Standard Gold	In-network	Single deductible	$775	**$1,200**
		Out-of-pocket maximum	$10,150	**$12,000**
	Out-of-network	Single deductible	$5,000	**$6,000**
		Out-of-pocket maximum	$10,150	**$12,000**
SimplyBlue Plus Gold 6	In-network	Out-of-pocket maximum	$4,000	**$5,000**
SimplyBlue Plus Gold 14	In-network	Single deductible	$1,400	**$1,600**
		Out-of-pocket maximum	$7,500	**$8,000**
SimplyBlue Plus Gold 17	In-network	Single deductible	$1,100	**$1,300**
		Out-of-pocket maximum	$8,250	**$9,750**
SimplyBlue Plus Gold 19	In-network	Single deductible	$2,500	**$2,600**
		Out-of-pocket maximum	$7,500	**$8,600**
SimplyBlue Plus Gold 21	In-network	Single deductible	$2,000	**$2,500**
		Out-of-pocket maximum	$5,500	**$7,500**

SimplyBlue Plus Platinum Updates

Plan name	Coverage	Impacted benefits	2026 benefits	2027 benefits
SimplyBlue Plus Platinum 2	In-network	Out-of-pocket maximum	$5,000	**$5,500**
		Lab	$15	**$40**
	Plan option		Copay Non-Standard A	**Copay Non-Standard B**
SimplyBlue Plus Platinum 4	In-network	Single deductible	$250	**$400**
		Primary care physician copay	$15	**$20**
		Specialist copay	$25	**$30**
		Diagnostic x-ray	$25	**$30**
		Lab	$15	**$20**
		Physical therapy, occupational therapy, speech therapy	$15	**$20**
		Out-of-pocket maximum	$3,000	**$4,500**
SimplyBlue Plus Platinum 6	In-network	Plan option	Copay Non-Standard A	**Copay Non-Standard B**
		Lab	$30	**$50**
SimplyBlue Plus Standard Platinum	In-network	Out-of-pocket maximum	$2,000	**$4,000**

Benefits in bold represent a cost share change from 2026 to 2027

SECTION 3

Small business plan designs

Product components

All Small Business plans include 10 Essential Health Benefits (EHBs) that all groups must cover:

1. Prescription drugs
2. Rehabilitative and habilitative services, as well as devices
3. Emergency services
4. Maternity and newborn care
5. Preventive and wellness services, as well as chronic disease management
6. Pediatric dental and vision care
7. Mental health and substance use disorder services
8. Hospitalization
9. Ambulatory patient services
10. Laboratory services

For a specific list of EHBs, as determined by the NYS benchmark plan, please visit www.cms.gov/cciio/resources/data-resources/ehb.html.

Covered in full preventive care

Tracking your preventive screenings offers peace of mind. Excellus BCBS members are covered in full for all preventive screenings, which can help confirm they're healthy or improve earlier disease detection.

Well-baby and well-child care

Routine physical examinations,including vision and hearing screenings, developmental assessment, anticipatory guidance and laboratory tests.

Adult annual physical examinations

Annual physical examinations and preventive screenings, including blood pressure, cholesterol, colorectal cancer and diabetes screenings.

Adult immunizations

Adult immunizations recommended by the Advisory Committee on Immunization Practices (ACIP) are covered and not subject to deductible.

Well-woman examinations

Routine gynecological examination, breast examination and annual Pap test, including laboratory and diagnostic services.

Mammograms

One baseline screening mammogram and one annual screening.

Family planning and reproductive health services

FDA-approved contraceptive methods prescribed by a provider are covered. Prescription drugs and devices approved by FDA, or generic equivalents as approved substitutes, are also covered.

Bone mineral density measurements or testing

We cover bone mineral density measurements or tests.

Age and gender restrictions can apply. For the full list of preventive care services and qualifying requirements, visit Healthcare.gov/Coverage/Preventive-Care-Benefits.

Small business plan designs

Small group portfolio map

Product classification	**PPO**										
Product components	**Small Business Products**										
In-network structure	**In-network**										
Plan types	Copay		Hybrid				Deductible	Deductible HSA			
Plan aggregation design	Copay 1 Individual Aggregation		Hybrid 1 Individual Aggregation		Hybrid 9 Individual Aggregation		Deductible 4 Family Aggregation	Deductible HSA 3 Individual Aggregation	Deductible HSA 4 Family Aggregation		
Product design	Copay Standard	Copay Non-Standard B	Hybrid Standard	Hybrid Non-Standard A	Hybrid Non-Standard C	Hybrid Non-Standard F	Deductible Non-Standard A	Deductible HSA Non-Standard A	Deductible HSA Non-Standard A	Deductible HSA Non-Standard B	Deductible HSA Non-Standard D
Product packages	Standard Platinum	Platinum 2, 6 Gold 5	Standard Gold and Silver	Gold 14 Silver 6	Platinum 4 Gold 17, 19	Silver 18	Bronze 7	Silver 16	Gold 6 Silver 2, 17, 20 Bronze 3, 4	Bronze 5	Gold 21 Silver 19
Package options	**Package options** Dependent Age Family Planning Domestic Partner Pediatric Dental										

The Small Group portfolio also offers an HMO option to Small Groups with out-of-area headquarters and a Healthy NY EPO to eligible small businesses. Contact your Account Service Manager for more information.

Small business plan designs

In-network structure

All Excellus BCBS Small Business plans provide coverage through our vast network of doctors and hospitals.

A "network" refers to a group of doctors and hospitals that have agreed to accept payment in exchange for serving members.

Our plans give members the freedom to choose from all doctors and hospitals "in-network," without more expensive out-of-pocket costs. This is important to consider, as many employees are living in and commuting from a variety of locations.

With our Small Business Plans, members get:

Savings with contracted providers (in-network)

Access to non-contracted providers (out-of-network), but costs will be higher

Package options

Clients may choose the following options for their Small Business health plan.

	Eligibility	Plan Variations Created With These Options
Dependent through Age 29	• The dependent is unmarried • Is not insured or eligible for coverage under an employer-sponsored health benefit plan • Lives, works or resides in New York State for our service area	Standard coverage is to age 26; plan options are made available with this rider to extend through age 29 for an additional cost
Domestic partner	• Included in the base contract • Employers may choose not to offer this coverage	Plans include coverage for eligible domestic partner for no additional cost
Family planning Benefits are mandated essential health benefits*	• Included in the base contract • Includes coverage for things like oral contraceptives, sterilization procedures for men, family planning, and certain travel and lodging expenses to access covered services that may not be available to you due to a law or regulation in the State where you reside • Coverage can only be removed for groups obtaining a religious exemption	All plans must include sterilization for men, family planning services for women, over-the-counter and generic oral contraceptives, and abortion
Pediatric dental Benefits are mandated essential health benefits*	• Coverage can only be removed for groups providing evidence of other qualified coverage	All plans must have pediatric dental coverage that includes checkups (fluoride, sealant, fillings), basic dental care (x-rays, simple extractions), major dental (endodontics), and orthodontia (medically necessary)

* Removal of Family Planning or Pediatric Dental benefits requires group exception or Excellus SimplyBlue Plus Dental plan.

Understanding product classifications and plan types

Health insurance products are classified based on where services are administered and the type of coverage the member receives. Historically, many plans were Health Maintenance Organizations (HMOs), and were sometimes viewed as restrictive in that they required members to have a Primary Care Physician (PCP) to coordinate care with specialists within a specific network of doctors and hospitals. All Excellus BCBS Small Business plans are PPOs (Preferred Provider Organizations) to give members more choices and more control.

PPO

Members receive services from a vast network of PPO doctors and hospitals.

- 100% of hospitals and 99% of local doctors participate in our 31-county network.[1]
- Members benefit from unsurpassed discounts when receiving care in our PPO network.
- Members may receive care outside of the PPO network, but typically pay more for this care. Balance billing is available out-of-network.
- No need to list a PCP or request referrals to a specialist
- Analysis and recovery
- Accountable Cost and Quality Agreement (ACQA) and provider collaborations

We chose to build our Small Business products as PPO's to take advantage of the flexibility and control.

Exclusive Provider Organization (EPO)

Members receive services from a network of EPO doctors and hospitals for a prearranged discounted rate, but there is no coverage for care received out-of-network unless it is an emergency service or dialysis.

HMO

Members choose a Primary Care Physician and are required to get referrals to see specialists and other doctors except in emergencies. Members must receive services in the HMO network.

Point of Service (POS)

Members receive services from participating network providers or from providers outside the network. Deductible and/or coinsurance typically apply for out-of-network care.

Indemnity

Members receive services from any doctor or hospital. The insurance company reimburses doctor or hospital for each covered service, and deductibles and coinsurance typically apply.

1 2025 Health Plan Data

Plan types

There are four plan types available

Each plan type covers qualified preventive services in full without being subject to the deductible that may be applicable.

Name	Description	HSA-qualified (Y/N)	Rx subject to medical deductible (Y/N)
Copay	• There is no in-network deductible. • Members pay a fixed dollar amount for most services.	No	No
Hybrid	• Members must first pay in- and out-of-network deductibles on applicable medical care before the health plan begins to pay. • Once the deductible is met, the member pays either a copay or coinsurance, depending on plan design. • Prescription drug fills are not subject to the medical deductible. • Diabetic drugs fall under the medical contract, on some hybrid plans, and are subject to deductible before copays/coinsurance applies.	No	No
Deductible HSA	• Members must first pay the deductible for all medical care before the health plan begins to pay. • Prescription drug fills are subject to the medical deductible. • Preventive Rx fills will not be subject to the deductible on non-standard plans.	Yes	Yes
Deductible	• Members must first pay the deductible for applicable medical care before the health plan begins to pay • Prescription drug fills are subject to the medical deductible • Deductibles and/or out-of-pocket maximum amounts exceed IRS limits; therefore plans are not eligible to pair with HSA accounts. (You can always pair any plan with an HRA account.)	No	Yes

Plan aggregation design

The chart below explains the differences between Excellus BCBS Small Business plan aggregation designs

	Deductible			Out-of-pocket maximum (OOPM)			Visit/day limit accumulation in- & out-of-network
Aggregation design name	**Which aggregation rule applies?**	**How do in- and out-of-network deductibles accumulate?**	**Which services apply to the deductible?**	**Which aggregation rule applies?**	**How do in- and out-of-network OOPM deductibles accumulate?**	**Which services apply to the OOPM?**	**How do visit/ day limits accumulate?**
Copay 1	Individual	N/A	N/A	Individual	Separately	All services (medical, pediatric dental, vision and Rx)	Together
Hybrid 1	Individual	Separately	All medical, pediatric dental and vision	Individual	Separately	All services (medical, pediatric dental, vision and Rx)	Together
Hybrid 9	Individual	Separately	Applicable medical, pediatric dental and vision	Individual	Separately	All services (medical, pediatric dental, vision and Rx)	Together
Deductible HSA 3	Individual	Separately	All services (medical, pediatric dental, vision and Rx)	Individual	Separately	All services (medical, pediatric dental, vision and Rx)	Together
Deductible HSA 4	Family	Separately	All services (medical, pediatric dental, vision and Rx)	Family	Separately	All services (medical, pediatric dental, vision and Rx)	Together
Deductible 4	Family	Separately	All services (medical, pediatric dental, vision and Rx)	Family	Separately	All services (medical, pediatric dental, vision and Rx)	Together

Small business plan designs

Preferred packages

Preferred Packages are a way for employers to offer our most popular plans at every metal level, or every plan type. This approach, takes the guesswork out of selecting plans for employees.

So, whether the organization consists of families shopping for Platinum level plans, or couples interested in a higher deductible Bronze plan, they will all have access to choose from four plans with a range of benefits and price points.

Benefits of preferred packages include:

- One option at every metal level and all plan types
- Expedited underwriting and enrollment processes
- One rate sheet for all packages
- Tools to help employees compare plans

Plan name	SimplyBlue Plus Platinum 2 STABLE	SimplyBlue Plus Gold 17 BLENDED	SimplyBlue Plus Silver 2 VALUE MAXIMIZING	SimplyBlue Plus Bronze 4 VALUE MAXIMIZING
Plan type	Copay	Hybrid	Deductible HSA	Deductible HSA
Single deductible	No deductible	**$1,300**	**$3,450**	**$8,700.00**
Coinsurance	N/A	20%	**25%**	0%
Single out-of-pocket max	**$5,500**	**$9,750**	**$8,700**	**$8,700**
Primary care / specialist	$15 / $40	$40 / $70 DED waived	**20% / 20%**	0% / 0%
Virtual care Urgent care, behavioral health and physical therapy	$0	**$0 DED waived**	**$0 DED waived**	**$0 DED waived**
Urgent care / ER	$40 / $300	$70 / $300 DED Waived	**25% / 25%**	0% / 0%
Outpatient mental health	$0	$0 DED Waived	$0	$0
Hospital facility inpatient / outpatient	$500 / $300	20% / 20%	**25% / 25%**	0% / 0%
Prescription drugs Tier 1 / Tier 2 / Tier 3	$10 / $35 / $70	$10 / $45 / $90 DED waived	$10 / $45 / $90 (Preventative Rx: DED waived)	0% / 0% (Preventative Rx: DED waived)
Generic Rx kids under 19	$0	$0 DED waived	$0	$0

*The amounts listed above are the copays or coinsurance after the deductible is met, unless otherwise noted as DED Waived.

Benefits in bold represent a cost share change from 2026 to 2027

Small business plan designs

Understanding our aggregation options

As members move through the year, it's important to understand how medical expenses add up and whether the cost will be the responsibility of the member or the health plan.

Aggregation refers to how payments toward health care services add up and are counted against a member's deductibles and out-of-pocket maximums. Depending on the plan features, aggregation may be determined on an individual or family basis.

Deductible aggregation

Individual aggregation

Each covered family member only needs to satisfy their own individual deductible, not the entire family deductible, before plan benefits kick in. This option is often more attractive to families because claims for individuals will be covered when that individual meets their single deductible, regardless of whether or not other family members have met theirs.

Family aggregation

While this option typically helps keep monthly premiums lower, family aggregation means the entire family's annual deductible must be met by one or any combination of covered members before a copay or coinsurance is applied for any family member.

Out-of-pocket max aggregation

The same rules apply to out-of-pocket maximums (OOPM)

- If a plan has individual aggregation, the single deductible level must be => the family deductible minimum for that year, or $3,500 in 2027.
- If a plan has family aggregation, the single deductible level must be => the individual minimum for that year, or $1,750 in 2027.

Per person OOPM cap

All Excellus BCBS Small Group plans include an extra layer of protection preventing any individual from exceeding $8,700 in personal out-of-pocket medical expenses each year. This cap applies to family plans with family aggregation, acting as a safeguard and providing more value in the event of high medical expenses for one individual.

Let's take a look at two examples on the next page

Consider this, Jack and Paige are on a family plan that includes the following cost shares:

INDIVIDUAL DEDUCTIBLE: **$3,000**
FAMILY DEDUCTIBLE: **$6,000**

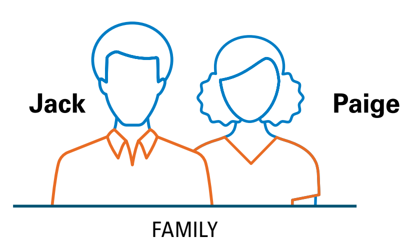
COINSURANCE: **20%**
(ONCE DEDUCTIBLE IS MET)

INDIVIDUAL OOPM: **$7,500**
FAMILY OOPM: **$15,000**

Jack INDIVIDUAL

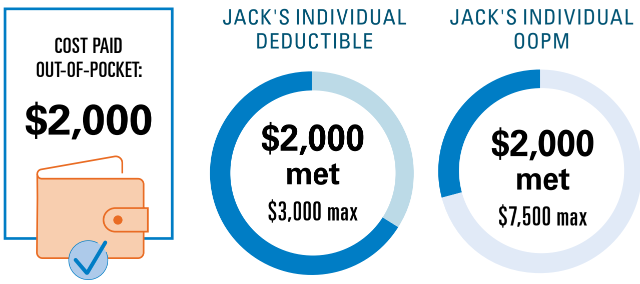
Paige INDIVIDUAL

Both FAMILY

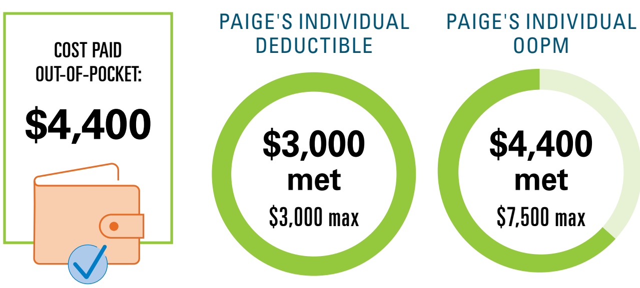


EXAMPLE 1: INDIVIDUAL AGGREGATION

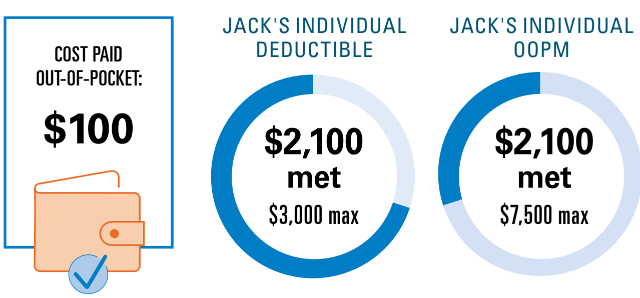
In January, **Jack** needs a minor surgical procedure that costs $2,000. Since this is Jack's first medical expense this year, his individual deductible applies. He will pay **100% of the costs *($2,000)*.**



In May, **Paige** is admitted to the hospital for an emergency procedure that costs $10,000. Since this is Paige's first medical expense this year, her individual deductible applies. **She will pay 100% *($3,000)*** of her deductible plus **20% coinsurance *($1,400)*** for the remaining balance.



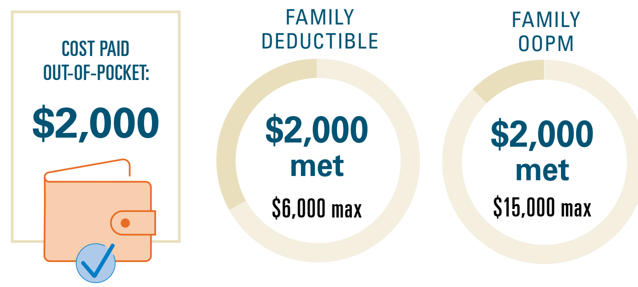
In August, **Jack** visits the doctor, resulting in a $100 charge. Since Jack's deductible has not been met, he will continue to pay toward his individual deductible. He will pay **100% of the costs *($100)***.



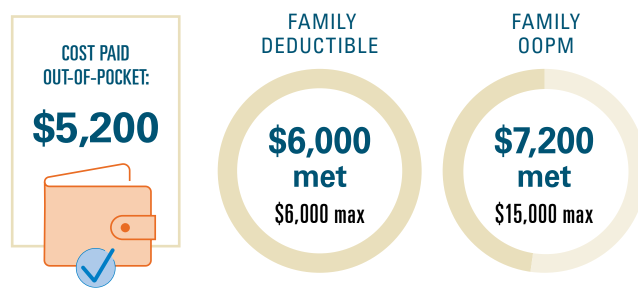
If Jack reaches his deductible, **Excellus BCBS will start paying 80%** of covered expenses. If Paige and/or Jack reach their individual $7,500 OOPM, their individual covered health care services will be covered in full by Excellus BCBS.

EXAMPLE 2: FAMILY AGGREGATION

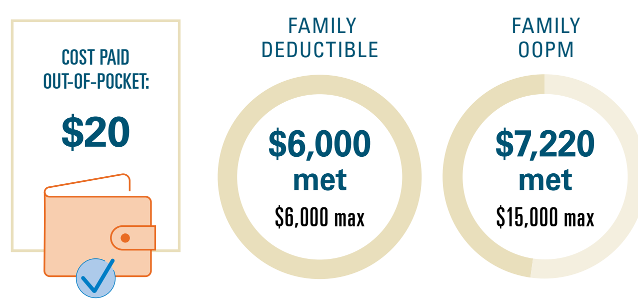
In January, **Jack** needs a minor surgical procedure that costs $2,000. Since this is the family's first medical expense this year, the deductible applies. He will pay **100% of the costs *($2,000)*.**



In May, **Paige** is admitted to the hospital for an emergency procedure that costs $10,000. Since the family deductible applies, **Paige will pay 100%** of the first $4,000 to meet the family deductible plus **20% coinsurance *($1,200)*** for the remaining balance.



In August, **Jack** visits the doctor, resulting in a $100 charge. **Since the family deductible has been met, Jack will pay 20% coinsurance *($20)*** of the total allowed cost.



If Paige and Jack reach their OOPM together through any combination of their health care expenses, **Excellus BCBS will pay 100%** of covered medical expenses for the rest of the plan year.

Reminder: Even though the family OOPM is $15,000 and can be reached through any combination of family members' expenses, the **Per Person Individual OOPM Cap** mentioned earlier applies here. Meaning, if Paige's procedure had cost considerably more, she would never owe more than $8,700 in individual expenses in a year, due to this extra layer of protection.

Pediatric dental

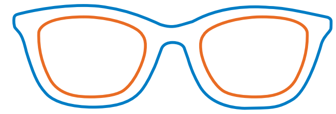
For plans that cover pediatric dental, we provide the following dental care services for members up to 19 years of age:

- **Emergency dental care** — emergency treatment required to alleviate pain and suffering caused by dental disease or trauma, not subject to our preauthorization.
- **Preventive dental care** — procedures that help prevent oral disease from occurring, including cleanings, topical fluoride application, sealants and unilateral and bilateral space maintainers.
- **Routine dental care** — routine dental care provided in the office of a dentist, including dental examinations, x-rays, simple extractions and in-office conscious sedation.
- **Major dental care** — Endodontics, including procedures for treatment of diseased pulp chambers and pulp canals; Periodontics, including services in anticipation of, or leading to medically necessary orthodontics; and certain Prosthodontic services.
- **Orthodontics** — medically necessary procedures only. Used to help restore oral structures to health and function and to treat serious medical conditions such as cleft palate and cleft lip, craniofacial anomalies and other significant skeletal dysplasias. Preauthorization is required.

Benefit highlights:

- **All non-standard, hybrid and deductible HSA plans** — in- and out-of-network preventive exams and cleanings are not subject to the deductible.

Pediatric vision



All our plans offer the following coverage for members up to 19 years of age:

- **Vision care** — emergency, preventive and routine vision care.
- **Vision examinations** — one vision examination per 12-month period, unless more frequent examinations are medically necessary.
- **Prescribed lenses and frames** — standard prescription lenses or contact lenses one time per 12-month period, unless more frequent changes in lenses or contact lenses are medically necessary.

Benefit highlights:

- **All Non-Standard plans** will include pediatric annual eye exams covered in full (subject to deductible, where applicable)

Member cost share will vary based on the package.

More complete wellbeing is in sight with Simply Vision℠ plans

Vision and eye health are essential to overall wellbeing. Beyond helping employees see more clearly, regular eye exams can help catch underlying eye diseases and other health conditions like high blood pressure and diabetes early,[1] preventing permanent vision loss or blindness and preserving long-term eye health and quality of life. Through Simply Vision plans, Excellus BCBS can help make it affordable to make eye health a priority.

Simply Vision plans provide coverage that is:

Local

Our more than 85 years of experience serving our upstate New York neighbors gives us unique insight into what your clients and their teams want and need to get and stay healthy. As a nonprofit invested in our local community, we proudly pass savings directly on to our members and into things like community health programs or grants.

Comprehensive

Every Simply Vision plan includes low-cost eye exams to catch vision and health concerns early, plus benefits for corrective eyewear including frames, lenses, and contact lenses, as well as options for covering contact lens evaluations. All employees have access to great discounts on lens add-ons, additional pairs of eyeglasses, LASIK services and other great extras just for being a member.[2]

Affordable

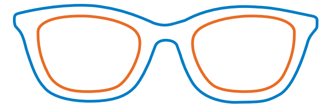
With competitively priced plans and multiple contribution options, employers can choose coverage that aligns with their budget while remaining affordable for employees. Low out-of-pocket costs, including fully covered and low-cost frame options, help employees access the care they need.

Convenient

Through our partner, Davis Vision®, employees have access to a large network that includes nearly 6,440+ provider locations in the local Excellus BCBS network area and 235,000+ points of access nationwide,[3] including independent eye care professionals, four of the top five eyewear retailers, and online retailers.

Simple

Simplify benefits administration with a single point of contact, streamlined implementation, combined enrollment forms, and unified online billing for all health care benefits.



50%

of visual impairment and blindness can be prevented through early diagnosis and timely treatment.[4]

5th

most common disability among adults is vision difficulty.[4]

4 in 10

U.S. adults are at high risk for vision loss, yet only about half visited an eye doctor in the past 12 months.[5]

1 American Academy of Ophthalmology, 20 Health Problems an Eye Exam Can Catch, April 2024.

2 Not all providers participate in Davis Vision Discounts, including the fixed lens option pricing. Members should contact their provider prior to scheduling an appointment to confirm if he/she offers the discount and fixed lens option pricing.

3 Davis Vision, January 2021

4 CDC. Prevalence of Disabilities and Health Care Access by Disability Status and Type Among Adults, December 2022

5 CDC Fast Facts: Vision Loss. Last reviewed May 15, 2024.

Davis Vision is an independent company providing vision benefit management services and access to their network.

Small business plan designs

Dental package options

Dental issues can cause big problems for small business. In fact...

243 million hours of work or school are lost every year due to oral health problems[1]

Over 90% of diseases can show signs in the mouth.[2]

Diabetes, heart disease and stroke can be linked to warning signs like gum disease and oral infections—making routine dental visits an important opportunity for early detection.[3]

By combining your medical and dental benefits with Excellus BlueCross BlueShield, you can catch small problems early to keep costs in check. SimplyBlue Plus Dental offers a growing network of dentists to help your team be more proactive about care — and more productive in the workplace.

SimplyBlue Plus Dental plans

- Range of package options to meet budget needs
- Provides Affordable Care Act (ACA) compliance in a standalone dental plan
- $0 Deductibles
- Full family coverage
- No annual maximum for pediatric service

Dental Blue Options plans

- Wide range of benefits with over 40 package options for maximum flexibility to tailor the perfect plan for your business
- Provides Affordable Care Act (ACA) compliance in conjunction with SimplyBlue Plus medical plans
- Deductibles as low as $25
- Full family coverage

Both plans provide:

- National Dental GRID+ DenteMax network is included in all plan options
- One-stop shop for comprehensive, coordinated medical and dental coverage
- Broad and growing network of dental providers includes over 80% participation in the Rochester area
- Competitive rates
- Local carrier with strong ties to the community

1 CareQuest Institute for Oral Health, The Hour of Need: Productivity Time Lost Due to Urgent Oral Health Needs (2024)
2 American Academy of Pediatrics, Campaign for Dental Health, Dentists Are Disease Detectives (2026)
3 American Dental Association (ADA), Oral-Systemic Health resource page

SimplyBlue Plus Dental packages

Affordable Care Act (ACA)-compliant dental plans that are designed specifically for Small Groups

SimplyBlue Plus Dental plan options

Package ID	SBPD-1500-PPO		SBPD-1000-PPO		SBPD-1000B-PPO		SBPD-750-PPO	
	Pediatric (up to age 19)	**Adult** (19 and over)	**Pediatric** (up to age 19)	**Adult** (19 and over)	**Pediatric** (up to age 19)	**Adult** (19 and over)	**Pediatric** (up to age 19)	**Adult** (19 and over)
Deductible enrollee/2+ enrollees	None	None	$25/$75	$75/$225	$25/$75	$75/$225	$25/$75	$100/$300
Out-of-pocket maximum enrollee/2+ enrollees	$350/700[1]	N/A	$350/700[1]	N/A	$350/700[1]	N/A	$350/700[1]	N/A
Annual maximum	N/A	$1,500	N/A	$1,000	N/A	$1,000	N/A	$750
Preventive services	$0 copay	100%	100%	100%	100%*	100%*	100%*	100%*
Basic services	$25 copay	50%	50%*	50%*	50%*	50%*	50%*	50%*
Major services	$100 copay	50%	50%*	50%*	50%*	50%*	50%*	N/A
Orthodontics[2]	$300 copay	N/A	50%*	N/A	50%*	N/A	50%*	N/A

*Subject to plan deductible

1 Out-of-pocket maximum applies to in-network benefits only

2 Service requires prior authorization and must be medically necessary

Adult benefits subject to plan Annual Maximum

Same coverage for in- and out-of-network; out-of-network is subject to balance billing (excluding out-of-pocket maximum)

Service categories vary between Adult and Pediatric coverage.

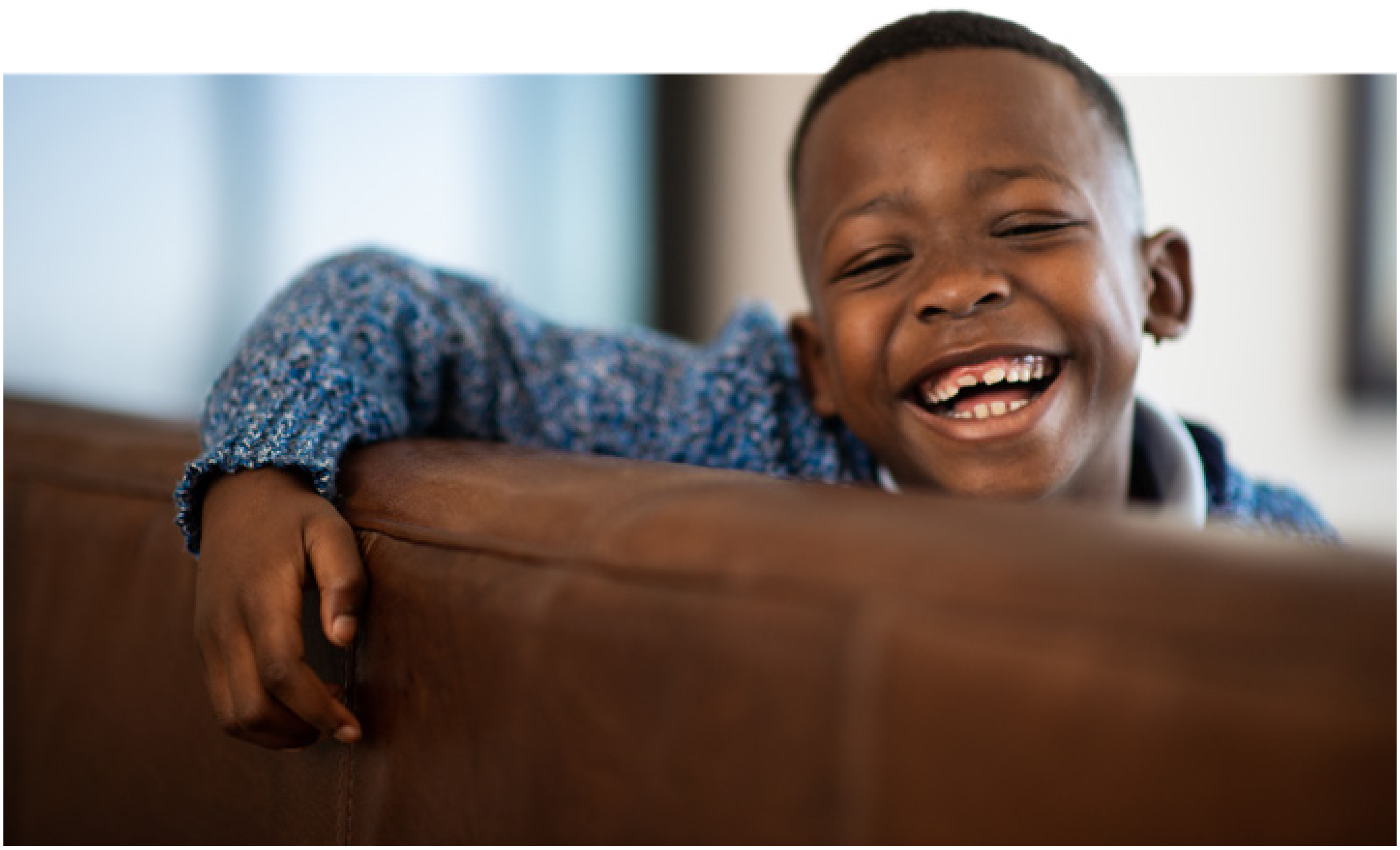
Small business plan designs

Dental Blue Options plan

Pediatric dental coverage for members up to age 19 can be included in all small business medical plans. Dental Blue Options lets you add full family coverage to complement your Pediatric Dental coverage.

Pediatric dental coverage through small business medical plans brings you:

- Convenient compliance with Affordable Care Act (ACA) mandates
- Full range of diagnostic, palliative and therapeutic services, but not as robust as our Dental Blue Options plan
- Varied cost share by plan, subject to medical deductible
  - Standard = PCP Copay
  - Non-Standard = 100% / 80% / 50% / 50%
  - Preventive cleanings and exams are not subject to the in- or out-of-network deductible on Non-Standard Hybrid plans and Non-Standard Deductible HSA plans
- Preventive services including cleanings, fluoride treatments and sealants
- Routine exams, X-rays and fillings
- Restorative root canals, stainless steel crowns, stabilization of cleft palate
- Orthodontics to treat serious medical conditions



Dental Blue Options plans

Package ID	Plan Type	Ded	Annual Max	Class I	Class II	Class IIA	Class III	Class IV	Ortho Max
DBOE-1-26/26	Employer sponsored	$50	$1,500	0%	20%	20%	50%	50%	$2,000
DBOE-2-26/26	Employer sponsored	$50	$1,000	0%	20%	20%	50%	50%	$2,000
DBOE-3-26/26	Employer sponsored	$50	$1,000	0%	20%	20%	50%	50%	$1,000
DBOE-4-26/26	Employer sponsored	$50	$1,000	0%	20%	20%	50%	N/A	N/A
DBOE-5-26/26	Employer sponsored	$50	$1,000	0%	50%	50%	50%	50%	$1,000
DBOE-6-26/26	Employer sponsored	$50	$1,000	0%	50%	50%	50%	N/A	N/A
DBOE-7-26/26	Employer sponsored	$50	$1,000	0%	20%	20%	N/A	N/A	N/A
DBOE-11-26/26*	Employer sponsored	$50	$1,000	0%	20%	20%	50%	50%	$1,000
DBOE-12-26/26*	Employer sponsored	$50	$1,500	0%	20%	20%	50%	50%	$2,000
DBOE-15-26/26	Employer sponsored	$25	$1,000	0%	15%	15%	50%	50%	$1,000
DBOE-22-26/26	Employer sponsored	$50	$1,500	0%	20%	20%	50%	N/A	N/A
DBOE-28-26/26**	Employer sponsored	$50	$1,000	0%	20%	20%	50%	50%	$1,000
DBOE-29-26/26*	Employer sponsored	$50	$1,000	0%	20%	20%	50%	N/A	N/A
DBOE-30-26/26*	Employer sponsored	$50	$1,500	0%	20%	20%	50%	N/A	N/A
DBOE-32-26/26**	Employer sponsored	$50	$1,000	INN: 0% OON: 30%"	INN: 20% OON: 50%"	INN: 20% OON: 50%"	50%	N/A	N/A
DBOE-44-26/26	Employer sponsored	$25	$2,000	0%	0%	0%	20%	50%	$2,000
DBOE-41-26/26	Employer sponsored	$50	$1,000	20%	50%	50%	50%	50%	$750
DBOE-40-26/26	Employer sponsored	$25	$1,250	0%	0%	0%	20%	N/A	N/A
DBOE-18E-26/26	Employer sponsored	$50	$1,000	0%	20%	50%	50%	N/A	N/A
DBOE-6E-26/26	Employer sponsored	$50	$1,500	0%	20%	50%	50%	50%	$1,500
DBOV-1E-26/26	Voluntary	$50	$1,500	0%	20%	20%	50%	50%	$1,500
DBOV-3-26/26	Voluntary	$50	$1,000	0%	20%	20%	50%	50%	$1,000
DBOV-4-26/26	Voluntary	$50	$1,000	0%	20%	20%	50%	N/A	N/A
DBOV-6-26/26	Voluntary	$50	$1,000	0%	50%	50%	50%	N/A	N/A
DBOV-13-26/26	Voluntary	$50	$1,000	0%	20%	50%	50%	N/A	N/A
DBOV-16-26/26**	Voluntary	$50	$1,000	INN: 0% OON: 30%"	INN: 20% OON: 50%"	INN: 20% OON: 50%"	50%	N/A	N/A
DBOV-17-26/26**	Voluntary	$50	$1,000	INN: 0% OON: 30%"	INN: 20% OON: 50%"	INN: 20% OON: 50%"	50%	INN: 50% OON: 50%"	$1,000
DBOV-18-26/26*	Voluntary	$50	$1,000	0%	20%	20%	50%	N/A	N/A
DBOV-19-26/26*	Voluntary	$50	$1,500	0%	20%	20%	50%	N/A	N/A

Disclaimer: Values shown reflect member responsibility

* Syracuse and Utica Only. Plan has out-of-network coverage at UCR90

** Rochester Only

Dental Blue Options annual maximum rollover plans

Regular dental visits can greatly reduce the occurrence of major oral health issues, saving money for both employers and employees. The Dental Annual Maximum Rollover from Excellus BCBS incentivizes preventive care by rewarding employees with funds they can roll over to use as needed in the future.

DENTAL ANNUAL MAXIMUM ROLLOVER PACKAGES

Package ID	Plan type	Ded	Annual maximum The Annual Maximum Rollover design is based on the dental plan annual maximum	Annual max rollover threshold Maximum claims amount that the member can incur in order to earn the rollover	Rollover The dollar amount added to the plan annual maximum for future years	Rollover account maximum The maximum amount of rollover dollars that may be kept in the rollover account	Benefit classes Class I/II/IIA/III/IV	Ortho max
DBOER-1-26/26	Employer sponsored	$50	$1,000	$500	$250	$1,000	0%/20%/20%/50%/NA	N/A
DBOER-2-26/26	Employer sponsored	$50	$1,000	$500	$250	$1,000	0%/20%/20%/50%/50%	$1,000
DBOER-3-26/26	Employer sponsored	$75	$750	$350	$125	$500	0%/20%/20%/50%/NA	N/A
DBOER-4-26/26	Employer sponsored	$50	$1,500	$500	$250	$1,000	0%/20%/20%/50%/50%	$2,000
DBOER-5-26/26	Employer sponsored	$50	$1,500	$500	$250	$1,000	0%/20%/20%/50%/NA	N/A
DBOVR-1-26/26	Voluntary	$50	$1,000	$500	$250	$1,000	0%/20%/20%/50%/NA	N/A
DBOVR-2-26/26	Voluntary	$50	$1,000	$500	$250	$1,000	0%/20%/20%/50%/50%	$1,000
DBOVR-3-26/26	Voluntary	$75	$750	$350	$125	$500	0%/20%/20%/50%/NA	N/A

Groups new to enrolling in an Excellus BCBS Dental Select plan are able to keep any accrued rollover account funds from another plan when they enroll in a dental plan that includes the annual maximum rollover benefit. We will match the funding members have with a competitor up to the Rollover Account Maximum.[1]

Let's take a look at how it works:

1. Employees can roll over a portion of their unused annual maximum to the following year if they submit at least one paid dental claim and do not exceed the rollover threshold.
2. This incentivizes employees to visit the dentist for preventive care, helping to minimize major dental issues
3. Funds that roll over are added to the next year's annual maximum and can be used for future treatments

1 Proof of rollover account funds will be required upon enrollment

Additional preventive care

Medical diagnosis-driven services for certain chronic conditions are covered in front of the deductible for HDHPs (applicable cost shares, such as copays and/or coinsurance may apply).

Preventive care for specified conditions	For individuals diagnosed with
Blood pressure monitor	Hypertension
Retinopathy screening	Diabetes
Peak flow meter	Asthma
Glucometer	Diabetes
Hemoglobin A1c testing	Diabetes
International Normalized Ratio (INR) testing	Liver disease and/or bleeding disorders
Low-density Lipoprotein (LDL) testing	Heart disease

Note: These are medical preventive services only. Rx preventive services are not included.

SECTION 4

Personalized member care

Personalized member care

A care management team you can count on

Our personalized member approach looks at the whole person and aligns the right support to their needs, whether they're managing chronic and complex conditions like diabetes, depression, or cancer — or simply want tips to stay healthy.

Utilization management

Members are connected with the appropriate level of treatment, medication, and care management support to help speed recovery and keep costs in check

Pharmacy management

Innovative clinical programs help keep costs low, employees safe, and administration easy, while our on-staff pharmacists review prescriptions to provide an extra layer of protection for members

Case/disease management

Claims data and predictive modeling identify at-risk members, empowering our care managers to provide proactive, individualized support

Wellbeing programs

Programs are tailored to the needs of your organization and employees to maximize impact, satisfaction, and savings. Our programs motivate and support overall holistic wellbeing with focus on all dimensions of physical, emotional, social and financial health.

Behavioral health support

Our Case Management Team includes mental health and substance abuse specialists who are ready to help members break down the barriers to recovery

Diabetes management

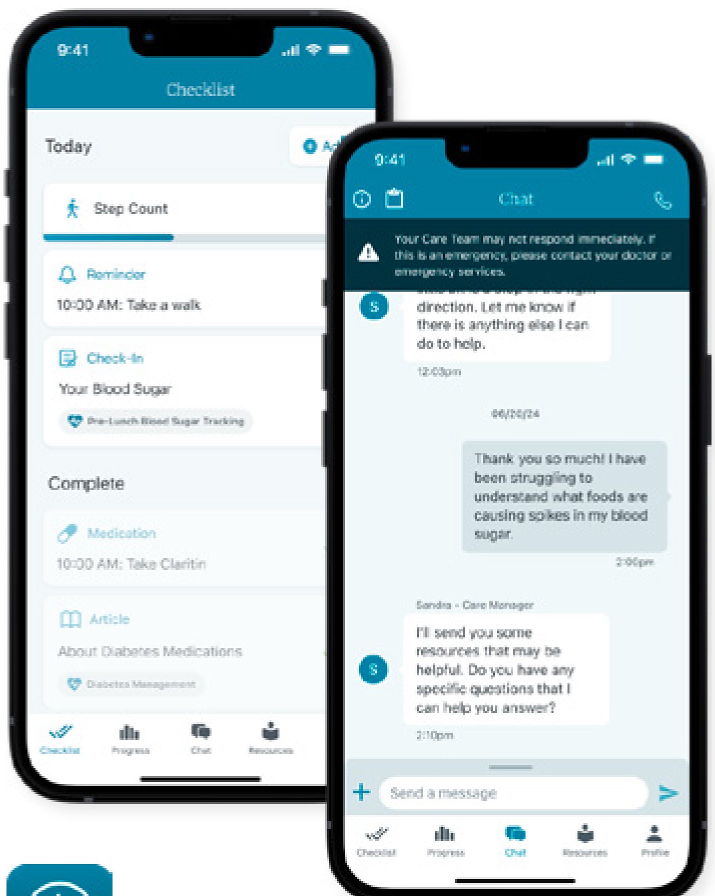
Our on-staff Diabetes Care Management Team coordinates with one another — and our provider network — to deliver the right level of support and guidance to meet each employee's needs.

Personalized member care

Care that is always in *your corner*

We believe health insurance shouldn't be something people use once in a while. That's why we want to give you everything your employees need to take control of their health each and every day.

Introducing the Wellframe® app, a convenient way for our Care Managers to provide confidential, text-based, one-on-one outreach to members using a smartphone or tablet. They'll get guidance, support and a personalized care plan to help achieve their health care goals.



- Employees and their families connect conveniently via text with licensed health care professionals when they need advice or support
- Using these one-on-one conversations and member data, we develop personalized care plans to keep healthy employees healthy and complex conditions in check, lowering medical costs by $500-$2,000+ per Excellus BlueCross BlueShield member based on risk tier*
- Employees get guidance for things like general wellness, weight loss, smoking cessation, diabetes, high blood pressure and more
- 80% of Excellus BCBS members on Wellframe® have successfully addressed a health issue

Free mobile health support for smartphone or tablet

Excellus | Everybody Benefits

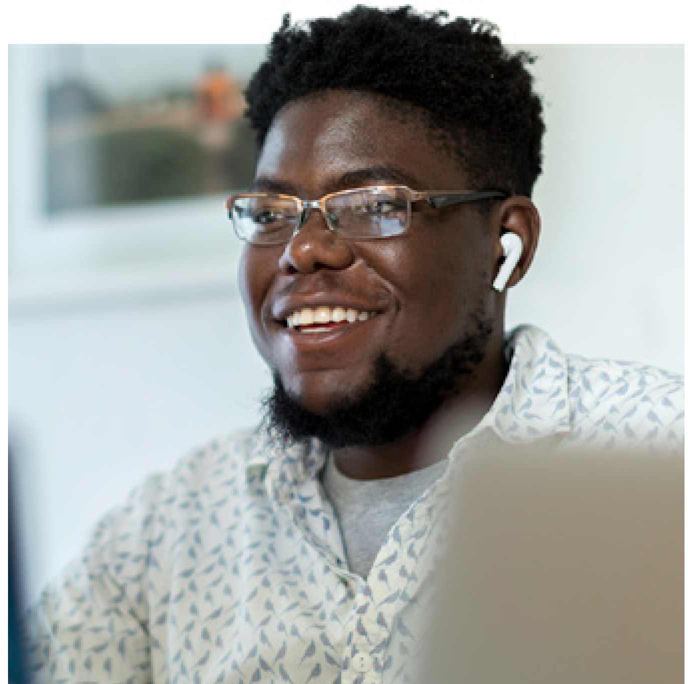
$500–$2000+

saved per Excellus BCBS member based on risk tier*

Employees average

49 TEXTS

with care managers compared to just 4.5 phone calls, and stay connected longer



"My cholesterol is down, my triglycerides went from 600 to 300, my blood pressure is 118/52. These results are all because of you, who got me started, gave me the information that I needed and kept me going along the way. Thank you."

– Excellus BCBS Wellframe user

Put continuous care at their fingertips

Wellframe can give your employees free access to help manage issues like these:

- Substance use
- Anxiety
- Depression
- Coronary artery disease
- Congestive heart failure
- Diabetes management
- Maternal health
- High blood pressure
- Asthma
- Stress management
- Weight loss
- Smoking cessation
- Emotional wellbeing

To learn more about how Wellframe can improve outcomes and control costs, talk to your broker or Excellus BCBS Account Manager today.

Excellus

*2018 Health Plan data provided by Wellframe®

Working together, supporting your teams' diabetic care

Health care works best when it works together. That's why Excellus BlueCross BlueShield provides a coordinated, caring, personalized and holistic health insurance experience that connects the dots for you and your employees, improving care and helping to manage costs for everyone.

We understand that your employees living with diabetes are affected in every aspect of their life. Managing diabetes well is paramount in helping them stay healthy, avoid complications, and manage rising costs. That's why our personalized, comprehensive diabetes management program is designed to address every employee's unique needs.

Employees receive care that's built just for them

Our team of clinical experts ensure employees who are identified as having a rising risk or more enhanced diabetic needs are provided personalized support and guidance to manage their diabetes. This results in improved outcomes, behaviors and overall diabetic health. Nearly **94%** of members engaged in our program report feeling comfortable following their health care provider's recommendations.

Our comprehensive identification model provides personalized outreach and comprehensive engagement strategies that meet your employees where they are.

Identification: Through a combination of referrals, management reports, and sophisticated data analytics, we identify members with gaps in care and proactively reach out to members meeting specific criteria.

Outreach: Our on-staff Diabetes Care Management Team coordinates with one another – and our provider network — to deliver the right level of support and guidance to meet each employee's needs. This team includes:

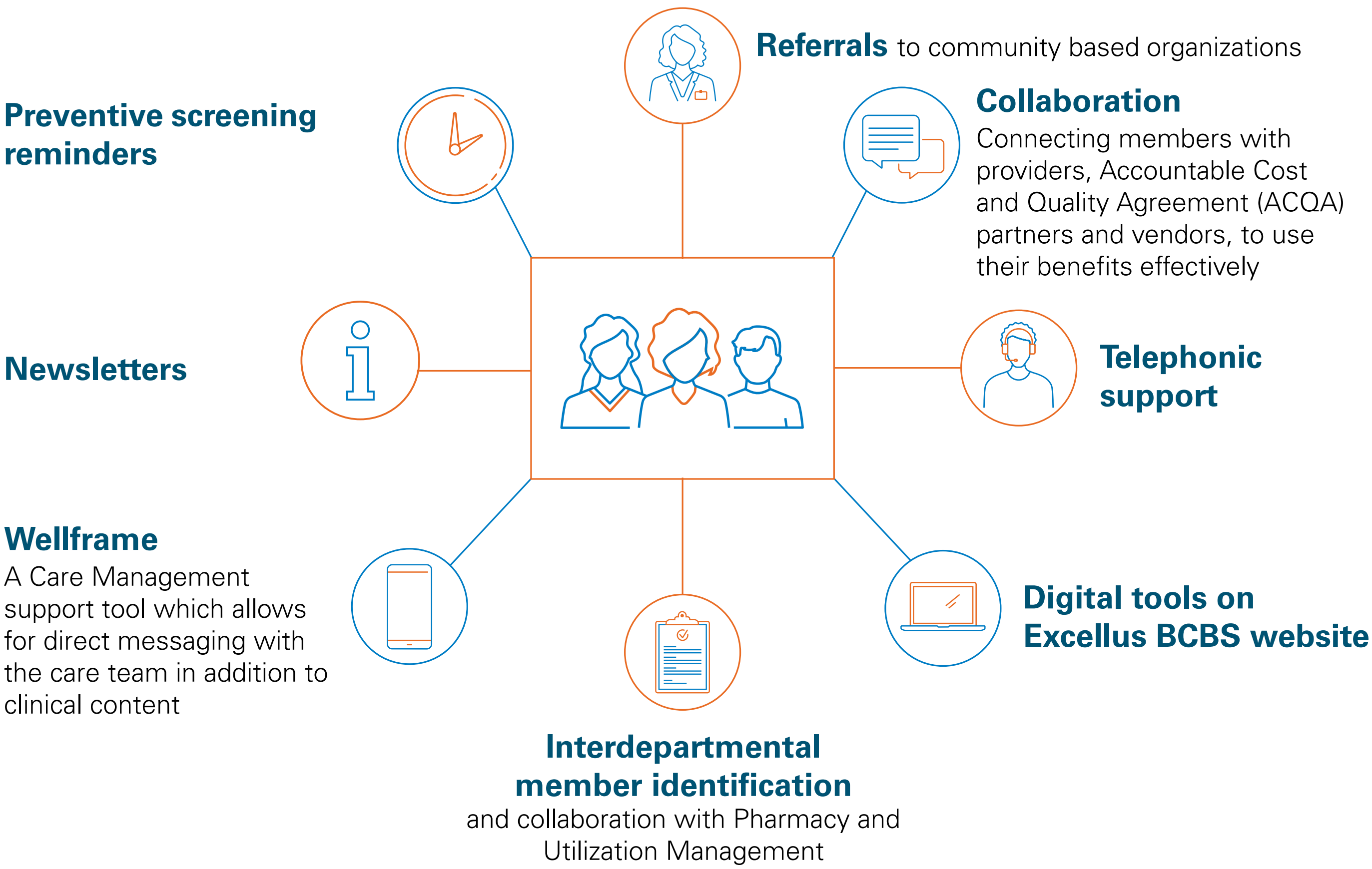
- Registered Nurses, Registered Dietitians, Licensed Social Workers, Pharmacists, Physical Therapists, Medical Directors, Respiratory Therapists, Certified Diabetes Care and Education Specialists[3]

Engagement: A case manager works with the on-staff clinical team, assessing the whole person to develop a personalized care plan to each employee's unique needs, including identifying high dollar drug utilization, behavioral health needs, barriers to care and coordination with their providers.

Personalized member care

A complete team in every employee's corner

Using a comprehensive approach we connect with employees in many ways:



$8K	**cost avoidance** per engaged member[1]
32%	**decrease** in Emergency Department visits[1]
49%	**decrease** in inpatient hospitalizations[1]

Higher-touch support for those who need it[3]

In addition to our standard Care Management Team we also have Certified Diabetes Care and Education Specialists (CDCES) on staff.

The CDCES offer personalized coaching, clinical support, and a structured education curriculum based on American Association of Diabetes Educators (AADE7), engaging members who are newly diagnosed and who have poorly managed conditions.

Discover more ways our comprehensive approach is working for you and your employees at ExcellusForBusiness.com

Wellframe is an independent company that provides a health and wellness support mobile app to Excellus BCBS members.

1 Outcomes data is based on full year 2022 claims experience for members engaged in CM/DM with a primary diagnosis of Diabetes, using a Pre/Post methodology.

2 Member reported satisfaction outcomes are based on 2023 CM/DM satisfaction surveys sent at time of case closure and represent members engaged in Chronic condition/Disease Management.

3 Available to all fully insured group plans. Buy-up for self-funded and minimum premium groups.

Improving health, enhancing care, and lowering costs

Surgery decision support with Welvie

Surgery is often a huge decision — and at times, a scary one. While there have been many great advances in technology and practice, there are still very real risks. Adding to the concern, 50% of some surgeries may not be medically necessary.[1] It's a decision that requires careful consideration. Yet when a doctor mentions surgery, very few question it.

We offer Welvie My Surgery℠ to inform, empower and give employees and their covered family members what they need to make the best choices possible.

It pays to know Welvie — $25, in fact.

Employees will get a $25 Amazon gift card for completing Steps 1-3 of the Welvie My Surgery program and a short survey.

The gift card is available to them and any covered family members once every 365 days.

Help weighing their options

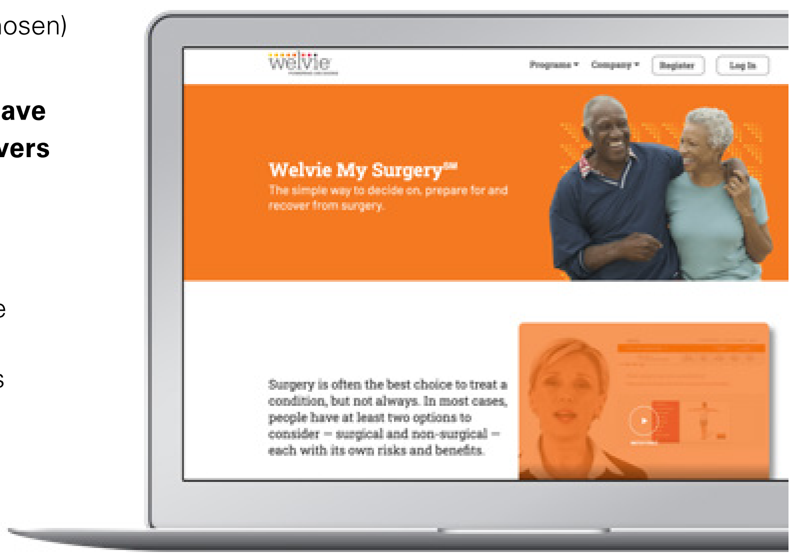
In six easy steps, Welvie My Surgery guides employees through the entire surgery decision-making process. They'll learn how to work with their doctor to:

- Make sure they have the correct diagnosis
- Explore surgical and non-surgical treatment options
- Prepare for and recover from surgery (if surgery is chosen)

Armed with these new insights, employees can have more meaningful conversations with their caregivers about creating the best possible outcome.

Proven results[2]

- 93% of participants say our programs helped prepare them to speak with their doctor
- 93% of participants would recommend the programs to friends and family
- 92% of participants plan to use our programs in the future



[1] Peter Whoriskey and Dan Keating, "Spinal Fusions Serve as Case Study for Debate over When Certain Surgeries Are Necessary," The Washington Post, October 27, 2013.
[2] "Evaluation of the Shared Decision Making (SDM) Health Care Innovations Awardees Third Annual Report," Acumen LLC, February 7, 2017.
Welvie is an independent company that provides a surgery decision program to Excellus BCBS members.

Personalized member care

When powerful pharmacy solutions meet personalized care, everybody benefits.

People count on prescription coverage every day to stay healthy, and employees tend to use it more than any other part of their health plan. For businesses, that means pharmacy benefits are a very big part of taking care of employees. The challenge? They can also be a very big driver of costs.

With all that in mind, you need a partner who is committed to making sure your employees can get the medications they need at a price they can afford — and who never stops finding ways to better care for your team while keeping costs down.

That's exactly what you get when you choose Excellus BlueCross BlueShield to manage your pharmacy benefits — and we prove it every day.

1. Our model is built for your benefit.

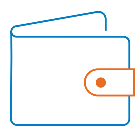
You'll get a partner with both local and national expertise, no biases or conflicts of interest, and the flexibility to create and offer the lowest-cost formulary based on your needs.

60,000+

national, regional and local independent pharmacies in our network[1]

2. We bring a more complete approach — and more value.

We take a complete, end-to-end approach, bringing you a complete suite of offerings and innovative programs that drive access, quality, and safety while driving toward the lowest net cost.



$66.07 PMPM savings for employers

through our utilization management programs[1]

3. We're driving progress through partnership.

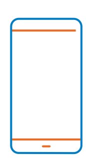
Providing the best possible care for patients requires constant improvement. Whether developing new services and programs or partnering with like-minded organizations, we're proactively bringing together the best of the industry — and bringing it to you.

$64.8M in Rx savings

achieved over a five-year period by providers engaged in ACQAs[2]

4. The experience is easy. For everybody.

We provide a seamless, personalized experience for members and employers at every step, whether it's simplifying compliance, integrating vendor solutions or answering questions for members.



99% of pharmacy-related

customer service calls resolved on first call[3]

[1] Based on 2025 health plan data
[2] Based on 2021-2025 health plan data
[3] Based on 2022-2023 Health Plan data

Experience a more comprehensive approach to pharmacy care

We offer the following programs to our fully insured groups at **no additional cost**.

ADVANCED OPIOID MANAGEMENT PROGRAM[1]	This program focuses on preventing abuse, addiction and overdose of opioids before they start through point-of-sale edits, physician alerts and member education.
AUTOMATIC PRESCRIPTION DISCOUNT[1]	The automatic prescription discount program provides discounts on medications outside a member's pharmacy benefit through a seamless and automatic process at the point of sale. It lets members and their dependents pay the lowest price possible for the medications they may need.
BIOSIMILAR OPTIMIZATION	Biosimilars are an important way to help spur competition that can lower health care costs and increase access to important therapies. Excellus BlueCross BlueShield has been a national leader in biosimilars since their inception.
DIABETES UTILIZATION MANAGEMENT	Utilization management for diabetics includes the application of prior authorization and step therapy to diabetic medications, equipment, and testing supplies under their medical benefit.
GENERIC ADVANTAGE PROGRAM	Under this program, if a member fills a brand-name medication when there is a generic equivalent available, the member will pay the difference between the generic medication and the higher cost brand, plus the generic copay.
HOME DELIVERY	Members can get maintenance medications delivered right to their front door - increasing adherence and savings over the retail pharmacy.
MANDATORY MAIL*	Member's maintenance medications are delivered directly to their homes and no longer filled at a retail pharmacy. Home delivery is the most cost effective channel and increases member savings for up to a 90-day supply of maintenance medications.
MANDATORY SPECIALTY DRUG BENEFIT	Members buy costly specialty medications at a pharmacy that participates in our specialty pharmacy network, where we can achieve lower costs and experienced specialty services.
MEDSYNC®[1]	Allows patients to synchronize their medications and pick up their routine prescription refills at the pharmacy on a single, convenient day each month.
ONCOHEALTH[2]	Our strategic partnership with OncoHealth helps us develop and administer evidence based medical and pharmacy policies to ensure the highest-quality cancer care.

*Optional for fully insured groups at no additional cost.

PATIENT ASSURANCE PROGRAM℠	Program aimed at combating the escalating costs of diabetic and cardiovascular therapies. Members will pay no more than $25 per 30 days for eligible drugs. Up to $50 is provided by manufacturer assistance and in some instances a discount by the health plan. This happens immediately at the point of sale.
PHARMACY CONCIERGE	This program focuses on controlling costs by driving appropriate utilization of medications. It's a retrospective utilization management support program that identifies and provides voluntary insights to providers. Our core value proposition is minimal disruption.
PRIOR AUTHORIZATION	Our clinical pharmacists and physicians review medication requests to ensure appropriate drugs and doses are being prescribed. Certain medications require prior approval before the medication is covered.
QUANTITY LIMITS	Setting quantity limits ensures an appropriate amount of medication is being used for each indication by aligning the dispensed quantity of prescription medication with FDA-approved dosage guidelines.
RATIONALMED®	Addresses otherwise unidentifiable safety issues related to prescription drugs in real-time and sends safety alerts that address dangerous interactions, gaps in care, and potential misuse to dispensing pharmacists and prescribers for immediate notification and action.
SEMPRE HEALTH	Sempre Health is an SMS text-based program that addresses prescription affordability and increases adherence for eligible members. The program provides a member copay incentive for filling their medication on time, each month.
REQUIRED SITE OF CARE REDIRECTION	This program provides outreach to members who are currently receiving certain infusion drugs at high-cost facilities and aids in transitioning members to home infusion or lower cost facilities. The goal is to promote member convenience and accessibility to care while lowering costs.
SPECIALTY DRUG BENEFIT OPTIMIZATION	The goal of the program is to drive affordability by reducing spend for specialty drugs that can be converted from the medical benefit to the pharmacy benefit at a lower net cost.
SPLIT FILL	Patients try expensive medications with potentially serious side effects to confirm effectiveness and tolerance before paying for a full 30-day supply.
STEP THERAPY	The step therapy program encourages the safe and cost-effective use of medications. Certain medications are not covered until one or more therapeutically equivalent medications have been tried first.

If you have more questions about pharmacy benefits for fully insured plans, please contact your dedicated account manager.

1 The Advanced Opioid Management Program, Automatic Prescription Discount, MedSync, Patient Assurance Program, RationalMed, and SafeGuardRx, are programs of Express Scripts, an independent company, providing pharmacy programs to Excellus BCBS members.
2 Excellus BCBS is partnering with OncoHealth, an independent company, to provide clinical expertise regarding hematology and oncology medical specialty drug and pharmacy drug prior authorization reviews for members.

Personalized member care

Virtual Care

We understand that absence from work due to both office visits and illnesses alike impacts your clients' business productivity and, ultimately, their profitability. But it's as important as ever to get the necessary urgent care and behavioral health care when it's needed.

If their primary doctor isn't available, telemedicine may be an option for them. Excellus BCBS provides 24/7/365 access to virtual urgent care, physical therapy, dermatology and behavioral health care via our partners **MD Live® virtual care** and **Vori Health.**

Our virtual care program helps:

- Reduce costs, while increasing employee access to high-quality health care
- Decrease absenteeism and improve productivity by reducing visit times
- Increase member peace of mind by providing care in the comfort and safety of their home

MD Live: Urgent Care ($0, before deductible)

If a primary care doctor is not available or instead of going to the ER/urgent care center, your employees can use virtual care through MD Live, which is covered in full for all members.

When to use virtual Urgent Care:

- Allergies
- Asthma
- Cold and Flu
- Constipation
- Diarrhea
- Joint Aches
- Nausea
- Pink Eye
- Rashes
- And more

Vori Health: Physical Therapy ($0, before deductible)

If an employees primary doctor recommends physical therapy to decrease pain, virtual physical therapy might be a great options. Our partnership with Vori Health works by designing a personalized treatment plan so they can help get back to living their life.

When to use virtual Physical Therapy:

- Back aches
- Joint pain
- Knee injuries
- Muscle strains

MD Live: Behavioral Health ($0, before deductible)

Employees can consult with a psychiatrist or choose from a variety of licensed therapists from the privacy of their home. Through MD Live behavioral health appointments can be scheduled as needed or on a recurring basis with the same provider.

When to use Behavioral Health Telemedicine Services

- Addiction
- Anxiety
- Bipolar Disorders
- Depression
- Eating Disorders
- Grief and Loss
- LGBTQ Support
- Panic Disorders
- Stress
- And more

MD Live: Dermatology (Specialist cost share, before deductible)

Employees can get a diagnosis, treatment, and prescription (as needed) from a board certified dermatologist for more than 3,000 skin, hair, and nail conditions in an average turnaround time of 24 hours using MD Live.

When to use virtual Dermatology Services

- Acne
- Alopecia (Hair Loss)
- Cold Sores
- Dermatitis
- Eczema
- Fungal Skin Infections
- Psoriasis
- Rosacea
- Suspicious Spots & Moles
- Warts
- And more

A cost share may apply for virtual services through an in-network provider.

MD Live is an independent company providing virtual care services to Excellus BlueCross BlueShield members.

MDLIVE Medical Group (DE), P.A, MDLIVE Medical Group, PA and other MD Live related independent professional entities provide the clinical services made available by MD Live.

Vori Health is an independent company that offers virtual musculoskeletal (back, neck and joint) health care and physical therapy services to Excellus BlueCross BlueShield members.

Personalized member care

Make big moves in musculoskeletal (MSK) management

Musculoskeletal disorders (MSDs) are one of the leading drivers of health care expenses in the U.S. and are the second-highest cost for the health plan. Currently, in-person physical therapy (PT) compliance is a known issue, and the lack of follow-through creates greater downstream costs and complexity. Excellus BCBS offers virtual MSK (back, neck, and joint) health care and physical therapy services to our members. These services are administered by Vori Health, an independent company.

vori health

Virtual PT can help:

- **Reduce** unnecessary invasive treatments and trips to the emergency room, resulting in lower overall costs
- **Reduce** absenteeism, resulting in higher work productivity
- **Increase** physical therapy engagement, resulting in better quality of care
- **Increase** ease and speed of access to care, resulting in better compliance with treatment

The Virtual Physical Therapy benefit is included in all small group plans.

In 2021,

$800 million

was spent by the health plan for MSK-related costs*

(Not inclusive of direct and indirect costs related to workers' compensation)

MSDs accounted for a median of

8 days

away from work**

In 2021, an estimated

9.5 million

visits were made to the emergency room for MSK conditions***

* "Work-Related Musculoskeletal Disorders and Ergonomics," Centers for Disease Control and Prevention [CDC], 2019.

** Health Plan data

*** Estimates of Emergency Department Visits in the United States, 2016-2021, " Centers for Disease Control and Prevention [CDC]

Women and family health

To help put employees and their employers at ease, we developed our specialized **Maternity Care Program.** It combines our care management expertise with technology to help control costs and provide expecting families with the right level of support, when and where they need it. Because when families get the care and resources to give all babies a healthy beginning, everybody benefits.

Key components of our approach to maternity care:

In recent years, complications during pregnancy and childbirth

increased by

31.5%[1]

Factor in the average cost of delivery currently topping $16,000 — plus the business impacts a bundle of joy can bring — and it's easy to see why pregnancy can generate as much anxiety as excitement.

Excellus BCBS Bright Beginnings Maternity Care Management Team

Our on-staff Maternity Care Management Team consists of experts in virtually every area of prenatal and postpartum care, all led by a registered nurse care manager.

Bright Beginnings Program[2]

Focusing on early intervention, prenatal education and personalized support throughout pregnancy, postpartum, and in cases where NICU care is required. Every expecting mother who chooses to participate is paired with a dedicated Registered Nurse Care Manager to work with throughout their journey.

NEW! Woman and family health support through Ovia Health[3]

Ovia Health by Labcorp is a comprehensive solution that supports women and families through every stage of life — from fertility and pregnancy to postpartum, parenting and menopause. With personalized guidance, digital tools and 1:1 access to specialists and/or licensed health care professionals, Ovia Health connects members to the care and support they need for better health outcomes and greater confidence throughout their journey. Ovia Health is embedded for all Small Group plans.

Support you need, all in one place

For those in the Maternity Care Program, the free Wellframe® App provides easy access to self-management tools, educational resources and support. Moms and dads have access to behavioral health programs addressing everything from maternity issues and general wellness to anxiety and depression.

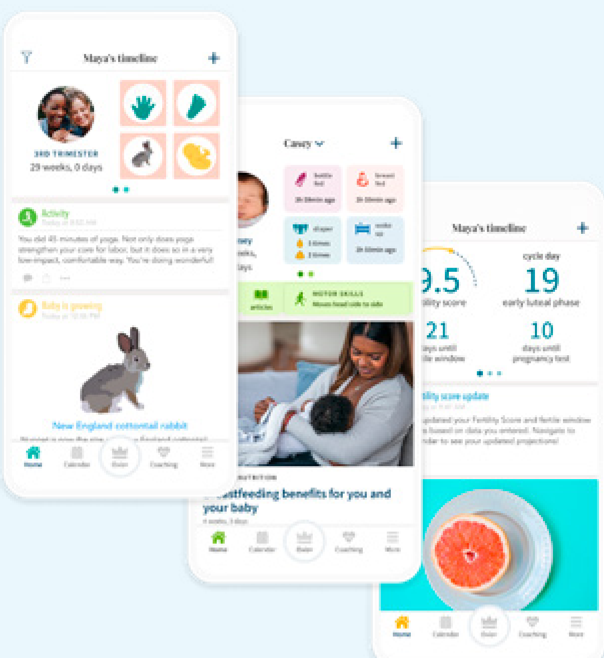
1 2019 Health of America Report, Blue Cross Blue Shield Association
2 Additional group costs may apply, depending on your funding arrangement
3 Ovia Health by Labcorp is an independent company offering digital women's health solutions to Excellus BlueCross BlueShield members. Pending contract finalization.

Personalized member care

Personalized digital support for women and families in partnership with Ovia Health

Supporting healthier families across every stage of life

Excellus BlueCross BlueShield has partnered with Ovia Health by Labcorp[1], a leading digital family health solution, to support employees across the women's and family health journey. Through the Ovia Health app, employees can access support for reproductive health, family planning, pregnancy, parenthood, and menopause—all in one platform. The solution combines evidence-based guidance, personalized content, health tracking tools, and access to clinical experts, helping employees navigate each stage with confidence.



Comprehensive, personalized family health support

Members can access:

- Personalized health programs tailored to their life stage and goals
- Fertility, pregnancy, postpartum, parenting, and menopause support
- Symptom, cycle, fertility, pregnancy, and overall health tracking tools
- Educational articles, videos, and interactive resources
- Milestone reminders and personalized recommendations
- Health assessments and action plans
- Mental health, nutrition, sleep, and wellness support
- Secure messaging and guidance from licensed health care professionals
- Family health resources for partners and caregivers

Dedicated clinical experts, when employees need them

Ovia Health's care team delivers secure, confidential support led by physician leadership and supported by specialists including nurses, midwives, lactation consultants, doulas, mental health specialists, menopause-certified practitioners, nutrition coaches, social workers, benefits navigation experts and more.
Support is available 24/7 through the app, helping members get answers, navigate benefits, and access trusted guidance across fertility, pregnancy, parenting, and menopause.

Contact your account representative to learn how Ovia Health can help you support your employees' family health goals while delivering measurable value to your organization.

Personalized member care

Proven results

Reproductive health and family building

Ovia Health is designed to help families grow using the paths to parenthood that make the most sense for them.

The data-driven fertility tracker makes it easy for members to understand where they are in their cycle, when to take an ovulation test, when to speak to a provider, and when they might be entering perimenopause. Ovia Health's programs include endometriosis education, Polyendocrine Metabolic Ovarian Syndrome (PMOS) management, male fertility, menopause education, and more.

reduction in Assisted Reproductive

up to **65%** Technology (ART) utilization*

up to **47%** reduction in multiple gestations*

Children's and family health

From the first days of postpartum through a little one's early years and beyond, Ovia Health is for parents with kids of all ages, and for future parents preparing to bring a child into their life.

Created with the entire family in mind, Ovia Health's programs and health coaches can support members with topics such as infant sleep and parent fatigue, breastfeeding, sleep training, adoption, and more.

breastfeeding

87% initiation rate infant

98% vaccination adherence rates

88% 1-year employee retention post-birth

3x more frequent mental health screenings than national average

Pregnancy management

Ovia Health provides members with support to help them have the happiest and healthiest pregnancy possible. By tracking symptoms and following physician-developed clinical programs such as breastfeeding preparation, gestational diabetes prevention, mental health education, and more, Ovia helps members identify concerns before issues emerge.

up to **54%** reduction in preterm delivery and NICU stays*

up to **14%** reduction in preeclampsia*

up to **24%** reduction in c-sections*

Supporting healthier families. Reducing health care costs. Strengthening your workforce.

Excellus | Ovia Health by labcorp

* Note that these outcomes reflect the greatest improvement experienced by a single client for these clinical condition areas. Other clients may have experienced different outcomes in these clinical areas. Actual results may vary based upon initial prevalence rate and engagement rates.

1 Subject to final contract terms.

Personalized member care

Wellbeing Programs

Our workplace wellbeing services are built on an integrated strategy aimed at maximizing the value of the health plan for employers and improving the overall physical, emotional, and financial health of employees. We provide targeted wellbeing strategies to drive satisfaction, savings and improved health outcomes.

Wellbeing tips:

Monthly wellbeing e-newsletter packed with timely health insights, wellness tips, and links to programs designed to support total wellbeing.

Wellbeing webinars:

Each month we host live webinars led by Excellus BCBS experts-including medical directors, registered dietitians, and care managers. Topics range from nutrition and heart health to mental wellbeing. All of your employees are welcome to attend. The webinars are recorded and archived on the Excellus BCBS YouTube page.

Healthy habit challenges:

Turnkey employee wellbeing challenges on topics like nutrition, movement, and mindfulness that include email templates, flyers, surveys, trackers and more.

Blue365:

Exclusive discounts on gym memberships, fitness gear, weight-loss programs and more.

A healthy team is

According to Gallup, employees who strongly agree that their employer cares about their overall wellbeing are: **71%** **less likely to report experiencing burnout**

*https://www.gallup.com/workplace/507974/leaders-ignore-employee-wellbeing-own-risk.aspx

Wellbeing for all, all in one place

ThriveWell,* a digital home base dedicated to engaging teams in health and wellbeing, supported by Personify Health.

Our partnership with Personify Health will give employees the tools to make small, everyday changes to their wellbeing that are focused on the area they want to improve the most. They'll build healthy habits, have fun with friends, and experience the lifelong rewards of better health and wellbeing.

Within ThriveWell, employees will have the ability to:

Connect a fitness tracker so they can log activity and watch for small improvements over time.

Set their interests by choosing to work on areas that matter the most to them, like eating habits, sleep, physical activity, relationships or finances.

See a clear picture of their health with a certified Health Risk Assessment (Health Check).

Add friends and family, connecting with up to 10 others to help encourage and motivate one another.

Gather coworkers for the latest company step challenge! Or gather a small group of coworkers or friends, and challenge one another to start a new healthy habit.

Use the digital coaching tool to make simple changes to their health, one small step at a time.

ThriveWell will be available to employees through the Personify Health mobile app and web browser.

Visit Join.PersonifyHealth.com/ThriveWell to get started

* Embedded for all Small Group plans.

Personify Health is an independent company and offers a digital wellbeing service on behalf of Excellus BlueCross BlueShield, a nonprofit independent licensee of the Blue Cross Blue Shield Association.

Healthy employees help drive business forward

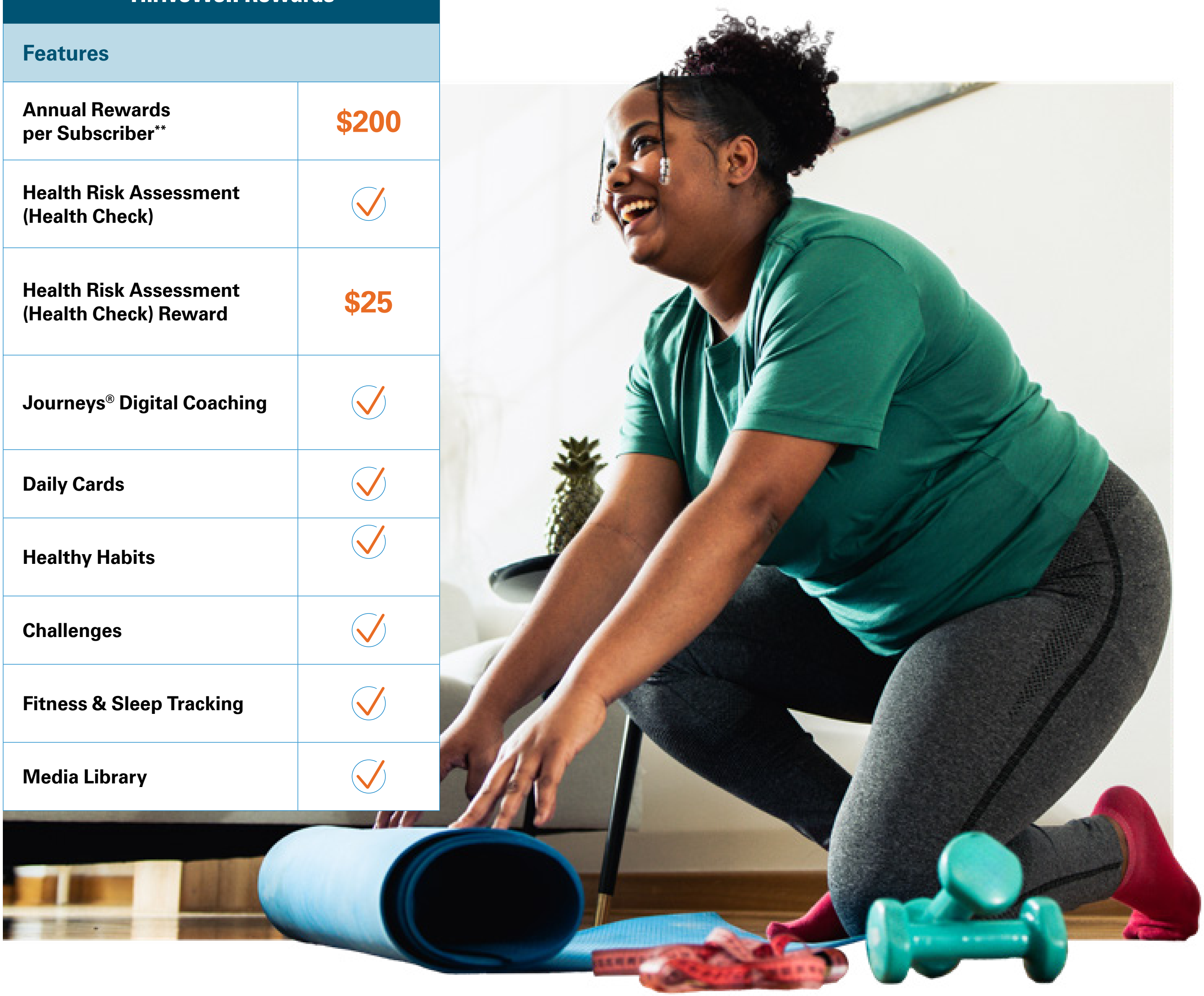
Our embedded rewards program is designed to provide employees with helpful incentives for getting and staying healthy.

90%
of members are more effective in their role at work*

18%
reduction in absenteeism*

$1,029
per member average claims cost reduction*

ThriveWell Rewards	
Features	
Annual Rewards per Subscriber**	$200
Health Risk Assessment (Health Check)	✓
Health Risk Assessment (Health Check) Reward	$25
Journeys® Digital Coaching	✓
Daily Cards	✓
Healthy Habits	✓
Challenges	✓
Fitness & Sleep Tracking	✓
Media Library	✓



*2018-2023 data provided by Personify Health

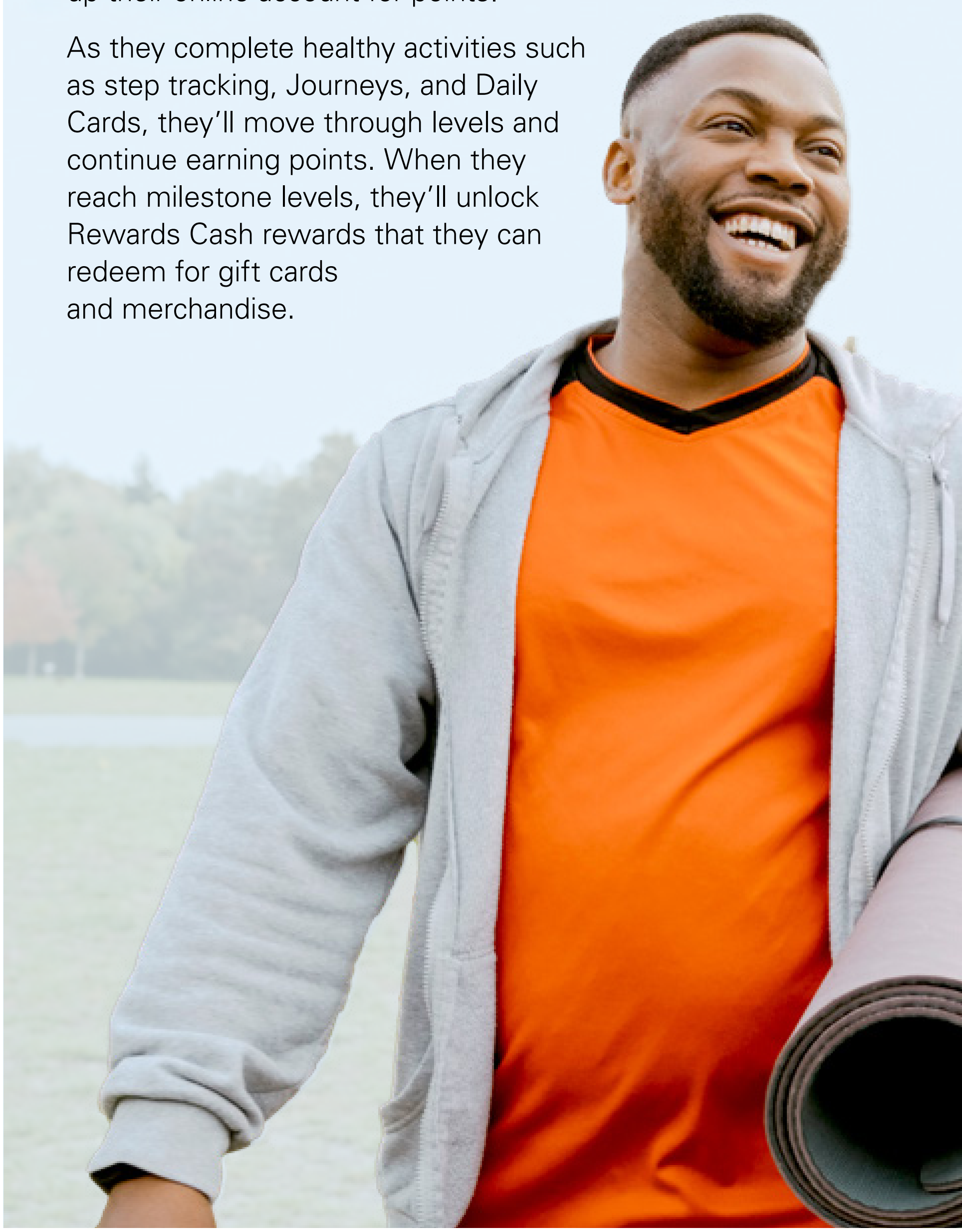
**Annual rewards are embedded for all small group plans. Rewards of up to $200 per subscriber and $200 per spouse, or domestic partner, for a total rewards payout of up to $400 per plan year.

It’s easy to earn rewards by making healthy decisions.

Rewards are a combination of a points and levels game structure with the addition of specific action rewards. The action reward can be earned by completing the Health Risk Assessment (Health Check). This setup allows employees to focus on a few specific actions to earn a reward and will also give them a game experience of working through levels.

Employees will start by registering and setting up their online account for points.

As they complete healthy activities such as step tracking, Journeys, and Daily Cards, they’ll move through levels and continue earning points. When they reach milestone levels, they’ll unlock Rewards Cash rewards that they can redeem for gift cards and merchandise.



52%

of members reported decreased stress levels, critical for mental health*

68%

of members improve clinical health metrics across BMI, blood sugar levels, and blood pressure*

66%

of high-risk hypertensive members reduced blood pressure*

78%

of member respondents have developed more positive daily habits*

* 2018-2023 data provided by Personify Health

Download the Excellus BCBS App and register online

When members sign up for an Excellus BCBS online member account, they get instant access to all their benefits, tools, member-only resources and more.

Member Card(s)
View or order

Claims
Submit, view and download

Find Providers
Find in-network doctors or specialists

Costs and Spending
Estimate medical costs, track deductibles, view out-of-pocket spending

Benefits and Coverage
View a summary

Get Rewards
Access available spending and rewards programs

Go Paperless
Receive available documents electronically

Register or log in today

Visit ExcellusBCBS.com

Members can take their health plan with them 24/7

Download the app!

5 easy steps

It's easy to get started with an online member account.

1. **Have member card handy**
2. **Visit our website or download our app**
3. **Complete registration**
4. **Choose username and password**
5. **Verify email** (Tip: An email will be sent during registration)

Every member will have access to personalized information based on their own plan. Creating an account is easy. To get started, visit ExcellusBCBS.com/Register.

SECTION 5

Broker and employer tools

Broker and employer tools

Online tools

Enroll and update

Enroll and Update is an online benefit management program for brokers, employers, and employees that offers increased collaboration opportunities, streamlines the service process and is intuitive and easy to use.

Highlights of the enroll and update tool

- Add new hires; access, enroll, or decline coverage; manage terminations
- Prepare enrollment reports such as coverage detail, transaction history and employee census
- Schedule reports
- Check the status of employees' benefits quickly and easily
- Approve employee transactions right from the home screen
- Save and come back to enrollment transactions

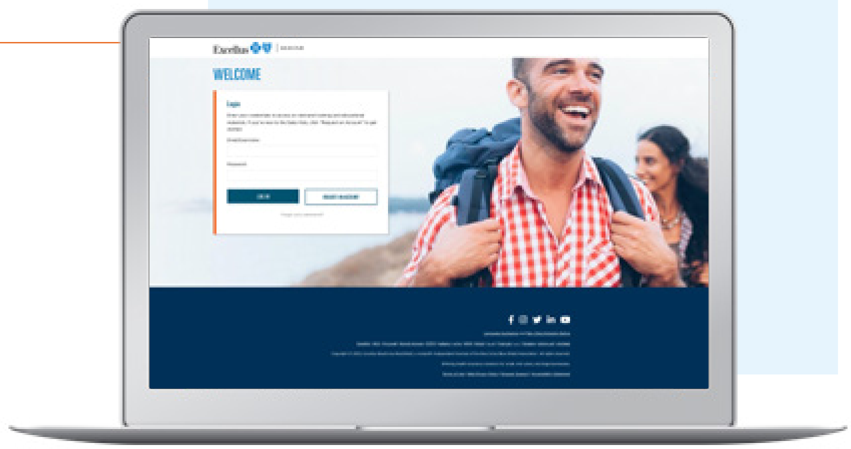
Sales Hub

With our Sales Hub, you have a virtual destination for on-demand training videos and educational materials. And we recently updated the experience to make it easier to access more of the resources you need.

Topics covered include:

- New broker education
- Annual open enrollment updates
- New product offerings

Explore it today at ExcellusForBusiness.com/SalesHub



Enjoy more convenience with online bill pay and invoicing

With Excellus BCBS, groups have 24/7 online access to bill payment and invoicing services. Plus, we've recently added enhanced features, redesigned our invoices and simplified the user experience.

Improved Payment Options

- View current and past invoices or download as PDF or CSV
- Make a full or partial payment
- Set up automatic payments
- Pay invoices with different bank accounts
- View complete payment history

Easy-to-Manage Settings

- Get real-time payment status and balance updates
- Receive confirmation of payment or share receipts via email
- Choose to have invoices delivered on paper, online, or both
- Activate email notifications for when an invoice is available

Simpler Invoices

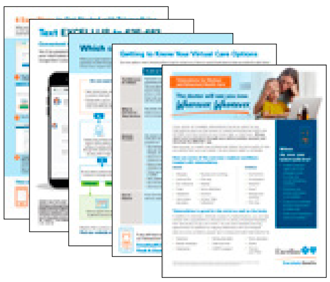
We've redesigned our invoice with a cleaner, simpler design that is easier to understand and use.

Broker and employer tools

Employer toolkits

Specifically for business owners and HR teams, **ExcellusForBusiness.com** is their source for a growing library of turnkey toolkits, downloads, videos, handouts, and fact sheets. We've built it to make sure your clients and their employees get everything they can from their health care plan.

Employer Toolkits Include:

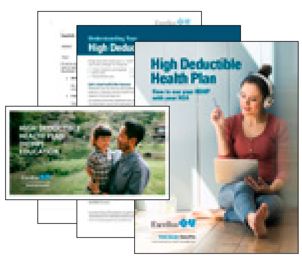

Telemedicine


Behavioral Health

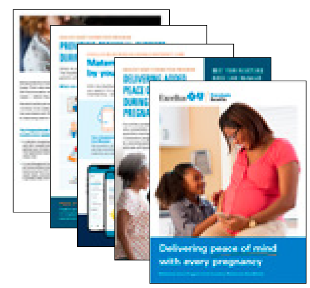

Online Member Account


Wellframe


Preventive Care


High Deductible

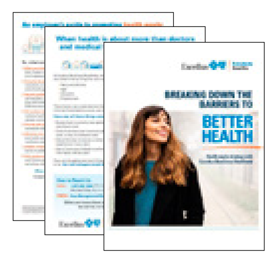

Diabetes


Maternity Care


Primary Care Provider

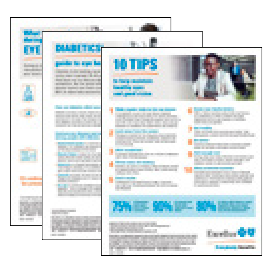

Flu Shot

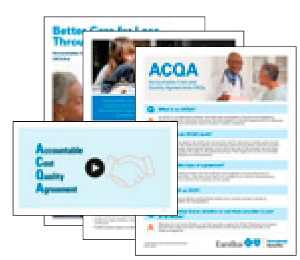

Breast Health


Health Equity


Individual Coverage Options Beyond COBRA


Individual Medicare

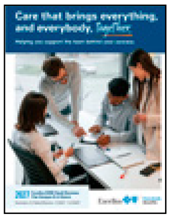

Vision


ACQA

Brochures and sell sheets

Available through WebCRD and your account service consultant

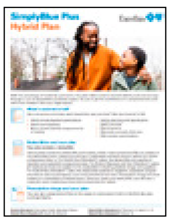
2027 Small Business Plan Designs At-A-Glance



Rochester:	Syracuse:	Utica:
Q1: B-6532	Q1: B-6534	Q1: B-6535
Q2: B-7531	Q2: B-7533	Q2: B-7532
Q3: B-7534	Q3: B-7535	Q3: B-7536
Q4: B-7539	Q4: B-7537	Q4: B-7538

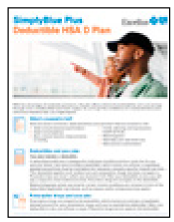
2027 Small Business Excellus SimplyBlue Plus Member Flyers


Copay
B-7840


Hybrid Plans
B-7843

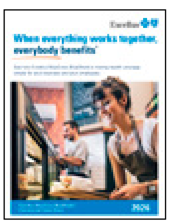

Deductible
HSA A Plans
B-7842


Deductible
HSA B Plans
B-7841


Deductible
HSA D Plans
B-8667

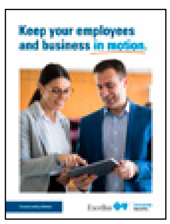

Deductible
A Plans
B-8668

Product Brochures



Commercial
Value Story
B-8631

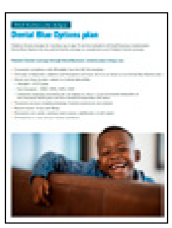
Pharmacy
B-8572

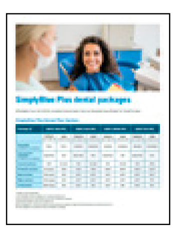


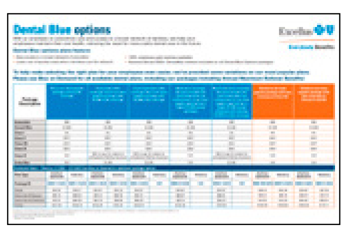
Wellbeing
B-7219

Dental

Pediatric
Dental Brochure
B-6259


Small Group
Dental Blue Options
Sell Sheet
B-4872

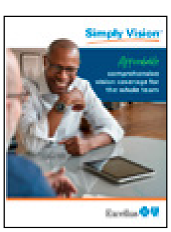

Excellus
SimplyBlue Plus
Dental Brochure
B-7085



Small Business
Dental Products At-A-Glance

Rochester:	Syracuse:	Utica:
Q1: B-7564	Q1: B-7563	Q1: B-7565
Q2: B-7889	Q2: B-7891	Q2: B-7890
Q3: B-7892	Q3: B-7894	Q3: B-7893
Q4: B-7895	Q4: B-7897	Q4: B-7896

Vision

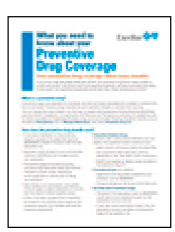


Simply Vision
Group Brochure
B-7746


Simply Vision
Member Flyer
B-7747


Davis Vision
Discount Flyer
Simply Vision
B-7906

Pharmacy



Preventive Rx
Sell Sheet
B-4925

For more helpful resources, visit ExcellusforBusiness.com

B-6531 / 22667-26M