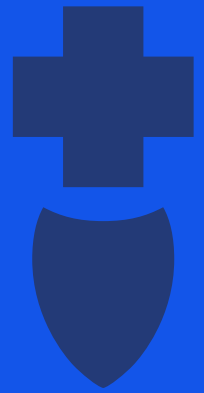


Big benefits built for Hoosier small businesses

High-cost claims protection at predictable costs



Empower your employees with a trusted care partner committed to their health

- You and your employees can count on Anthem’s decades of health benefits expertise with a strong local and national network of care providers.
- Anthem has been serving Hoosiers since 1946, connecting members to the nation’s largest network of more than 2 million doctors and hospitals that contract with Blue Cross Blue Shield companies — more than any other insurer.¹

ACA = Affordable Care Act
 HMO = health maintenance organization
 MEWA = multiple employer welfare arrangement
 POS = point of service
 PPO = preferred provider organization

Discover budget-friendly, quality health benefits with **Advantage 1 Health**, offered exclusively through participating chambers. Anthem Blue Cross and Blue Shield and One Southern Indiana (1si) have partnered to make these health plans available to Indiana small businesses like yours, providing access to comprehensive health benefits at competitive rates usually available only to larger businesses.

Big benefits for small businesses

Tap into the power of MEWA — sharing risk with other small businesses to unlock lower, more predictable costs. With built-in stop loss protection, these flexible plans offer simpler benefits administration, making them a smart alternative to ACA plans.

Choice according to your benefits strategy

Along with financial peace of mind, Anthem offers three distinct network options — giving employers the power to choose the right fit, a level of flexibility many competitors do not offer.

Feature	Blue Access PPO	HealthSync POS	HealthSync HMO
Cost	\$\$\$	\$\$	\$
Primary care	Optional	Required	Required
Referral		Optional	
Pharmacy network		RxChoice	
Formulary		Essential Rx	
Out of network	Covered	Covered at higher costs	Emergencies only



The Anthem difference

Advantage 1 Health helps small businesses control costs while delivering quality benefits. Anthem carefully curates a trusted network of care providers — locally and nationwide. Plans include built-in stop loss protection and whole-health programs at predictable costs.

At no added cost, Advantage 1 Health plans include:

- 24/7 NurseLine — talk to a registered nurse anytime.
- Behavioral health care and chronic condition management.
- Family planning and maternal health support.
- Financial and legal assistance.
- Healthcare navigation support.
- **Up to \$500 in wellness rewards** for employees and covered partners.
- Virtual or in-person counseling.
- Work-life resources.

Cost advantages

- Competitive rates at fixed, predictable payments
- Built-in stop loss protection from high-cost claims
- Additional savings on medical premiums when you bundle dental and vision benefits

\$0 or low-cost virtual care

Employees can have a video visit with a doctor 24/7 for common health concerns using our app. They can also check their symptoms, find a doctor or pharmacy, manage their prescriptions, and price a medication.

Employees can also schedule video visits with a board-certified psychologist, licensed therapist, or psychiatrist.² Appointments are typically available within four days or less for therapists and psychologists, and within two weeks for psychiatrists.³

Ease in use

- One local account management team for questions, issue resolution, and streamlined plan administration.
- Access to Anthem's **award-winning Sydney® Health** app, used more than 80 million times with a 91% digital containment.⁴ This means users find what they need on the app without having to call for help.⁵

Flexible access

- **Choice of access** — broad PPO or high-performing POS and HMO networks.
- **450,000+ behavioral health providers** nationwide — twice as many as our competitors — including several online therapy platforms such as LiveHealth Online, Headway, and Talkspace.^{6,7}
- **Lower-cost plan options** built on preferred benefits, including:
 - **Clear Choice** — Ideal for those who prioritize predictable costs and simplified decision-making. This no-deductible copay plan includes \$0 preventive drugs and basic services, with SmartShopper® and Anthem Diamond Provider built in to reward members for choosing high-value, cost-effective care.
 - **HealthSync Options POS** — Designed for members who want to be more involved in weighing their options. This three-tier plan delivers clear cost advantages for preferred providers while preserving in- and out-of-network flexibility.
- **62,000+ pharmacies** nationwide, including Costco®, CVS Pharmacy®, Kroger®, Meijer®, Sam's Club®, Target®, Walgreens®, and Walmart®.⁸

Unlock improved health outcomes — on top of extra cost savings

By adding dental and/or vision coverage to your medical plan, you can receive a medical premium discount while championing your employees' whole health through **Anthem Whole Health Connection®**. Integrating benefits helps care providers see a more complete picture of care, driving better outcomes, greater efficiency, and increased potential in cost savings for your organization.

Frequently asked questions

What is Advantage 1 Health?

Advantage 1 Health is a self-funded employee welfare benefit plan, trust, or other arrangement that is used to offer group insurance to participating chamber members. It is governed by trustees and bylaws that satisfy the Department of Insurance requirements.

Who makes the decisions for Advantage 1 Health?

A board of trustees oversees the plan, ensuring compliance with applicable laws and regulations.

Why choose Advantage 1 Health over ACA plans?

- **Stop-loss protection** that helps shield employers from high-cost claims and supports greater financial stability.
- **Balanced funding structure** that combines the stability of fully insured coverage with select advantages of self-funding — without requiring employers to assume full claims risk.
- **Enhanced buying power** by aggregating multiple employers under a MEWA structure, which can lower overall costs compared to traditional ACA small group plans.
- **Potential tax advantages**, as MEWA structures may avoid certain ACA-related taxes and fees that can increase fully insured premiums.
- **Easier budgeting and improved financial predictability**, helping employers manage year-over-year costs with greater confidence.

What are the eligibility requirements?

Advantage 1 Health plans are available to small businesses that:

- Are based in Indiana.
- Have 2–50 total employees, with a minimum of two enrolling in the medical plan.
- Are in good standing with a participating chamber of commerce in Indiana.

Is chamber membership a requirement?

Yes, a business must be in good standing with a participating chamber in Indiana to be eligible for Advantage 1 Health plans. For a list of participating chambers, visit 1si.org/advantageone-health.

What are the participation and contribution requirements?

- At least 75% of the net-eligible employees, 50% of total eligible employees, and a minimum of two employees must be covered under the plan.
- The plan also requires a minimum employer contribution of at least 25% of the employee rate for employee/dependent benefits and at least 50% of the employee rate for employee-only benefits.
- If a business contributes 100% of the premium equivalent rate, then 100% of the net-eligible employees must enroll.

Can businesses join Advantage 1 Health plans throughout the year?

Yes, Advantage 1 Health plans typically renew in April, based on the original effective date. However, businesses may join at any time during the year.

How are monthly premiums determined?

Multiple factors impact the monthly premium payment (premium equivalent rate), including:

- Enrollee medical history and expected future health claims risk.
- Enrollee age and gender.
- Number of enrollees.
- Where the business is located.
- Benefits being offered.

What costs are included in the premium equivalent rate?

The premium equivalent rate covers expected claims, administrative expenses, taxes and assessments, and stop loss coverage.

Are there additional payments beyond the premium equivalent rate?

Yes, in addition to the monthly medical premium, businesses are billed for applicable product dues and are required to maintain membership with the participating chamber.

How are renewal rates determined?

Rate adjustments to plans are based on projected claims for the upcoming policy year across the entire plan. Each renewal rate is then determined by the group's individual risk profile, claims experience, and any changes in their demographics or enrollment.

Can plans be terminated at any time?

A business may terminate from their Advantage 1 Health plan at the end of a calendar month during the policy period by providing at least 60 days' written notice. At renewal, written notice must be provided at least 30 days in advance.

Are dental, vision, life, and disability options available?

Yes, employers may offer dental and vision benefits through Anthem. Stand-alone additional benefits, such as life and disability plans, can be contracted through The Standard.

We currently have an Anthem health plan. Will our employees have to change their doctors?

Advantage 1 Health plans offer access to multiple networks. Depending on the plan chosen, coverage is provided through HealthSync POS or HMO or Blue Access PPO networks. In many cases, employees can continue receiving care from their current doctors at in-network benefit levels. Members can use Find Care on the [Sydney Health](#) app or [anthem.com](#) or call the Member Services number on their member ID card to verify if a care provider is covered under their plan.



Smarter care starts here

See how Advantage 1 Health can work for your business.

Call your broker or Anthem Sales representative.

Advantage 1 Health
Lance Allison, Plan Administrator

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New Albany, IN 47150-9538

812-945-0266

advantageone@1si.org

¹ Blue Cross Blue Shield Association: *The Blue Cross and Blue Shield System* (accessed February 2024); bcbs.com.

² Psychiatrists help manage drugs; they do not provide counseling or talk therapy. Prescriptions determined to be a "controlled substance" (as defined by the Controlled Substances Act under federal law) cannot be prescribed through virtual care on the Sydney Health app or anthem.com.

³ Online counseling is not appropriate for all kinds of problems. If someone is in crisis or having suicidal thoughts, it's important that they seek help immediately. They can text, chat, or call 988 (Suicide and Crisis Lifeline), or 911 for help. If it's an emergency, they should call 911 or go to the nearest emergency room. Emergency services are not provided through virtual care on the Sydney Health app or anthem.com.

⁴ Digital Health Awards®, 2024 Digital Health Gold Award: healthawards.com.

⁵ Digital Product & Experience, 2024 Accomplishments: A Year in Review.

⁶ Blue Cross Blue Shield Association data, March 2023.

⁷ Comparing Blue Cross Blue Shield Association 2022 network data vs. same-period competitive data from Becker's Payer Issues: *The size of 5 payers' mental, behavioral provider networks* (December 2022); beckerpayers.com.

⁸ CarelonRx internal data, December 2024.

Sydney Health is offered through an arrangement with Carelon Digital Platforms, a separate company offering mobile application services on behalf of your health plan.

LiveHealth Online is offered through an arrangement with Amwell, a separate company, providing telehealth services on behalf of your health plan.

Talkspace, Inc. and Therapymatch, Inc. d/b/a/ Headway are separate companies providing behavioral health services on behalf of your health plan.

EAP products are offered by Anthem Insurance Companies, Inc.

CarelonRx, Inc., is an independent company providing pharmacy benefit management on behalf of your health plan.

Life and disability products underwritten by The Standard a separate company that does not offer Blue branded products and services. The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company of 1100 SW Sixth Avenue of Portland, Oregon, in all states except New York, where insurance products are offered by The Standard Life Insurance Company of New York of 360 Hamilton Avenue, Suite 210, White Plains, New York. Product features and availability vary by state and company, and are solely the responsibility of each subsidiary. Each company is solely responsible for its own financial condition. Standard Insurance Company is licensed to solicit insurance business in all states except New York. The Standard Life Insurance Company of New York is licensed to solicit insurance business in only the state of New York.

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