

**The Chambers of Commerce
in Hamilton County and
ADVANTAGE Health Solutions, Inc.SM**

*A partnership that offers an
exclusive insurance product!*



ADVANTAGE

...rising above the service you expectSM

The Chambers of Commerce in Hamilton County have partnered with ADVANTAGE to offer an exclusive insurance product!



...rising above the service you expectSM

The partnership between the Chambers of Commerce in Hamilton County and ADVANTAGE Health Solutions, Inc.SM provide business members with medical plans that include wellness and preventative benefits, comprehensive care management and access to a proprietary network of physicians and other healthcare providers.

All businesses with a membership in any of the Chambers of Commerce in Hamilton County with 2+ employees are eligible to participate in the group health insurance offered exclusively through ADVANTAGE, at a discounted rate. This includes the local Chambers in Carmel, Fishers, Noblesville, Westfield, Cicero ("Hamilton North") and Sheridan.

BENEFIT PLANS OFFERED

There are *multiple health benefit plans* being offered that include preferential pricing not available in the marketplace. These benefit plans include in network plans, point of service plans and high deductible plans that are HSA qualified. ***All plans are offered to member organizations at a 5% discounted rate!***

Businesses that join or are already members of any of the Chambers of Commerce in Hamilton County are eligible to have their medical premiums **reduced by 5%!**

Additionally, all plans have the option of choosing between several pharmacy riders and four benefit riders: vision, family planning, chiropractic care and morbid obesity.

COMMITMENT TO SERVICE

Each employer group of ADVANTAGE will have their own dedicated Account Manager to assist with all enrollment, service and renewal activities. Additionally, all employer groups will have direct access to one of ADVANTAGE's executive management team members.



EMPLOYER VALUE

By taking advantage of this exclusive insurance product offering, you will have access to managed care solutions that improve outcomes, keep costs low and improves the health and wellness of our local communities!



...rising above the service you expectSM

www.advantageplan.com

1-877-901-2237

PREVENTATIVE CARE

Preventive care and routine annual physicals

Routine gynecological services

Routine mammograms

Routine prostate specific antigen testing (PSA)

Routine blood cholesterol screening

Colorectal cancer screening

Routine immunizations

Routine hearing exams

Smoking Cessation

CARE MANAGEMENT PROGRAMS

ADVANTAGE is committed to ensuring quality healthcare for all members. ADVANTAGE has several personalized, comprehensive care management programs covering a wide range of chronic diseases and conditions. These care management programs include:

Asthma

Diabetes

Coronary Artery Disease (CAD)

Congestive Heart Failure (CHF)

Hypertension

Migraine Headaches

Chronic Obstructive Pulmonary Disease or COPD

Our care management programs are aimed at helping members better control their condition through personal support and enriched partnerships with their healthcare providers.



For additional information, please contact your Hamilton County Chamber of Commerce, your insurance agent or Steve James at ADVANTAGE at (317) 573-2835.

•HAMILTON COUNTY CHAMBERS•

• CARMEL 317.846.1049 • FISHERS 317.578.0700 • NOBLESVILLE 317.773.0086 •

• HAMILTON NORTH 317.984.4079 • SHERIDAN 317.758.1311 •

• WESTFIELD 317.804.3030 •

ABOUT ADVANTAGE:

ADVANTAGE Health Solutions, Inc.SM is a locally owned and operated managed care health plan in the state of Indiana. ADVANTAGE offers comprehensive healthcare benefits to employer groups of all sizes. ADVANTAGE works with employers in a consultative approach to deliver the best benefit solutions for you and your employees while still being sensitive to your bottom line.



...rising above the service you expectSM

www.advantageplan.com | 1-877-901-2237

RELATIONSHIP VALUE



...rising above the service you expectSM

Why are the Chambers of Commerce in Hamilton County and ADVANTAGE Health Solutions partnering?

In an effort to provide additional value to its members, the Chambers of Commerce in Hamilton County have partnered with ADVANTAGE Health Solutions, Inc.SM (ADVANTAGE) to provide a unique health insurance product. The medical plans available as a result of this partnership provide wellness and preventative benefits, comprehensive disease and utilization management, and access to a proprietary network of physicians and providers.

Who is ADVANTAGE? ADVANTAGE is a local provider owned managed care organization located in Indianapolis and licensed throughout Indiana. Their core values include integrity, service, respect and quality. ADVANTAGE offers comprehensive benefits that emphasize preventive health services that promote healthy lifestyles and personal accountability. By partnering with physicians, employers and employees ADVANTAGE is able to develop benefit plans that incorporate wellness interventions.

What provider networks are available through ADVANTAGE? ADVANTAGE has its own provider network that offers comprehensive coverage in Indiana.

In addition, groups with 51 or more eligible employees can offer a PPO-type network as a “buy-up” option for employees that would like an alternative network selection.

For a detailed list of providers, please visit ADVANTAGE’s website at www.advantageplan.com.

Who is eligible for the Chamber group health insurance program? As a business member of a Hamilton County Chamber of Commerce you are eligible to participate in the group health insurance as long as you have at least two or more employees. The group health insurance is offered exclusively through ADVANTAGE at a discounted rate.

This includes the local Chambers in Carmel, Fishers, Noblesville, Westfield, Cicero (“Hamilton North”) and Sheridan.

Licensed and appointed insurance agents can also request quotes.

For more details, please contact your local Chamber representative, your insurance agent, or ADVANTAGE.

Is there a benefit to getting health coverage through the Chamber? Yes. By getting coverage through the Chamber you will have access to managed care solutions that improve outcomes, keep costs low and improve the health and wellness of the local communities.

Each employer group that becomes a member of ADVANTAGE will have their own dedicated Account Manager. These dedicated Account Managers will assist with all enrollment, service and renewal activities.

In addition, the Chamber offers benefit plans that include preferential pricing not available in the marketplace. A 5% discounted rate is available to members of any of the Chambers of Commerce in Hamilton County regardless of company location.

HOW TO OBTAIN A QUOTE



...rising above the service you expectSM

How do I get a quote if I do not have an insurance agent? Contact Steve James at ADVANTAGE at (317) 573-2835 or sjames@ADVANTAGEplan.com.

How do I get a quote through my insurance agent? Your agent must be a licensed and appointed agent with ADVANTAGE. Ask your broker to provide the information below to his/her ADVANTAGE Sales Executive. For additional information, please contact ADVANTAGE.

What information is needed in order to get a firm quote and what are the underwriting requirements?

- Confirmation of membership in one of the Hamilton County Chambers of Commerce. Please provide your membership number at the time of your quote request.
- Census (in Excel format) of eligible employees including gender, date of birth, and coverage tier (employee only, employee plus spouse, employee plus child (ren), family). Please also include any eligible employees that are waiving coverage.
- Requested effective date of coverage
- Requested plan options
- Individual health statements are required for groups with 2-50 eligible employees. Health statements must be signed and dated within 60 days prior to the effective date of coverage with ADVANTAGE.
- Detailed claims information (including monthly paid claims and high claimant report) covering 24 months for groups with 51 or more eligible employees. If claims are not available, the group will need to submit individual health statements.
- ADVANTAGE will accept another carrier's health statement (i.e., Anthem, Principal, Humana, etc.) as long as all employees sign an ADVANTAGE Authorization for Release of Health Information form.

How long will it take to get my quote? Groups with 2-50 eligible employees can expect a quote returned in 3-5 business days. Groups with 51 or more eligible employees can expect a quote returned in 7-10 business days.

What if I am a currently covered by an ADVANTAGE medical plan not offered through the Chamber?

How do I get access to the Chamber discount plans and rates? Current ADVANTAGE members are subject to the same underwriting procedures as non-ADVANTAGE members. The discounted rates offered through the Chamber are exclusive to Chamber members. For more information, please contact your insurance agent or ADVANTAGE.

What if I want to change my insurance to ADVANTAGE before the actual renewal date with my current group medical carrier? All eligible Chamber members can enroll in the Chamber health plan on the 1st of any month. However, they will be subject to normal underwriting procedures, and their new renewal date will be one (1) year from their effective date of new coverage through the Chamber.

What plan designs are available? ADVANTAGE offers multiple plan options: in network plans, point of service (POS) plans and high deductible health plans (HDHP) that are HSA qualified. In addition, ADVANTAGE offers several pharmacy options and benefit riders (vision, family planning, chiropractic care & morbid obesity) to choose from. Please contact your local Chamber representative, your insurance agent or ADVANTAGE for additional information regarding the plans available through your Chamber.

Will the quotes I receive reflect my 5% Chamber discount? The initial quotes that you will receive will NOT include your Chamber discount. In order to receive the 5% Chamber discount you will need to provide your Chamber membership information at the time of enrollment. For more information, please contact your insurance agent or ADVANTAGE.

continued on back

How are wellness and preventive care covered? All plans include co-pays for wellness/preventive care services received through participating providers. Wellness and preventive care services include routine annual physicals, routine gynecological services, routine mammographies, routine prostate specific antigen (PSA) testing, routine blood cholesterol screening, colorectal cancer screening, routine immunizations and routine hearing tests. Routine vision exams and a discount off vision supplies can be purchased as a rider.

Does ADVANTAGE offer care management or disease management programs? Yes. As part of ADVANTAGE's commitment to ensuring quality healthcare, personalized and comprehensive management programs are offered for a wide range of diseases and chronic conditions. ADVANTAGE's disease management programs (called *Care-ADVANTAGE*) are designed to focus on a member's specific health condition, and to provide members with personal support and services. These programs are designed to help members better control their condition through a planned partnership between the member, their healthcare provider, and ADVANTAGE. This approach facilitates more effective communication between physicians and patients, as well as continuous disease management support to members affected by chronic conditions. Some of the disease management programs include asthma, coronary artery disease (CAD), congestive heart failure (CHF), diabetes or high blood sugar, hypertension or high blood pressure, and migraine headaches. As a member of the disease management program, you may be eligible for reduced prescription co-payments on medications you take for your chronic conditions by utilizing the ADVANTAGE prescription mail order program. ADVANTAGE also offers a smoking cessation program and covers some smoking cessation medications.

How are radiology services covered? Radiology services performed on an **outpatient** basis at a participating physician's office or facility are covered at 100% (not subject to any deductible or coinsurance, some exceptions may apply on HDHP).

Why do I need to choose a primary care physician (PCP)? A primary care physician model promotes wellness education and coordination of care. All enrollees accessing the ADVANTAGE proprietary provider network must elect a PCP. The doctor's name and telephone number will be printed on the member's ID card. In addition, family members are allowed to choose different PCP's in separate hospital networks (i.e., one family member can have a PCP in the St. Vincent hospital network and another family member can have a PCP in the St. Francis hospital network). Although all members must select a PCP, most specialist services can be "self-referred" to a participating in-network provider **without a referral**. It is important to note that even when referrals are not necessary, pre-certification is mandatory for any outpatient surgical procedure or any planned hospitalization. Groups with 51 or more eligible employees can offer a "buy-up" plan that includes a PPO-type network option. Employees enrolling in the PPO network option must also elect a PCP on their enrollment form, but are not obligated to use that provider for any services. Members enrolling in the PPO-type network are asked to select a PCP so that their doctor's name and phone number are printed on their ID card.

How does ADVANTAGE cover employees or dependents that live outside of the service area?

Subject to underwriting approval, ADVANTAGE will cover employees or dependents that reside outside of the service area by utilizing one of their partnering regional or national PPO networks.

Are there rules for minimum employer contribution and employee participation? Each employer must contribute a minimum of 50% of the "employee only" premium for each enrolling employee. Each employer group must have a minimum of 75% of their "net eligible" employees participating in the health plan. Employees who waive coverage due to "other qualified coverage" (i.e., through a spouse, Medicare, etc.) are not included in the "net eligible" calculation.

HOW TO ENROLL



...rising above the service you expectSM

What forms are necessary to enroll with ADVANTAGE? How do I obtain them?

In order to enroll with ADVANTAGE, a group must submit the following forms:

- Individual health statements (which may not be needed for groups with 51 or more eligible employees that provide adequate claims information)
- Employee Enrollment Form
- Employer Group Application

To obtain the necessary forms, please contact your local Chamber representative, your insurance agent, ADVANTAGE or visit the ADVANTAGE website www.advantageplan.com.

How many plans can I offer to my employees? Groups with 10 or more enrolled employees can offer two different plan options.

How are rates structured? Groups with 2 - 20 enrolled employees will receive age/sex banded rates (rates that are based on each employee's age, gender and coverage tier). Groups with 21 or more enrolled employees will receive 4-tier composite rates (employee only, employee plus spouse, employee plus child (ren) and family).

Will ADVANTAGE give credit towards the deductible satisfied from the member's prior medical carrier?

Members who submit a detailed Explanation of Benefits (EOB) from their prior group medical insurer will receive credit on any portion of their deductible satisfied in the same calendar year. ADVANTAGE does not give coinsurance credit.

How do I pay my monthly premium? ADVANTAGE will accept both printed checks as well as electronic payment for monthly premiums.

What technology is available to employers? Once you are a member of ADVANTAGE, you can sign up for ADVANTAGE-connect. This unique online tool provides access to most health plan information. Employers can add/delete members, pay premium, change addresses, check eligibility & benefits, request a new ID card or print a temporary ID card and access provider directories or prescription drug information. In addition to many of the same features, members can also view the status of their claims.

How many ID cards will the subscriber receive? ID cards will be mailed to the subscriber's home. A separate ID card will be produced for each family member enrolled.

What, if any, claims reporting is available? Employers with less than 51 eligible full-time employees will not receive any claims reporting as that information is not credible, and is subject to HIPAA privacy guidelines. Employers with 51 or more enrolled employees will receive detailed claims information at renewal when requested; subject to HIPAA rules and regulations.

How do I contact ADVANTAGE? Please call Steve James at (317) 573-2835 or email sjames@ADVANTAGEplan.com

Does the Chamber program offer access to any ancillary insurance products? Yes. Employer sponsored and voluntary products such as life, dental, vision and disability are offered by United Healthcare (UHC) through the Chamber. For more information, please contact your local Chamber representative, your insurance broker or Deb Makepeace at United Healthcare at (513) 603-6757 or dmakepeace@uhc.com.