

small business packages
1-100 employees

choice, confidence,
and coverage start here.



Effective January 1, 2020

blue 
california

Why Blue Shield of California?

Our mission is to ensure all Californians have access to high-quality health care at an affordable price. For more than 75 years, Blue Shield of California has been trusted to provide health coverage for our communities.

Helping California's small businesses grow with the right health coverage

Whether it's a budding one-person operation or a booming 100-employee enterprise, small businesses across California share the same need for a healthy and productive workforce.

That's why we offer a wide range of small business health plans with solutions for controlling costs and promoting health.

From Central Valley farms to Silicon Valley startups, and San Diego surf shops to North Coast lumber mills, we cover more than 40,000 California small businesses.

Wherever your business is and whatever it may be, Blue Shield has a health plan that is the right size for you.

Blue Shield of California offers choices for small business

We offer a wide variety of plans reflecting different plan package options, plan families, networks, and metal levels to ensure there is the right plan for every small business. This guide helps explain the options available.

2019 Blue Shield of California Off-Exchange Package for Small Business									
Off-exchange PPO plans									
Plan	Deductible ¹	Copay	Out-of-pocket maximum	Emergency room	Rx deductible ¹	Pharmacy benefits ³			
						Tier 1	Tier 2	Tier 3	Tier 4 & Specialty
Platinum PPO 0/0	\$0	\$0	\$4,000	\$250 + 10%	\$0	\$0	\$30	\$50	30%
Platinum PPO 0/10	\$0	\$10	\$4,000	\$150 + 10%	\$0	\$5	\$30	\$50	30%
Platinum PPO 250/15	\$250	\$15	\$4,300	\$150 + 10%	\$0	\$5	\$30	\$50	30%
Gold PPO 0/20	\$0	\$20	\$7,650	\$250 + 30%	\$0	\$15	\$40	\$60	30%
Gold PPO 500/30	\$500	\$30	\$7,800	\$250 + 20% ²	\$100	\$15	\$50 ²	\$80 ²	30% ²
Gold PPO 750/30	\$750	\$30	\$7,800	\$250 + 20% ²	\$250	\$10	\$40 ²	\$70 ²	30% ²
Gold PPO 1200/35	\$1,200	\$35	\$7,800	\$250 + 20% ²	\$300	\$10	\$40 ²	\$70 ²	30% ²
Silver PPO 1800/55	\$1,800	\$55	\$7,800	\$250 + 35% ²	\$300	\$20	\$75 ²	\$115 ²	30% ²
Silver PPO 2300/45	\$2,300	\$45	\$7,800	\$350 + 40% ²	\$300	\$20	\$70 ²	\$115 ²	40% ²
Bronze PPO 5000/70	\$5,000	\$70	\$7,800	50% ²	Integrated with medical	\$20 ²	\$65 ²	\$90 ²	30% ²
Bronze PPO 6850/65	\$6,850	\$65	\$7,800	50% ²	Integrated with medical	\$20 ²	\$65 ²	\$90 ²	30% ²
Bronze PPO 6500/50	\$6,500	50%	\$7,800	50% ²	Integrated with medical	50% ²	50% ²	50% ²	50% ²
Off-exchange PPO Savings plans									
Plan	Deductible ¹	Copay	Out-of-pocket maximum	Emergency room	Rx deductible ¹	Pharmacy benefits ³			
						Tier 1	Tier 2	Tier 3	Tier 4 & Specialty
Silver PPO Savings 2000/25%	\$2,000	25% ²	\$6,500	\$150 + 25% ²	Integrated with medical	\$20 ²	\$65 ²	\$100 ²	30% ²
Silver PPO Savings 2500/35%	\$2,500	35%	\$6,850	\$150 + 35% ²	Integrated with medical	35% ²	35% ²	34% ²	35% ²
Bronze PPO Savings 5300/40%	\$5,300	40%	\$6,900	\$250 + 40% ²	Integrated with medical	40% ²	40% ²	40% ²	40% ²
Bronze PPO Savings 6900	\$6,900	\$0	\$6,900	\$0 ²	Integrated with medical	\$0 ²	\$0 ²	\$0 ²	\$0 ²
Off-exchange HMO plans									
Plan	Deductible ¹	Copay	Out-of-pocket maximum	Emergency room	Rx deductible ¹	Pharmacy benefits ³			
						Tier 1	Tier 2	Tier 3	Tier 4 & Specialty
Platinum HMO 0/20	\$0	\$20	\$1,900	\$200	\$0	\$5	\$15	\$25	20%
Platinum HMO 0/25	\$0	\$25	\$2,350	\$250	\$0	\$5	\$15	\$25	20%
Platinum HMO 0/30	\$0	\$30	\$2,950	\$250	\$0	\$5	\$15	\$25	20%
Gold HMO 0/30	\$0	\$30	\$6,750	\$325	\$0	\$15	\$35	\$55	20%
Gold HMO 500/35	\$500	\$35	\$7,500	\$300 ²	\$0	\$15	\$35	\$55	20%
Gold HMO 1000/35	\$1,000	\$35	\$7,500	\$300 ²	\$100	\$15	\$35 ²	\$55 ²	20%
Gold HMO 1500/35	\$1,500	\$35	\$7,800	\$300 ²	\$100	\$15	\$35 ²	\$55 ²	20% ²
Silver HMO 2350/65	\$2,350	\$65	\$7,800	50% ²	\$350	\$20 ²	\$85 ²	\$115 ²	45% ²
2019 Blue Shield of California Mirror Package for Small Business									
Mirror PPO plans									
Plan	Deductible ¹	Copay	Out-of-pocket maximum	Emergency room	Rx deductible ¹	Pharmacy benefits ³			
						Tier 1	Tier 2	Tier 3	Tier 4 & Specialty
Mirror Platinum 90 PPO 0/15	\$0	\$15	\$4,500	\$150	\$0	\$5	\$15	\$25	10%
Mirror Gold 80 PPO 250/25	\$250	\$25	\$7,800	\$250 ²	\$0	\$15	\$50	\$80	20%
Mirror Silver 70 PPO 2250/50	\$2,250	\$50	\$7,800	\$400 ²	\$300	\$17 ²	\$65 ²	\$90 ²	20% ²
Mirror Bronze 60 PPO 6300/65	\$6,300	\$65	\$7,800	40% ²	\$500	40% ²	40% ²	40% ²	40% ²
Mirror HMO plans									
Plan	Deductible ¹	Copay	Out-of-pocket maximum	Emergency room	Rx deductible ¹	Pharmacy benefits ³			
						Tier 1	Tier 2	Tier 3	Tier 4 & Specialty
Mirror Platinum 90 HMO 0/15	\$0	\$15	\$4,500	\$150	\$0	\$5	\$15	\$25	10%
Mirror Gold 80 HMO 250/25	\$250	\$25	\$7,800	\$250 ²	\$0	\$15	\$50	\$80	20% ²
Mirror Silver 70 HMO 2250/50	\$2,250	\$50	\$7,800	\$400 ²	\$300	\$17 ²	\$65 ²	\$90 ²	20% ²

1 Calendar-year deductible shown is for an individual. See Summary of Benefits for family plan deductibles.

2 Subject to the calendar-year deductible.

3 Pharmacy benefits cost shares reflect fulfillment through network pharmacy and Level A pharmacies for Trio HMO and Tandem PPO plans.

Choosing the right plan for your small business

Our plan names make it easy to understand the benefits each medical plan offers, following this format:

Metal tier + network name + product type + deductible + copay

Ex: *Platinum Access+ HMO 0/20 OffEx*

Blue Shield offers two plan packages to small businesses outside of Covered California for Small Business.* Groups can offer plans from the **Off-Exchange Package** or the **Mirror Package**, but not both. Off-Exchange Package plans' names end with "OffEx." Mirror Package plans' names begin with "Blue Shield" – this is to align with the naming conventions for Covered California.

To learn more about the health insurance marketplace, visit [HealthCare.gov](https://www.healthcare.gov) or call **(800) 318-2596** [TTY: **(855) 889-4325**].

[The Blue Shield Off-Exchange Package for Small Business](#) is our flagship package and includes up to 56 plans to offer employees. You may select plans combining a variety of products and networks to offer options meeting the range of employees' needs.

[The Blue Shield Mirror Package](#) offers the same seven standardized plans that are offered on Covered California for Small Business directly from Blue Shield. Mirror PPO plans use the same Full PPO Network as off-exchange plans, and mirror HMO plans use the Trio HMO network. Plans in the Mirror Package cannot be offered alongside any plans for the Off-Exchange Package.

Choosing product types within the plan packages

- Preferred provider organization (PPO) plans
- Health savings account (HSA)-compatible PPO high-deductible health plans (HDHPs)
- Health maintenance organization (HMO) plans

PPO plans

All of our off-exchange PPO plans are available with our Full PPO Network or our Tandem PPO Network and include providers in all 58 California counties. Tandem PPO Network is a statewide, high-performing subset of our Full PPO network, providing the same plan benefits as the Full PPO plans at a lower price. Groups may offer Tandem PPO plans alongside Full PPO plans for added savings and flexibility.

All off-exchange PPO plans offer the flexibility to visit a doctor or specialist without a referral. PPO members can also see non-network providers, but may incur higher costs.

HSA-compatible HDHP plans†

Many small businesses opt for high-deductible PPO plan coverage for their employees. Deductibles are higher, but monthly rates are lower, and the plans come with an option of opening a health savings account (HSA) to help pay for qualified medical expenses.

* Federal tax credits are available through Covered California for Small Business to those small business employers that qualify and purchase their coverage on Covered California for Small Business. Talk to Covered California for Small Business at (877) 453-9198, your plan representative, or your broker to discuss your options.

† Although most consumers who enroll in an HDHP are eligible to open an HSA, members should consult with a financial adviser to determine if an HSA/HDHP is a good financial fit for them. Blue Shield does not offer tax advice or HSAs. HSAs are offered through financial institutions. For more information about HSAs, eligibility, and the law's current provisions, consumers should ask their financial or tax adviser. HSA plan features may vary by institution and may be subject to change by those institutions.

HMO plans

Our seven off-exchange HMO plans for small business offered are each available with one of three HMO provider network options: Access+ HMO®, Local Access+ HMO, or Trio HMO. Plan designs are identical, and all specialties and levels of care are included.

- Access+ HMO plans gives members access to more than 38,000 doctors and 320 hospitals.
- Local Access+ HMO plans gives members access to more than 17,000 doctors and 320 hospitals.
- Trio HMO plans are available in 24 counties and give members access to 10,000 doctors from the Access+ provider network. Trio HMO plans come with valuable bonus features not included with other HMO plans. Visit blueshieldca.com/aco to learn more about Trio HMO features and coverage areas.

You may offer Trio HMO plans alongside Access+ or Local Access+ plans, but Access+ cannot be offered alongside Local Access+. A business must be located in the plan's service area to offer an Access+ HMO, Local Access+ HMO, or Trio HMO plan, and eligible employees must live or work in the service area.

Metal levels represent the level of coverage provided with that plan

These levels are standardized for all health carriers as part of the Affordable Care Act and are based on the "actuarial value,"* which indicates the average percentage of health costs that would be covered by Blue Shield for a member.

Platinum = 90%

Gold = 80%

Silver = 70%

Bronze = 60%

Deductible and copay are key components of a plan benefit design

Deductible is the amount a member pays each calendar year for most covered services before Blue Shield begins to pay. Specific covered services, such as preventive care, are covered before a member reaches the calendar-year deductible.

Copay is the fixed dollar amount a member pays for benefits after meeting any applicable calendar-year deductible.

Compare plan benefit details using our Digital Plan Comparison tool

Choose from any of our available health plans and compare the benefits side by side by visiting blueshieldca.com/employerplans.

* The Department of Health and Human Services (HHS) recognizes that health plans need some flexibility in meeting the metal levels. A plan can meet a particular metal level if its actuarial value is within 2 percentage points of the standard. For example, a silver plan may have an actuarial value between 68% and 72%.

Additional types of coverage

Infertility coverage

Infertility treatment benefits are available as supplemental coverage on all PPO, HSA-HDHP, and HMO plans. If your business offers multiple Blue Shield medical plans for employees, the supplemental coverage will be included on all medical plans.

Coverage includes authorized professional, hospital, ambulatory center, and ancillary services, as well as drugs for the treatment of infertility that are self-administered, and injectable drugs administered or prescribed by the provider during a course of treatment.

Specialty coverage – dental plans, vision plans,* and life insurance plans*

Offer whole-person coverage through Blue Shield for easier administration and premium savings. You can now take advantage of our bundling discount with 10% off dental and vision premiums when offered with a medical health plan.

When choosing Blue Shield specialty coverage, you can expect:

- Plan choices based on frequency of benefits, copayments, allowances, and contact lens coverage option
- No waiting periods: employees can begin accessing care after the effective date
- Streamlined administration: one bill, one renewal, and one point of administration for all of your plan information

Dental plans

Our dental networks are among the largest in the state, giving your employees access to a wide range of dental benefits.

Vision plans

We have the largest vision network in California with nearly 7,000 providers and access to major retail chains with convenient evening and weekend hours.

Life insurance plans

Our life insurance portfolio includes flexible plan options to offer your employees the opportunity to obtain coverage for immediate expenses, as well as longer-term obligations.

Affordable life insurance underwritten by Blue Shield of California Life & Health Insurance Company (Blue Shield Life) gives your employees added security during uncertain economic times and life-changing events.

Life and accidental death and dismemberment (AD&D) plans are available with or without medical coverage.

Compare plan benefit details using our Digital Plan Comparison tool

Choose from any of our available dental or vision plans and compare benefits side by side by visiting blueshieldca.com/employerplans.

* Underwritten by Blue Shield of California Life & Health Insurance Company.

Dental plan design

Get more smiles with one of our PPO or HMO dental plans.

Dental PPO plan names are designed to help you and your employees choose the right level of coverage by including the deductible per person/calendar-year out-of-pocket maximum/orthodontic coverage.

Dental HMO plans are available in four levels of coverage, for which you can pick the coverage and frequency of routine and major dental services.

Dual Option Dental enables you to offer any two dental plans, including voluntary plans.

Triple Option Dental allows your clients the following selection capabilities:

- 3 HMOs
- 2 HMOs and 1 PPO
- 2 PPOs and 1 HMO

For detailed plan benefit summaries, visit blueshieldca.com/smallbusiness/dental.

Vision plan design

Vision plans operate on a PPO network with three plan categories to choose from: Basic, Preferred, or Ultimate. Each category offers multiple combinations of benefit coverage for exam copayments, material copayments, frame allowances, and contact lens benefits.

Additionally, plan names correlate to the dollar amount for copayments and allowances to help guide you to the coverage you need.

All new groups receive a two-year initial rate guarantee on their vision coverage, giving you added financial predictability for your health coverage.

For detailed plan benefit summaries, visit blueshieldca.com/smallbusiness/vision.

Life and accidental death and dismemberment plan design options

Give your employees peace of mind by including life insurance with your medical coverage. Blue Shield combines life insurance with comprehensive accidental death and dismemberment (AD&D) benefits to layer coverage when your employees need it the most.

Plans are available in flat amounts, multiples of salary, or graded class. Guaranteed-issue amounts match coverage amounts.

Basic life insurance plans come with travel assistance services as a value-added program. Your employees will have access to a variety of general travel information assistance and medical assistance services when they travel over 100 miles from home or internationally.

AD&D benefits include provisions for: seat belt and airbag, special education for surviving dependents, disappearance, felonious assault, exposure, comatose, common carrier, surgical reattachment, and repatriation.

For detailed plan benefit summaries, visit blueshieldca.com/smallbusiness/life.

Access to care

With medical plans from Blue Shield, your employees get access to a variety of healthcare providers.



Primary care physician (PCP) \$\$\$

The main healthcare provider for your employees' routine medical needs.

Virtual care

Your employees can also get expert advice without leaving home or having to travel to a faraway location.



NurseHelp 24/7SM \$0

Immediate, non-emergency health advice anytime, anywhere from registered nurses by phone or chat at no extra cost



Virtual Care \$\$\$

Specialist care and services through videoconferencing at Adventist Health locations **(for PPO members only)**



Teladoc \$\$\$

Doctors available 24/7 by phone or video to treat non-emergency issues and prescribe drugs as needed

In-person care

When their PCP is not available, your employees can see a healthcare provider, – whether at or near home, or away.



Urgent care* \$\$\$

Walk-in non-emergency care



Heal™ \$\$\$

On-demand doctor house calls to home, work, or hotel **(for PPO members only)**



BlueCard® Program and Blue Shield Global Core \$\$\$

Covered services and urgent and emergency care while traveling, in the United States or abroad†



CVS MinuteClinic® \$\$\$

Walk-in health care at CVS retail locations **(for PPO members only)**

Emotional health

Your employees have access to mental health services to help address personal, family, or work issues.



Mental Health Services Administrator (MHSA) network‡ \$\$\$

Mental health and substance use disorder services, in-person or virtually.

Emergency care

The ER should be used for life-threatening conditions to avoid long wait times and expensive bills.



Emergency room \$\$\$

Immediate care for life-threatening emergencies. **If you have an emergency, call 911 immediately.**

Visit [blueshieldca.com/care](https://www.blueshieldca.com/care) for more details.

* Trio HMO members who need to visit an urgent care center may be required to call their doctor's office each time they seek care. HMOs may require a member's doctor's office to provide authorization before they go to the urgent care center. Members must receive care at an urgent care center that is affiliated with their doctor's medical group or Independent Practice Association, or their plan may not cover the services received.

† For more information and details on benefits or covered services, members should refer to their Evidence of Coverage (EOC) or call the customer service number on the back of their Blue Shield member ID card.

‡ MHSA network services are not available to self-funded (ASO and Shared Advantage), Medicare Advantage (Individual and Group), or FEP PPO members, or in the BlueCard Program.

Help your team get real results

Wellvolution features:

Employer reporting



Ways to boost engagement



Guaranteed data privacy



The all-new Wellvolution® includes the largest curated collection of apps and proven programs and takes the guesswork out of getting healthier.

Sleep better



Sleep is a gold mine for better productivity, increased happiness, and lower healthcare costs. We can help your employees get better sleep and build a lifetime of healthy sleep habits.

Manage stress



You can think, live, and thrive better every day when you keep stress at bay. We can teach your staff how to become more resilient and maintain healthy habits.

Move more



Whether your employees are trying to lose weight, tone up for the beach season, or improve how they feel every day, our tools can help them reach their goals with tailored workout plans.

Ditch cigarettes



With the experiences of thousands who quit and scientific data, our personalized plans can help your workers fight cravings and get to their goals.

Eat healthier



We help members navigate restaurant menus, parties, and snack times by creating new habits for easier shopping and healthier cooking.

Prevent and reverse disease



Our programs can reverse heart disease, reduce risk of stroke or diabetes, and improve quality of life.



To discover the Proven Path for your team, reach out to your Blue Shield representative or visit [wellvolution.com](https://www.wellvolution.com).



Requirements

New group eligibility requirements

A small employer is defined as employing 1 to 100 employees, at least 30 hours per week.

Owner-only (no employees) businesses are not eligible for small group medical coverage. To qualify as a small employer, a business must employ at least one eligible W-2 "common-law employee."

Small employer specialty* benefits-only plan eligibility:

- An owner-only small group (no employees) is eligible for dental, vision, and life insurance policies when purchased without Blue Shield medical plans.
- Two eligible employees or owners are required for life coverage.
- Sole proprietor businesses continue to be eligible for stand-alone small group specialty benefits coverage.

Our dental plans (except voluntary plans) require a 50% employer contribution and 65% employee participation (except during promotional 25% participation periods). Voluntary dental plans don't require employer contributions.

Our small business vision plans (except voluntary plans[†]) require only a 25% employer contribution and 65% employee participation. Voluntary vision plans don't require employer contributions and require a minimum of one enrolling, eligible employee.

Trio HMO plan participation requirements

We're waiving our minimum participation requirements for groups enrolling membership in Trio HMO plans only. No counting or calculating to meet membership minimums – just select Trio HMO plans on the Master Group Application and you can enroll with Blue Shield with a single member.*

Mirror Package participation requirements

A minimum of one eligible employee and at least 70% of all eligible employees must enroll in the Blue Shield mirror plan(s), including any specialty benefits plan offered. Life insurance plans require a minimum of two eligible employees.

Off-Exchange Package medical and specialty participation requirements

Specialty benefits plan participation requirements are the same as the off-exchange medical plan participation requirement and have been reduced from 65% to 25% for groups enrolling five or more employees of the total number of employees enrolled. If a group contributes 100% of premiums for specialty benefits,[†] then 100% of eligible employees must enroll (except for those waiving due to other group specialty coverage through another employer). Blue Shield dental, vision,[‡] and life[‡] insurance plans must be the sole carrier for these plans, even when Blue Shield medical plans are offered alongside another carrier's medical plans.

* All other Blue Shield of California underwriting guidelines and eligibility requirements still apply. Groups changing plans within the first 30 days must meet Blue Shield participation requirements to still be eligible for coverage. The waiver of participation requirements is guaranteed only for the contract term. Blue Shield reserves the right to apply participation requirements on renewal. Groups selecting Trio only for their medical health plans can also add dental or vision coverage with the same minimum participation requirements waived.

[†] When employer contribution for life insurance is 100%, 100% enrollment is required; no waivers are permitted, even for coverage through another employer.

[‡] Blue Shield vision and life insurance plans are underwritten by Blue Shield of California Life & Health Insurance Company.

New group submission checklist

Please be advised that this is just a guideline and that other documentation may be required.

Business check in the amount of the first month's premium or completed Initial Payment Authorization form for first month's premium with a copy of a voided check or check in the amount of the first month's premium.

Master Group Application (**please use current version – outdated versions will not be accepted**).

Enrollment Spreadsheet with MGA (**please use current version – outdated versions will not be accepted**).

Sole proprietor, partner, or corporate officer statement (Owner Affidavit) – to be completed by all eligible owners.

Employee application (**please use current version – outdated versions will not be accepted**).

Refusal of Coverage form (for eligible employees declining coverage or employees declining coverage for eligible dependents).

Prior carrier bill when not submitting a DE 9C under promotion including the page that lists all members on the previous policy (if applicable) and then submit a signed Eligibility/Participation Attestation form.

Most recently filed DE 9C. Please reconcile to note each employee's status; if any employee is terminated, please indicate the employee's termination date.

If there is a new hire who is not listed on the DE 9C, please provide payroll from date of hire **or** W-4 if new hire has not been working long enough to be on payroll yet.

If the owner is not on the DE 9C, please provide proof of participation (most recent K1, Schedule C). If tax documents are unavailable due to time in business, complete Startup Attestation.

Fictitious Business Name Filing is required if the group uses a DBA name, or if there is more than one business name reflecting on any document or ownership paperwork submitted. Note: A Fictitious Business Name Filing is not required when the DBA appears on the business check.

Legal documents (**see UW Guidelines**) – Articles of Incorporation, Statement of Information, Partnership Agreement, etc., that list the names of **all corporate officers/owners/directors**.

Standalone specialty benefits

The new group submission checklist applies to dental, vision,* and life insurance* when provided alongside Blue Shield medical plans. For a simplified checklist of submission requirements when purchasing dental, vision, or life insurance without a Blue Shield medical plan offering, contact your Blue Shield sales representative.

* Blue Shield vision and life insurance plans are underwritten by Blue Shield of California Life & Health Insurance Company.

Our small business health plans are available for groups of up to 100 employees.

Regardless of what size your small business is, you'll find a large selection of plans to meet your employees' priorities. We understand no business is too small to offer coverage and that providing quality benefits is critical in attracting top talent and fueling productivity.

Thank you for selecting Blue Shield. You can count on our commitment to deliver the value and service you expect. Whether you're a business of one or 100, we want Blue Shield to be your first choice – today, tomorrow, and into the future.

blueshieldca.com/employerplans

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