

G U R SUPPLEMENT

Master Policy Number: 07888

Grandfather Status: Y

Effective: 01/01/2025

Group Name: CITY OF ARKANSAS CITY

Meets Minimum Value = Y

EARLY FINAL

CURRENT RATES

	EMP	ECH	ESP	FAM	Rate Structure Code = 4
Health	467.79	946.45	1004.14	1482.79	
Drugs	190.47	372.41	409.50	591.46	
Total	658.26	1318.86	1413.64	2074.25	

Option A

RENEWAL RATES

HEALTH - Comprehensive Major Medical - Blue Choice

					Rate Adjustment Factor	Rate Method
\$200/400 Ded, 80% Coins to \$1000/\$2000, \$25 OVC	584.46	1184.30	1256.59	1856.42	Z.ZZZ	MERIT
Dependents to Age 26	—	—	—	—		
Utilization Management Services	1.40	1.40	1.40	1.40		
Blue Choice	—	—	—	—		
Phys Med/Rehab Benefits Rider	—	—	—	—		
\$100 Emergency Room Copay	—	—	—	—		
Home Social Work Visits/Hospice Unlimited @ 100%	0.00	0.00	0.00	0.00		
OB Benefits Available All Females	—	—	—	—		
Autism Coverage	—	—	—	—		
Telemedicine	—	—	—	—		
Total Health	585.86	1185.70	1257.99	1857.82		

DRUGS

BlueRx Card \$15/\$30/\$45 Copay with Oral Contraceptives	212.23	414.96	456.29	659.03	Z.ZZZ	MERIT
Select Formulary - Maintenance List Included	—	—	—	—		
Dependents to Age 26	—	—	—	—		
BlueRx Mail \$37.50/\$75.00/\$112.50 Copay with Oral Contraceptives	—	—	—	—		
Generic Mandatory, Doctor Can Override, No Penalty for Brand Drugs on NTI List	—	—	—	—		
Total Drugs	212.23	414.96	456.29	659.03		

**** Rates contingent upon Kansas Insurance Department approval ****

Grand Total	798.09	1600.66	1714.28	2516.85		
Total Rate Adjustments	139.83	281.80	300.64	442.60		
Percentage Increase/Decrease	+21.2%	+21.4%	+21.3%	+21.3%		

SIGNED BY: _____ DATE SIGNED: _____ EFFECTIVE DATE: _____
Plan Administrator Representative or Plan Sponsor Representative

SIGNED BY: _____ DATE SIGNED: _____ EFFECTIVE DATE: _____
BCBSKS Representative

G U R SUPPLEMENT

Master Policy Number: 07888

Grandfather Status: Y

Effective: 01/01/2025

Group Name: CITY OF ARKANSAS CITY

Meets Minimum Value = Y

EARLY FINAL

CURRENT RATES

	EMP	ECH	ESP	FAM	Rate Structure Code = 4
Health	454.37	919.25	975.28	1440.16	
Drugs	190.47	372.41	409.50	591.46	
Total	644.84	1291.66	1384.78	2031.62	

Option B

RENEWAL RATES

HEALTH - Comprehensive Major Medical - Blue Choice

					Rate Adjustment Factor	Rate Method
\$500/1000 Ded, 80% Coins to \$1000/\$2000, \$25 OVC	566.30	1147.48	1217.54	1798.72	Z.ZZZ	MERIT
Dependents to Age 26						
Utilization Management Services	1.40	1.40	1.40	1.40		
Blue Choice						
Phys Med/Rehab Benefits Rider						
\$100 Emergency Room Copay						
Home Social Work Visits/Hospice Unlimited @ 100%	0.00	0.00	0.00	0.00		
OB Benefits Available All Females						
Autism Coverage						
Telemedicine						
Total Health	567.70	1148.88	1218.94	1800.12		

DRUGS

BlueRx Card \$15/\$30/\$45 Copay with Oral Contraceptives	212.23	414.96	456.29	659.03	Z.ZZZ	MERIT
Select Formulary - Maintenance List Included						
Dependents to Age 26						
BlueRx Mail \$37.50/\$75.00/\$112.50 Copay with Oral Contraceptives						
Generic Mandatory, Doctor Can Override, No Penalty for Brand Drugs on NTI List						
Total Drugs	212.23	414.96	456.29	659.03		

**** Rates contingent upon Kansas Insurance Department approval ****

Grand Total	779.93	1563.84	1675.23	2459.15		
Total Rate Adjustments	135.09	272.18	290.45	427.53		
Percentage Increase/Decrease	+20.9%	+21.1%	+21.0%	+21.0%		

SIGNED BY: _____ DATE SIGNED: _____ EFFECTIVE DATE: _____
 Plan Administrator Representative or Plan Sponsor Representative

SIGNED BY: _____ DATE SIGNED: _____ EFFECTIVE DATE: _____
 BCBSKS Representative

G U R SUPPLEMENT

Master Policy Number: 07888

Grandfather Status: Y

Effective: 01/01/2025

Group Name: CITY OF ARKANSAS CITY

Meets Minimum Value = Y

EARLY FINAL

CURRENT RATES

	EMP	ECH	ESP	FAM	Rate Structure Code = 4
Health	437.45	884.96	938.90	1386.42	
Drugs	190.47	372.41	409.50	591.46	
Total	627.92	1257.37	1348.40	1977.88	

Option C

RENEWAL RATES

HEALTH - Comprehensive Major Medical - Blue Choice

					Rate Adjustment Factor	Rate Method
\$1000/2000 Ded, 80% Coins to \$1000/\$2000, \$25 OVC	544.28	1102.87	1170.19	1728.79	Z.ZZZ	MERIT
Dependents to Age 26						
Utilization Management Services	1.40	1.40	1.40	1.40		
Blue Choice						
Phys Med/Rehab Benefits Rider						
\$100 Emergency Room Copay						
Home Social Work Visits/Hospice Unlimited @ 100%	0.00	0.00	0.00	0.00		
OB Benefits Available All Females						
Autism Coverage						
Telemedicine						
Total Health	545.68	1104.27	1171.59	1730.19		

DRUGS

BlueRx Card \$15/\$30/\$45 Copay with Oral Contraceptives	212.23	414.96	456.29	659.03	Z.ZZZ	MERIT
Select Formulary - Maintenance List Included						
Dependents to Age 26						
BlueRx Mail \$37.50/\$75.00/\$112.50 Copay with Oral Contraceptives						
Generic Mandatory, Doctor Can Override, No Penalty for Brand Drugs on NTI List						
Total Drugs	212.23	414.96	456.29	659.03		

**** Rates contingent upon Kansas Insurance Department approval ****

Grand Total	757.91	1519.23	1627.88	2389.22		
Total Rate Adjustments	129.99	261.86	279.48	411.34		
Percentage Increase/Decrease	+20.7%	+20.8%	+20.7%	+20.8%		

SIGNED BY: _____ DATE SIGNED: _____ EFFECTIVE DATE: _____
Plan Administrator Representative or Plan Sponsor Representative

SIGNED BY: _____ DATE SIGNED: _____ EFFECTIVE DATE: _____
BCBSKS Representative