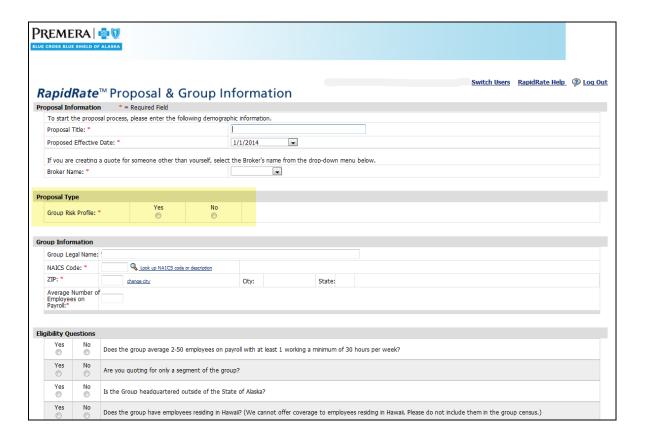
Helpful tips to use RapidRate

Updates to the tool starting with January 1, 2014 quotes

You'll notice that the Rapid Rates tool looks a little different when quoting plans effective January 1, 2014 and later. This is to reflect the new small group metallic plans and requirements from the Affordable Care Act (ACA). These are some helpful instructions to navigate you through this tool.

On the Proposal & Group Information page:

1. The Group Risk Profile option will still be available for 11/1/13 and 12/1/13 proposals. Group Risk Factors are no longer applicable on the metallic plans 1/1/14 and beyond, please select "No" when creating these proposals.



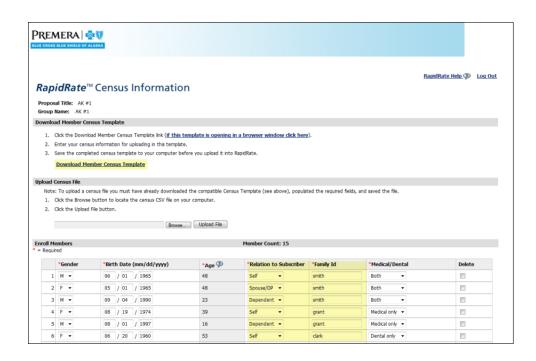
On the **Current Coverage for Groups 2-50** page:

1. Medical duration of current coverage has been removed. Current coverage for medical is no longer a rating factor for groups effective January 1, 2014 and later.



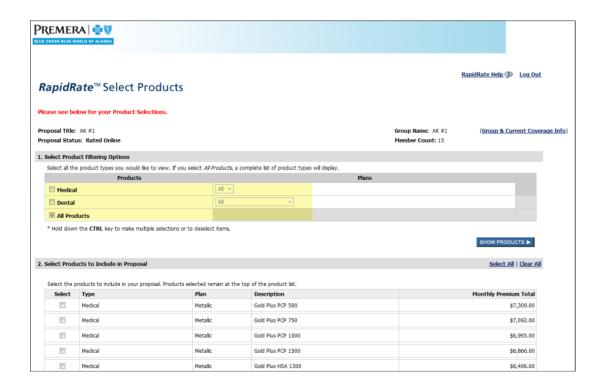
On the **Census Information** page:

- 1. Columns "Medicare Primary" and "Cobra/COC" have been removed. These values are no longer applicable to the Metallic Medical plans as of January 1, 2014.
- 2. Columns "Relationship to Subscriber" and "Family ID" have been added. RapidRate will need to collect this member data for rating purposes.
 - a. Relationship to Subscriber column selections: Self, Spouse/DP and Dependent. If Spouse/DP and/or Dependent are selected, there must be a Self with the same Family ID associated.
 - b. Family ID column: This is limited to 10 characters and can be any alphanumeric combination. The Family ID is a unique family identifier for each family group in the census. e.g. For one family, the Family ID would be "smith" for all members of that family group. This tells the system they are all associated with one family.
- 3. The Census Upload Template has been updated to accommodate the additional fields.



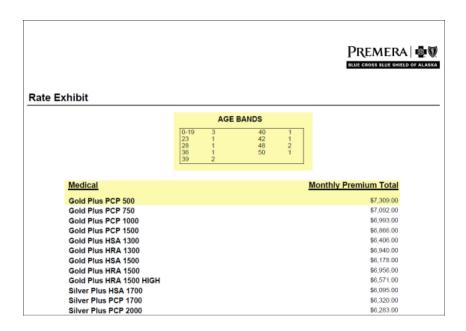
On the **Product Selection** page:

1. If the effective date is January 1, 2014 and beyond - the Products filter on the medical will reflect the new list of metallic small group plans. The Heritage Select and Heritage Plus plan families are no longer available. Previous product filters that applied to these plans will no longer appear either.

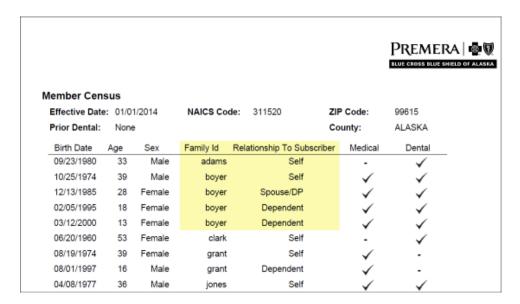


After View/Print Proposal is selected the finalized proposal will have the below changes:

- 1. There will be a small table reflecting the Age Bands of the census that was submitted
- 2. New metallic medical plans rates are now displayed in one Monthly Premium Total. Previously medical rates were broken down and displayed by tier EE, ES, ESC and EC. Dental rates will still be displayed by tier.



3. Census displayed will reflect the new columns of Relationship to Subscriber and Family ID that were added.



4. Underwriting Assumptions have also been updated with the new requirements of the ACA regulations. Please review to understand the changes.



Metallic Small Group Underwriting Assumptions

- 1. This proposal is valid for one month beyond the quoted effective date. The funding arrangement and rates quoted are contingent upon the accuracy and completeness of the information contained in the original RFP submission or available at the time the renewal is released. If at any time prior to the effective date of coverage the group or the agent learn of any information that could materially affect the overall group risk that was not disclosed on the RFP, they must inform Premera Blue Cross Blue Shield of Alaska. In such circumstance, we reserve the right to review and adjust our quoted rates, fees and/or contract terms, and/or withdraw the quote entirely.
- 2. All rates are guaranteed for a 12-month period, except in case of:
 - · An amendment of the benefit plan or contract;
 - Addition or deletion of a subsidiary, corporate division, or affiliated company;
 - · Any change in the employee eligibility or probationary period; or
 - A change in mandated benefits or taxes charged to plans offered by Premera Blue Cross Blue Shield of Alaska and related subsidiaries.
- 3. Proposed rates and benefits are based on the information received at the time of proposal. Final rates and benefits are based on actual enrollment.
- 4. Small employers, who average 2-50 employees on payroll, must have at least 1 employee working a minimum of 30 hours per week in order to qualify for group coverage.