

Group Eligibility Requirements. Other underwriting guidelines will apply.

1–10 Eligible Employees*: 100% of eligible employees seeking coverage must participate.

* Plans for 1 eligible employee not currently available in East Region.

11–25 Eligible Employees: 75% of eligible employees seeking coverage must participate.

26-50 Eligible Employees: 50% of eligible employees seeking coverage must participate.

All groups with 2–50 Eligible Employees: Groups with a COBRA class are eligible if the participants make up less than 10% of the employees seeking coverage with Priority Health. Retirees are eligible if they make up less than 20% of employees seeking coverage with Priority Health. Those eligible for Medicare must enroll in Medicare Parts A & B.

PriorityPOSSM

- No more than 10% of enrolled employees can reside and work out of the service area.

PriorityPPOSM

- At least 50% of the enrolled employees must reside in the Priority Health service area.
- Groups may offer the PPO product for active out-of-area employees (retiree only class does not qualify) alongside another Priority Health product for in-area employees. The in-area and out-of-area benefits should match as closely as possible.
- Subscribers in the Priority Health service area will be enrolled in the **PriorityPPO** Network. Subscribers residing outside the service area must elect one of the selected National Networks as their primary network at the time of enrollment.
- If a member seeks services from a provider that participates with their primary network they will receive in network benefits.
- **PriorityPPO** is a regional network. Therefore, if a member seeks services outside the **PriorityPPO** service area, they may access selected network providers to receive in network benefits.

HealthbyChoice IncentivesSM

- **HealthbyChoice Incentives** is a total replacement product that cannot be offered in combination with any other product. However, a PPO plan may be offered to employees who reside outside of the Priority Health service area.
- This product cannot be wrapped with any third party administrator (TPA).
- If Contraceptive Medication is offered, it will be offered on both choice and standard benefit designs.
- Medicare retirees will be offered the **PriorityMedicare** MAPD program only.

Guidelines for offering multiple plans: Groups with 11-25 Eligible Employees seeking coverage where Priority Health is a total replacement may offer **two** benefit design options. Additionally, groups with 26-50 Eligible Employees seeking coverage where Priority Health is a total replacement may offer up to **three** benefit design options.

Any combination of plans EXCEPT **HealthbyChoice IncentivesSM** may be offered.

- Minimum requirement of 5 enrolled contracts in each benefit level unless one of the plans is an HSA. There is a minimum requirement of 2 enrolled contracts in an HSA.
- Selected plans must either include or exclude Rx coverage.
- There must be at least two differences between the benefit designs in base coinsurance, deductible, office visit copayment and/or Rx copayment.
- If a “gatekeeper” versus a “non-gatekeeper” plan is offered, this will suffice for 2 of the plan differences.
- Only one benefit design may be offered to out-of-area employees. Depending on group size, a group may offer up to three benefit designs in-area and one benefit design out-of-area, for a total of up to four benefit designs.
- HRAs and HSAs will be allowed as base products in any combination.
- At renewal, segments may be terminated if participation requirements are not met.