



# Serving those who serve Indiana

24-hour coverage for Indiana's public employees





## Welcome, Hoosier family.

Today, the need for quality health plans is more important than ever. At Anthem Blue Cross and Blue Shield, we are honored to bring those plans to the public employees of Indiana and their families, through a strong partnership with Indiana Public Employers' Plan. Our two organizations have worked closely together to create a family of health plan benefit options that elevate the quality of health care, while keeping costs low. Those plans are backed by innovations in health care access, a commitment to customer care, and more than seven decades of experience serving the people of this great state. In turn, you can feel confident that your members have coverage that focuses on optimizing their health. By working together, we can become stronger together in the state of Indiana.

Yours in health,

Beth Keyser  
President  
Anthem Blue Cross Blue Shield, Indiana



## Dear Member:

The Indiana Public Employers' Plan (IPEP) would like to invite you to become part of the growing membership of the IPEP Anthem Public Association Plan. Anthem and IPEP are working together to bring plan options that align with your members' medical and specialty needs, as well as their budget.

Through this partnership, we are able to bring you the strength of multiple companies to support your Hoosier workers. With these new plans from Anthem, you can take advantage of:

- Competitive pricing with cost savings for your members and their employees.
- A network with more than 10,000 Indiana doctors.
- Competitive plan design and flexibility to bring members what they need from their health coverage at a more affordable rate.
- Health and wellness programs to promote wellness in the workforce.
- Online tools that help employees manage their health plan from anywhere.
- Access to doctors and hospitals outside of Indiana through the BlueCard® program.
- Representation by local independent insurance agents throughout Indiana who will help you choose the right plan to fit your needs.

Please review this guide to find the plan choices for your IPEP members. Together, we can keep the public workforce of Indiana strong.

Thank you for your partnership,

Frank T. Short  
IPEP President





# Why Anthem Blue Cross and Blue Shield?

## A leader in good health

**Anthem has been serving millions of members in Indiana for more than 75 years and is:**

- Part of the nation's largest health benefits company.
- Part of the BlueCard® program through the Blue Cross Blue Shield Association, which includes more than 96% of hospitals and 95% of doctors in Indiana.\*

## Anthem helps promote good health, by bringing your clients a number of innovative health and wellness programs

### Well-being Coach

Combines digital and live phone/chat coaching to bring members support for maintaining a healthy weight or quitting smoking. Well-being Coach learns about members' habits and lifestyles, and provides highly customized plans. Members can earn rewards for completing calls with a health coach or for completing activities in the Well-being Coach app.

### Whole Health Connections<sup>SM</sup>

This clinical integration solution connects pharmacy, dental, vision, disability, and behavioral health data with medical data to support whole-person care.

### 24/7 NurseLine

Registered nurses are on call 24/7 to help with everything from a baby's fever to allergy relief tips. These nurses can also advise employees on where to go for care.

### Future Moms

Nurses help expectant women follow a health care provider's plan of care, identify risks, make healthier decisions during pregnancy, and prepare for delivery. Future Moms with Breastfeeding Support on LiveHealth Online offers moms online visits with a lactation consultant, counselor, or registered dietitian.

### MyHealth Advantage

When gaps or risks are identified, we mail a confidential MyHealth Note to the employee outlining specific actions he or she can take.

### ConditionCare

Employees with a chronic condition like asthma or diabetes can receive one-on-one health management help from a health care professional.

### Case management

Employees with complex health issues work with our nurses and behavioral care managers to stay on top of their health issues and navigate the health care system. These case managers are backed by a team of doctors, pharmacists, exercise physiologists, and others.

### Behavioral health

Our behavioral health program is integrated with our health plans and includes our extensive network of psychiatrists, social workers, and residential treatment centers.

### My Health Dashboard

Provides personalized content and delivers suggested clinical and wellness programs through **anthem.com** or our mobile app, Sydney Health.

### LiveHealth Online

LiveHealth Online gives employees easy and convenient access to the care they need anytime, 24/7, with no appointments or long wait times.

### Autism Spectrum Disorder Program

This program helps connect employees with licensed behavioral analysts who work with children on the spectrum.





# IPEP benefits

## Programs designed for Indiana's workforce

Indiana Public Employers' Plan, Inc. (IPEP) is a nonprofit, self-funded workers compensation program for Indiana public employers. Our organization offers training, risk and claims management, plus a series of employee benefits.

Founded in 1989, IPEP works on behalf of Indiana's political subdivisions and governmental entities, serving as the largest provider of public entity workers' compensation in the state.

IPEP is the program of choice for more than 600 active members, providing coverage for over \$1 billion in public worker wages. IPEP brings Indiana's public employees 24-hour coverage, by working with Anthem to create an association program specifically for Indiana public employers.

This program includes:

- The opportunity for lower rates through medical underwriting.
- Integrated medical, dental, vision, and life coverages.
- A variety of plans with various deductible levels, starting as low as \$250.
- Coverage provided through your local agent.
- Simplified integration with one-stop enrollment and billing.
- Benefitsolver<sup>®</sup> software for simplified policy management.
- No additional membership fees to join the plan.
- More than 99% retention rate in the last 4 years.

### Contacts for IPEP:

Celina Osborn  
Employee Benefits Account Executive  
cosborn@ipep.com  
O 800-382-8837 | C 765-860-7971

Robert Davidson, CWCP, CHRS, CUSA  
Vice President of Employee Benefits  
bdavidson@ipep.com  
O 800-382-8837 | C 317-727-3312





# Capstone Administrators

IPEP has teamed with Capstone Administrators (Capstone) to help make your health plan administration simpler. In addition to their well-known customer service, Capstone's state-of-the-art technology is making health plan administration more efficient, which may help you stay within your forecasted budgets.

**Capstone's Benefitsolver® system processes your eligibility and enrollment. Its features include:**

- Your own account management assistance with enrollment and billing.
- Single point of entry for enrollment.
- Consolidated billing with one single invoice.
- Employee self-serve enrollment options.
- Built-in COBRA management.
- Boardroom-ready reports.
- ACA Reporting.

**EmployerAccess® is designed to bring you a more convenient way to access employee information. This online solution enables you to:**

- View and/or print ID cards.
- Print an employee's health certificate (SPD).
- Access a Find a Doctor/Find Care tool.
- View benefits summaries.
- Manage prescription benefits.





# IPEP products: Medical

## A benefit suite with multiple options

Choosing the right plan is a big decision. IPEP Health Plans are designed to keep health care costs more affordable while offering quality coverages. Keeping Indiana's public employees in good health helps Indiana's bottom line.



Indiana Public Employers Plan					
PPO plan name	P250	P500	P1000	P2000	P2500
<b>Single</b>					
Deductible	\$250	\$500	\$1,000	\$2,000	\$2,500
Coinsurance	20%	20%	20%	20%	20%
Annual out-of-pocket maximum	\$1,000	\$2,000	\$3,000	\$4,000	\$5,000
<b>Family</b>					
Deductible	\$750	\$1,500	\$3,000	\$6,000	\$7,500
Coinsurance	20%	20%	20%	20%	20%
Annual out-of-pocket maximum	\$2,000	\$4,000	\$6,000	\$8,000	\$10,000
Preventive	No coinsurance, covered in full				
Office visits	\$20	\$20	\$20	\$20	\$20
Urgent care	\$50	\$50	\$50	\$50	\$50
Emergency room	\$200	\$200	\$200	\$200	\$200
Pharmacy - retail	\$20/\$40/\$60/25%/\$200 maximum				
Pharmacy - home delivery	\$40/\$80/\$120/25%/\$200 maximum				
HSA compatible plan name	H3000	H4000	H5000	H6000	
<b>Single</b>					
Deductible	\$3,000	\$4,000	\$5,000	\$6,000	
Coinsurance	0%	0%	0%	0%	
Annual out-of-pocket maximum	\$3,000	\$4,000	\$5,000	\$6,000	
<b>Family</b>					
Deductible	\$6,000	\$8,000	\$10,000	\$12,000	
Coinsurance	0%	0%	0%	0%	
Annual out-of-pocket maximum	\$6,000	\$8,000	\$10,000	\$12,000	
Preventive	No coinsurance, covered in full				
Office visits	Deductible and coinsurance				
Urgent care	Deductible and coinsurance				
Emergency room	Deductible and coinsurance				
Pharmacy - retail	After deductible, 0% coinsurance				
Pharmacy - home delivery	After deductible, 0% coinsurance				

H3000, H4000, H5000, H6000 all feature embedded deductible at family-level coverage. Out-of-network cost shares are always two times in-network cost shares.



Plans WITHOUT orthodontic coverage

Plans WITH orthodontic coverage

Dental plan guidelines

# IPEP Products: Dental

Our Dental Complete plans are designed for greater choice, better value, and higher-quality oral health care.



Anthem Dental Complete plan designs (groups with 2-200 eligible employees)

Plans WITHOUT orthodontic coverage	Plan A		Plan B		Plan C	
	In network	Out of network	In network	Out of network	In network	Out of network
<b>Diagnostic and preventive</b>	100%	100%	100%	100%	100%	100%
<b>Basic restorative</b>	80%	80%	80%	80%	90%	90%
<b>Oral surgery</b>	50%	50%	80%	80%	90%	90%
<b>Endodontics</b>	50%	50%	80%	80%	90%	90%
<b>Periodontics</b>	50%	50%	80%	80%	90%	90%
<b>Major restorative</b>	50%	50%	50%	50%	60%	60%
<b>Prosthodontics</b>	50%	50%	50%	50%	60%	60%
<b>Prosthetic repairs</b>	50%	50%	50%	50%	60%	60%
<b>Orthodontics</b> (for dependents to age 19)	n/a	n/a	n/a	n/a	n/a	n/a
<b>Deductible</b> (waived for diagnostic and preventive)	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150
<b>Annual maximum</b>	\$1,000	\$1,000	\$1,500	\$1,500	\$2,000	\$2,000
<b>Lifetime orthodontic maximum</b>	n/a	n/a	n/a	n/a	n/a	n/a
<b>Fee reimbursement</b>	Prime/Complete	90th percentile of fair health	Prime/Complete	90th percentile of fair health	Prime/Complete	90th percentile of fair health
	Employer paid	Voluntary	Employer paid	Voluntary	Employer paid	Voluntary
<b>Employee only</b>	\$27.25	\$30.50	\$33.13	\$37.12	\$38.90	\$43.58
<b>Employee + spouse</b>	\$55.60	\$62.21	\$67.67	\$75.81	\$79.38	\$88.94
<b>Employee + child(ren)</b>	\$65.10	\$68.93	\$79.22	\$84.00	\$92.98	\$98.54
<b>Family</b>	\$98.86	\$104.84	\$120.49	\$127.68	\$141.28	\$149.78





MEDICAL

DENTAL

VISION

LIFE

Plans WITHOUT orthodontic coverage

Plans WITH orthodontic coverage

Dental plan guidelines

# IPEP Products: Dental

These plans feature orthodontic coverage.



Anthem Dental Complete plan designs (groups with 2-200 eligible employees)						
Plans WITH orthodontic coverage	Plan A		Plan B		Plan C	
	In network	Out of network	In network	Out of network	In network	Out of network
Diagnostic and preventive	100%	100%	100%	100%	100%	100%
Basic restorative	80%	80%	80%	80%	90%	90%
Oral surgery	50%	50%	80%	80%	90%	90%
Endodontics	50%	50%	80%	80%	90%	90%
Periodontics	50%	50%	80%	80%	90%	90%
Major restorative	50%	50%	50%	50%	60%	60%
Prosthodontics	50%	50%	50%	50%	60%	60%
Prosthetic repairs	50%	50%	50%	50%	60%	60%
Orthodontics (for dependents to age 19)	50%	50%	50%	50%	50%	50%
Deductible (waived for diagnostic and preventive)	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150
Annual maximum	\$1,000	\$1,000	\$1,500	\$1,500	\$2,000	\$2,000
Lifetime orthodontic maximum	\$1,000	\$1,000	\$1,500	\$1,500	\$2,000	\$2,000
Fee reimbursement	Prime/Complete	90th percentile of fair health	Prime/Complete	90th percentile of fair health	Prime/Complete	90th percentile of fair health
	Employer paid	Voluntary	Employer paid	Voluntary	Employer paid	Voluntary
Employee only	\$27.25	\$30.50	\$33.13	\$37.12	\$38.90	\$43.58
Employee + spouse	\$55.60	\$62.21	\$67.67	\$75.81	\$79.38	\$88.94
Employee + child(ren)	\$72.71	\$77.02	\$89.51	\$94.87	\$103.27	\$109.41
Family	\$107.84	\$114.35	\$132.51	\$140.44	\$153.30	\$162.54





Plans WITHOUT  
orthodontic coverage

Plans WITH  
orthodontic coverage

▼ Dental plan  
guidelines

## IPEP Products: Dental



### Dental plan guidelines

- Available only for groups with 2-200 eligible employees; minimum 2 enrolled per plan.
- Groups allowed up to two plan options (dual option); no triple or quad options available.
- Dual options require a minimum group enrollment of 15, with plan enrollment of 5.
- The same plan with and without orthodontic coverage does not qualify as a valid dual option plan.
- Groups with 75% or greater participation are employer-paid; groups below 75% are voluntary.
- Voluntary groups will have waiting periods: 6 months for basic services; 12 months for major services; 12 months for orthodontic services (if applicable).
  - For groups that have prior dental coverage we will waive the waiting periods for all employees that elect dental at initial enrollment.
  - Anyone applying after the initial enrollment will have a waiting period. This includes new hires, and employees and their dependents who did not apply at the initial enrollment or their dependents.
- Any group selecting a dental plan for the first time will have to meet the waiting periods.
- Groups with under 10 employees are not eligible for orthodontic benefits.
- Groups will have the same anniversary date, regardless of the effective date.
- Groups with more than 200 eligible employees will be rated based on their own experience and plan designs.



# IPEP Products: Vision

## A low or a high plan that includes optimal savings for in-network providers

Vision health is a vital part of total health. Not only is it important for retaining sight, but through vision exams, doctors can often detect conditions like diabetes, high blood pressure, and high cholesterol. With this year's plans, employees can choose from a large network of doctors. They can also receive discounts on vision products.



Low plan		
Benefits	In network	Out of network
<b>Routine eye exam</b> – Once every 12 months	\$20 copay, then covered in full	\$42 allowance
<b>Eyeglass frames</b> – Once every 24 months, members may select an eyeglass frame and receive an allowance toward the purchase price.	\$130 allowance, then 20% off any remaining balance	\$45 allowance
<b>Eyeglass lenses (Standard)</b> – Once every 24 months, members may receive any one of the following lens options:		
Standard plastic single vision lenses (1 pair)	\$20 copay, then covered in full	\$40 allowance
Standard plastic bifocal lenses (1 pair)	\$20 copay, then covered in full	\$60 allowance
Standard plastic trifocal lenses (1 pair)	\$20 copay, then covered in full	\$80 allowance
<b>Eyeglass lens enhancements</b> – When obtaining covered eyewear from a Blue View Vision provider, members may choose to add any of the following lens enhancements at no extra cost:		
Transitions® Lenses (for a child under age 19)	\$0 after eyeglass lens copay	No allowance on lens enhancements when obtained out of network
Lenses (adults)	\$20 after eyeglass lens copay	
Standard polycarbonate (for a child under age 19)	\$0 after eyeglass lens copay	
Factory scratch coating <sup>1</sup>	\$0 after eyeglass lens copay	
<b>Contact lenses once every 24 months</b> – Instead of eyeglass lenses, an allowance toward the cost of a supply of contact lenses may be chosen. <sup>2</sup>		
Elective conventional lenses; or	\$130 allowance, then 15% off any remaining balance	\$105 allowance
Elective disposable lenses; or	\$130 allowance (no additional discount)	\$105 allowance
Non-elective contact lenses	Covered in full	\$210 allowance

<sup>1</sup> Transitions is the registered trademark of Transitions Optical, Inc. Photochromic performance is influenced by temperature, UV exposure and lens material.

<sup>2</sup> Contact lens allowance can only be applied toward the first purchase of contacts made during a benefit period. Any unused amount remaining cannot be used for subsequent purchases made during the same benefit period, nor can any unused amount be carried over to the following benefit period.

Employer-paid monthly rates	
Employee	\$5.04
Employee + spouse	\$8.82
Employee + child(ren)	\$9.57
Employee + family	\$14.61

Voluntary monthly rates	
Employee	\$6.78
Employee + spouse	\$11.87
Employee + child(ren)	\$12.88
Employee + family	\$19.66

[Low Plan](#)[▼ High Plan](#)[Optimal Savings](#)

# IPEP Products: Vision



High plan		
Benefits	In network	Out of network
<b>Routine eye exam</b> – Once every 12 months	\$10 copay, then covered in full	\$42 allowance
<b>Eyeglass frames</b> – Once every 24 months, members may select an eyeglass frame and receive an allowance toward the purchase price.	\$150 allowance, then 20% off any remaining balance	\$45 allowance
<b>Eyeglass lenses (Standard)</b> – Once every 12 months, members may receive any one of the following lens options:		
Standard plastic single vision lenses (1 pair)	\$20 copay, then covered in full	\$40 allowance
Standard plastic bifocal lenses (1 pair)	\$20 copay, then covered in full	\$60 allowance
Standard plastic trifocal lenses (1 pair)	\$20 copay, then covered in full	\$80 allowance
<b>Eyeglass lens enhancements</b> – When obtaining covered eyewear from a Blue View Vision provider, members may choose to add any of the following lens enhancements at no extra cost:		
Transitions® lenses (for a child under age 19)	\$0 after eyeglass lens copay	No allowance on lens enhancements when obtained out of network
Lenses (adults)	\$20 after eyeglass lens copay	
Standard polycarbonate (for a child under age 19)	\$0 after eyeglass lens copay	
Factory scratch coating <sup>1</sup>	\$0 after eyeglass lens copay	
<b>Contact lenses once every 12 months</b> – Instead of eyeglass lenses, an allowance toward the cost of a supply of contact lenses may be chosen. <sup>2</sup>		
Elective conventional lenses; or	\$140 allowance, then 15% off any remaining balance	\$105 allowance
Elective disposable lenses; or	\$140 allowance (no additional discount)	\$105 allowance
Non-elective contact lenses	Covered in full	\$210 allowance

<sup>1</sup> Transitions is the registered trademark of Transitions Optical, Inc. Photochromic performance is influenced by temperature, UV exposure and lens material.

<sup>2</sup> Contact lens allowance can only be applied toward the first purchase of contacts made during a benefit period. Any unused amount remaining cannot be used for subsequent purchases made during the same benefit period, nor can any unused amount be carried over to the following benefit period.

Employer-paid monthly rates	
Employee	\$6.50
Employee + spouse	\$11.37
Employee + child(ren)	\$12.34
Employee + family	\$18.84

Voluntary monthly rates	
Employee	\$8.85
Employee + spouse	\$15.49
Employee + child(ren)	\$16.82
Employee + family	\$25.67





# IPEP Products: Vision



Optional savings available from in-network providers		In-network member cost (after any applicable copay)
Retinal imaging	At member's option, can be performed at time of eye exam	Not more than \$39
<b>Eyeglass lens upgrades</b> When obtaining eyewear from a Blue View Vision provider, members may choose to upgrade their new eyeglass lenses at a discounted cost. Eyeglass lens copayment applies.	Standard polycarbonate (adults)	\$40
	Tint (solid and gradient)	\$15
	UV coating	\$15
	Progressive lenses	
	Standard	\$65
	Premium tier 1	\$85
	Premium tier 2	\$95
	Premium tier 3	\$110
	Anti-reflective coating	
	Standard	\$45
	Premium tier 1	\$57
	Premium tier 2	\$68
Other add-ons and services	20% off retail price	
<b>Additional pairs of eyeglasses</b> Anytime from any Blue View Vision network provider	Complete pair	40% off retail price
	Eyeglass materials purchased separately	20% off retail price
<b>Eyewear accessories</b>	Items such as non-prescription sunglasses, lens cleaning supplies, contact lens solutions, eyeglass cases, etc.	20% off retail price
<b>Contact lens fit and follow-up</b> Available once a comprehensive eye exam has been completed	Standard contact lens fitting	Up to \$55
	Premium contact lens fitting	10% off retail price
<b>Conventional contact lenses</b>	Discount applies to materials only	15% off retail price
<b>Laser vision correction surgery</b> LASIK refractive surgery	Discount per eye	For more information, go to <a href="https://www.anthem.com/specialoffers">anthem.com/specialoffers</a> and select vision care.



▼ group size 2 to 9

group size 10 to 50

# IPEP Products: Life

## Two options with extra features, including AD&D coverage

The IPEP plan includes affordable options for life coverage as well, so you can have peace of mind. When a life-changing event happens, you can rest assured that claims are paid quickly, and Anthem's staff is on hand to help.



### Life and AD&D for group size 2 to 9

Options	Age of employee	Monthly premium	Age of employee	Monthly premium	Age of employee	Monthly premium
<b>Option 1:</b> \$25,000 Life and AD&D	Under 25	\$4.50	40-44	\$8.25	60-64	\$35.75
	25-29	\$4.50	45-49	\$12	65-69*	\$75.75
	30-34	\$4.50	50-54	\$19.50	70-74*	\$156
	35-39	\$5.50	55-59	\$32	Over 74*	\$241.25
<b>Option 2:</b> \$50,000 Life and AD&D	Under 25	\$9	40-44	\$16.50	60-64	\$71.50
	25-29	\$9	45-49	\$24	65-69*	\$151.50
	30-34	\$9	50-54	\$39	70-74*	\$312
	35-39	\$11	55-59	\$64	Over 74*	\$482.50

\* Life and AD&D benefits reduce with age: 35% at age 65, 50% at age 70.

### Additional features

- Life insurance coverage is guaranteed for amounts shown in the table above. Coverage is not guaranteed for late enrollees.
- Waiver of premium – If an employee becomes totally disabled before reaching age 60, after they meet a six-month elimination period, their life insurance coverage will remain in force without further premium payment until they reach age 65. Life insurance coverage continued under waiver of premium ends at age 65.
- Living benefit/accelerated death benefit – Employees can receive an accelerated payout of up to 75% of their life insurance benefit if they are diagnosed as terminally ill.
- Accidental death and dismemberment (AD&D) coverage – Includes Seat Belt Benefit, Airbag Benefit, Education Benefit and Repatriation Benefit, Coma Benefit, and Common Carrier Benefit.
- Basic life – Employer pays 100% of the premium; 100% of eligible employees must participate.

### Important terms of this offer

- The benefit is paid for by the employer; all eligible employees are required to participate.
- Life and AD&D benefits reduce with age: 35% at age 65, 50% at age 70.
- All benefits end at retirement.

▼ Continued on next page



# IPEP Products: Life

group size 2 to 9



- Timely enrollment is required for new employees. Employees hired after the effective date of the plan will become eligible for insurance after completing the waiting period specified in the policy. Eligible employees must be enrolled within 31 days after they satisfy the employer's eligibility period or they will be required to submit evidence of insurability for underwriting approval.
- Workers whose wages are reported on Form 1099 are not eligible for coverage.
- The following Standard Industrial Classification (SIC) Codes are not eligible for coverage: 0811 Timber Tracts, 0831 Forest Products, 0851 Forestry Services, 0971 Hunting, Trapping, Game Propagation, 2111 Cigarettes, 2121 Cigars, 2131 Chewing and Smoking Tobacco, 2141 Tobacco Stemming and Re-drying, 4512 Air Transportation, Scheduled, 4513 Air Courier Services, 4522 Air Transportation, Nonscheduled, 8811 Private Households, 9221 Police Protection, 9223 Correctional Institutions, and 9224 Fire Protection.
- Groups must be in business for at least one year.
- The master policy will be issued and will reflect the laws and requirements of Indiana. Product features and provisions of this proposal can vary based on state requirements.

## Proposal assumptions

Plans and rates displayed are only available when paired with an Emerging Market medical product.

A fully insured funding arrangement has been quoted. Groups must be in business for at least one year.

This proposal assumes list-billing services.

Employees must be actively at work, at least 17 years of age, and working in the United States in order to become insured. Employees not actively at work on their effective date will become eligible for insurance after completing the waiting period specified in the policy unless otherwise noted on the schedule of benefits.

- We generally will consider a "no-loss/no-gain" basis of insurance for employees who are not actively at work. This means that no employees will lose or gain coverage solely as a result of changing carriers.
- Employees who are not actively at work due to disability, injury, or illness remain the liability of the prior carrier.
- All others not actively at work on the effective date may be covered under this policy, provided the required premium is paid and they were covered by the prior carrier's policy up to the effective date of our policy. Underwriting approval is required for each individual to be considered for this exception.
- In order to consider "no-loss/no-gain" coverage, we require information on all employees who are nonactives immediately prior to the effective date of this policy. This listing must include: names, birthdates, benefit amounts, last date worked, reason for not working, and the expected return-to-work date. We will review this information for our determination of liability and rate review.

▼ Continued on next page





▼ group size 2 to 9

group size 10 to 50

# IPEP Products: Life

group size 2 to 9



Timely enrollment is required for new employees. Employees hired after the effective date of the plan will become eligible for insurance after completing the waiting period specified in the policy. If employees do not enroll in any contributory program within 31 days of first becoming eligible, they will be required to provide evidence of insurability at their own expense.

Currently enrolled employees will not be grandfathered for any optional supplemental life benefit amount. Evidence of insurability is required for all employees who elect coverage. The guaranteed issue amount will only apply to newly hired employees who were not eligible for optional supplemental life benefits prior to the effective date.

This proposal is not a contract. This proposal provides coverage highlights only, and does not modify, expand, or interpret any provisions of the policy. Unless otherwise stated, this proposal and subsequent policy will be issued using Anthem Life Insurance Company's standard policy wording. The policy to be issued will contain complete details of benefits, policy provisions, limitations, etc. A hard copy is available upon request. In case of a conflict between the proposal and policy, the terms of the policy will govern.

### Life and AD&D monthly rate

Monthly rate per \$1,000 of group term life and AD&D coverage <sup>1</sup>					
Age of employee	Monthly rate	Age of employee	Monthly rate	Age of employee	Monthly rate
Under 25	\$0.16	40-44	\$0.31	60-64	\$1.41
25-29	\$0.16	45-49	\$0.46	65-69 <sup>2</sup>	\$3.01
30-34	\$0.16	50-54	\$0.76	70-74 <sup>2</sup>	\$6.22
35-39	\$0.20	55-59	\$1.26	Over 74 <sup>2</sup>	\$9.63

<sup>1</sup> The rate for AD&D coverage is an additional \$0.02 per \$1,000.  
<sup>2</sup> Life and AD&D benefits reduce with age: 35% at age 65, 50% at age 70.

### Cost assumptions

The rates included in this proposal are based on the plan design as specified in the "Proposal assumptions." We reserve the right to modify the quoted costs as deemed appropriate by Anthem Life Insurance Company if the plan design is modified or any of these assumptions are incorrect. The proposal and rates appearing in this proposal are based on the data submitted and its accuracy. The actual rates charged will be based on the ages, amounts, and experience data of the persons insured. The above rates assume that coverage will be provided on a nonparticipating (i.e., nonretention) basis.

**Not all benefits are available in all states; benefits and features may vary by state. The benefit descriptions contained in this proposal are intended to be a brief outline of coverage and are not intended to be a legal contract. The entire provisions of benefits and exclusions are contained in the Group Contract, Certificate and Schedule of Benefits. In the event of a conflict between the Group Contract and this description, the terms of the Group Contract will prevail.**

[group size 2 to 9](#)[▼ group size 10 to 50](#)

# IPEP Products: Life

## group size 10 to 50



### Life and AD&D for group size 10 to 50

#### Group size 10-50

Group term life and AD&D benefit details		
Options	Monthly premium per employee	Guaranteed issue amount
Option 1: \$25,000 Life and AD&D	\$6.25	\$25,000
Option 2: \$50,000 Life and AD&D	\$12.50	\$50,000
Option 3: \$75,000 Life and AD&D	\$18.75	\$75,000
Option 4: One times base annual salary, up to \$50,000	Varies according to employee's salary	\$50,000

#### Optional supplemental life and AD&D benefit details

Optional supplemental life and AD&D is only available for groups with 10-50 employees. It is not available to groups with 2-9 employees.

Each employee chooses their own coverage amount, between \$25,000 and \$300,000 in increments of \$25,000. Guaranteed issue amount is \$100,000. Employees can choose spouse coverage between \$10,000 and \$50,000 in increments of \$10,000. Guaranteed issue amount for spouse is \$20,000.

Rate per \$1,000 of optional life coverage for employee and spouse (based on employee's age).

Age	Monthly rate per \$1,000	Age	Monthly rate per \$1,000
Under 25	\$0.06	50-54	\$0.32
25-29	\$0.06	55-59	\$0.55
30-34	\$0.08	60-64	\$0.76
35-39	\$0.10	65-69	\$1.34
40-44	\$0.12	70-74	\$2.76
45-49	\$0.19	75+	\$2.76

Optional AD&D – Employee coverage only. Monthly rate per \$1,000 is \$0.02.

Employee can choose child coverage of \$5,000 per child, issued on a guaranteed basis, for a monthly premium of \$1.00.

#### Additional features

- Life insurance coverage is guaranteed for amounts shown in the table above. Coverage is not guaranteed for late enrollees.
- Waiver of premium – If an employee becomes totally disabled before reaching age 60, after they meet a six-month elimination period, their life insurance coverage will remain in force without further premium payment until they reach age 65. Life insurance coverage continued under waiver of premium ends at age 65.
- Living benefit/accelerated death benefit – Employees can receive an accelerated payout of up to 75% of their life insurance benefit if they are diagnosed as terminally ill.

▼ Continued on next page



# IPEP Products: Life

group size 10 to 50



- AD&D coverage — Includes Seat Belt Benefit, Airbag Benefit, Education Benefit and Repatriation Benefit, Coma Benefit, and Common Carrier Benefit.
- Basic life — Employer pays 100% of the premium; 100% of eligible employees must participate.
- Optional supplemental life Insurance — 100% employee paid. Greater of 20% of eligible employees or 10 employees must enroll.

## Important terms of this offer

- The benefit is paid for by the employer; all eligible employees are required to participate.
- Life and AD&D benefits reduce with age: 35% at age 65, 50% at age 70.
- All benefits end at retirement.
- Timely enrollment is required for new employees. Employees hired after the effective date of the plan will become eligible for insurance after completing the waiting period specified in the policy. Eligible employees must be enrolled within 31 days after they satisfy the employer's eligibility period, or they will be required to submit evidence of insurability for underwriting approval.
- Workers whose wages are reported on Form 1099 are not eligible for coverage.
- The following Standard Industrial Classification (SIC) Codes are not eligible for coverage: 0811 Timber Tracts, 0831 Forest Products, 0851 Forestry Services, 0971 Hunting, Trapping, Game Propagation, 2111 Cigarettes, 2121 Cigars, 2131 Chewing and Smoking Tobacco, 2141 Tobacco Stemming and Re-drying, 4512 Air Transportation, Scheduled, 4513 Air Courier Services, 4522 Air Transportation, Nonscheduled, 8811 Private Households, 9221 Police Protection, 9223 Correctional Institutions, and 9224 Fire Protection.
- Groups must be in business for at least one year.
- The master policy will be issued and will reflect the laws and requirements of Indiana. Product features and provisions of this proposal can vary based on state requirements.





group size 2 to 9

▼ group size 10 to 50

# IPEP Products: Life

group size 10 to 50



## Proposal assumptions

Plans and rates displayed are only available when paired with an Emerging Market medical product.

A fully insured funding arrangement has been quoted. Groups must be in business for at least one year. This proposal assumes list-billing services.

Employees must be actively at work, at least 17 years of age, and working in the United States in order to become insured.

Employees not actively at work on their effective date will become eligible for insurance after completing the waiting period specified in the policy unless otherwise noted on the schedule of benefits.

- We generally will consider a “no-loss/no-gain” basis of insurance for employees who are not actively at work. This means that no employees will lose or gain coverage solely as a result of changing carriers.
- Employees who are not actively at work due to disability, injury, or illness remain the liability of the prior carrier.
- All others not actively at work on the effective date may be covered under this policy, provided the required premium is paid and they were covered by the prior carrier’s policy up to the effective date of our policy. Underwriting approval is required for each individual to be considered for this exception.
- In order to consider “no-loss/no-gain” coverage, we require information on all employees who are nonactives immediately prior to the effective date of this policy. This listing must include: names, birthdates, benefit amounts, last date worked, reason for not working, and the expected return to work date. We will review this information for our determination of liability and rate review.

Timely enrollment is required for new employees. Employees hired after the effective date of the plan will become eligible for insurance after completing the waiting period specified in the policy. If employees do not enroll in any contributory program within 31 days of first becoming eligible, they will be required to furnish evidence of insurability at their own expense.

Currently enrolled employees will not be grandfathered for any optional supplemental life benefit amount. Evidence of insurability is required for all employees who elect coverage. The guaranteed issue amount will only apply to newly hired employees who were not eligible for optional supplemental life benefits prior to the effective date.

This proposal is not a contract. This proposal provides coverage highlights only, and does not modify, expand, or interpret any provisions of the policy. Unless otherwise stated, this proposal and subsequent policy will be issued using Anthem Life Insurance Company’s standard policy wording. The policy to be issued will contain complete details of benefits, policy provisions, limitations, etc. A hard copy is available upon request. In case of a conflict between the proposal and policy, the terms of the policy will govern.

▼ Continued on next page



# IPEP Products: Life

group size 10 to 50

## Cost assumptions

The rates included in this proposal are based on the plan design as specified in the “Proposal assumptions.” We reserve the right to modify the quoted costs as deemed appropriate by Anthem Life Insurance Company if the plan design is modified or any of these assumptions are incorrect. The proposal and rates appearing in this proposal are based on the data submitted and its accuracy. The actual rates charged will be based on the ages, amounts, and experience data of the persons insured. The above rates assume that coverage will be provided on a nonparticipating (i.e., nonretention) basis.

**Not all benefits are available in all states; benefits and features may vary by state. The benefit descriptions contained in this proposal are intended to be a brief outline of coverage and are not intended to be a legal contract. The entire provisions of benefits and exclusions are contained in the Group Contract, Certificate, and Schedule of Benefits. In the event of a conflict between the Group Contract and this description, the terms of the Group Contract will prevail.**





## Serving those who serve Indiana

Your organization's health is our focus. We are here to help make sure your members find the plan that meets their needs, with doctors and hospitals they can trust. Please contact us to talk about this plan, and how we can help you find the best coverage for your organization.

### Contacts for IPEP:

**Celina Osborn**  
Employee Benefits Account Executive  
cosborn@ipep.com  
O 800-382-8837 | C 765-860-7971

**Robert Davidson, CWCP, CHRS, CUSA**  
Vice President of Employee Benefits  
bdavidson@ipep.com  
O 800-382-8837 | C 317-727-3312

## Stronger together

IPEP harnesses the collective strength of four trusted companies to provide a solid foundation for your organization. IPEP capitalizes on the specialized skills of each company to bring stability and credibility together in one group.

