



CHS Renewal Rate Acceptance*
(Network Access Only)

Exhibit 2

An Independent Licensee of the
Blue Cross Blue Shield Association

* must be signed by a designated authorized representative
prior to renewal effective date

Name of Trust City of San Luis Employee Benefit Trust
 BCBSAZ Group Number SLS001
 Effective Date 7/1/2021 to 6/30/2023
 Number of In-State Employees 228 (Out-of-state not eligible)
 Renewal Notice Days 120

I. Network Requested: Medical PPO Plans & Mayo Network

II. Access Fees

Medical Access Fee^a: \$19.25 PEPM 07/01/2021 - 06/30/2022
 Medical Access Fee^a: \$21.00 PEPM 07/01/2022 - 06/30/2023

III. Commission: Rates are net of commission

IV. Caveats

- a) For any month in which the number of employees with access to the Blue Cross Blue Shield of Arizona (BCBSAZ) network is fewer than 100, the Medical Access Fee will be a flat monthly fee and not a per employee per month fee. The flat fee will be \$1,925 per month
- b) BCBSAZ will not act as a Stop Loss carrier under this agreement.
- c) BCBSAZ will be the sole leased medical network provider in Arizona
- d) Under this network leasing arrangement, BCBSAZ contracts only with the Trust. Under no circumstance will this agreement be between BCBSAZ and any Third-Party Administrator (TPA) or any other referring entity.
- e) The Trust is responsible for the TPA's performance as claims administrator. BCBSAZ reserves the right to decline the Trust's choice of TPA if the proposed TPA is not a TPA that currently administers claims for other BCBSAZ Employers.
- f) The Trust shall be liable for and shall either pay or cause its contracted TPA to pay BCBSAZ contracted provider medical claims no less frequently than weekly.
- g) BCBSAZ's dental provider rates and fees do not apply to any Trust that has not leased BCBSAZ's dental network, regardless of whether the dental rate and fees are visible to the Trust via the TPA Portal.
- h) The coinsurance benefit differential between the Trust's Medical PPO in-network and out-of-network must be 10% or greater.
- i) If the Trust transitions to a new Claims Administrator during the term of the Agreement, the Trust shall pay BCBSAZ a Claims Administrator Fee in an amount equal to \$5.00 per employee based upon the number of employees in the month prior to the Claims Administrator change. The Claims Administrator Fee is due the first of the month in which the change to the new Claims Administrator is effective.
- j) The stated access fees do not include any Affordable Care Act ("ACA") fees. Payment of any applicable ACA fees is the responsibility of the Employer.

BlueCross BlueShield of Arizona, Inc.,
an Arizona Non-Profit Corporation

Employer Trust
City of San Luis Employee Benefit Trust

By:
(signature)
Michael Tilton
(printed)

By:
(signature)
Maria Saberi
(printed)

Title: General Manager-Commercial Segment

Title: _____

Date: 05/07/21

Date: 3/22/21