



**CHS Renewal Rate Acceptance\***  
**(Network Access Only)**

Exhibit A

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:** 7/1/2023 to 6/30/2024

Multi Year Term: 7/1/2023 to 6/30/2025

Number of In-State Employees: 219 (Out-of-state not eligible)

Renewal Notice Days: 120

**I. Network Requested:** Medical PPO

**II. Access Fees**

Medical Access Fee <sup>a)</sup>: \$21.50 PEPM 07/01/2023 - 06/30/2024

Medical Access Fee <sup>a)</sup>: \$22.00 PEPM 07/01/2024 - 06/30/2025

**III. Commission:** Rates are net of commission

**IV. Caveats**

- a) BCBSAZ will not act as a Stop Loss carrier under this agreement.
- b) BCBSAZ will be the sole leased medical network provider in Arizona.
- c) 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.
- d) 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.
- e) 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.
- f) The coinsurance benefit differential between the Trust's Medical PPO in-network and out-of-network must be 10% or greater.
- g) 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.
- h) 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 Groeger**  
(printed)

Title: VP - Group Commercial & Specialty Sales

Date: \_\_\_\_\_

By: \_\_\_\_\_  
(signature)

(printed)

Title: \_\_\_\_\_

Date: \_\_\_\_\_