



Health · Pharmacy · Dental · Vision · Life · Disability



Your 2021 Small Group Producer Guide

Your guide to everything Anthem dental, vision, life and disability for groups with 2-50 employees

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More choices with Anthem

Strong alone, better together. Our products are available on a stand-alone basis without a health plan from us or packaged with our health products for connected care that offers more efficiencies and bigger savings. Your clients can also build a benefit program without spending a dime with our voluntary options.



Medical, dental, vision, life and disability

Strong and competitive stand-alone plans

Anthem offers robust and competitively-priced stand-alone dental, vision, life and disability plans. Your clients might prefer to have their health coverage with another carrier, but take a look at what we can offer to supplement that health plan. We offer access to some of the largest dental and vision networks in the country,¹ popular benefits, savings opportunities and life and disability programs that members and their families can use before a life-changing event occurs.

Combining with an Anthem health plan for bigger savings

Your clients can provide a complete benefits package, which may include a combination of health, pharmacy, dental, vision, life and disability, all from one carrier, Anthem. This approach means employees have connected care through Anthem Whole Health Connection[®], while your clients have less administrative hassle and spend less energy and time managing their various plans. Also, your clients can save with our bundling discounts.²

Voluntary options are up to 100% employee paid

Our voluntary benefits offer your clients a way to help keep their health care costs in check and strengthen the value of the benefits program they offer, while boosting employees' satisfaction. And because employees pay up to 100% of these costs, there is no negative effect on your clients' bottom line.

Over 50% of small group employers felt that administrative integration made purchasing medical, dental, vision, life and disability from the same carrier appealing.*



Check out our dedicated site to help you every step of the way.

[anthem.com/specialty](https://www.anthem.com/specialty)

* Internal research, November 2015.

1 Netminder, May 2020.

2 Discount subject to change without notice.

Stand-alone plans

Anthem offers products that are competitive in design and price, which makes them work well when combined with any health plan.

Dental Essential Choice PPO

- Access to one of the largest dental preferred provider organization (PPO) networks in the country, allowing employees to find the dentist they prefer to see
- Access to The Teledentists, online network dentists providing virtual urgent care visits, and access to Ortho@Home network orthodontia options
- Negotiated discounts with network dentists to save members an average of 38% on covered dental services¹
- Online and mobile member tools including *Find Care*, *Ask a Hygienist*, *Dental Cost Estimator*, and *Dental Health Assessment*
- Plan designs with popular benefit features, such as an annual maximum carryover, brush biopsy, composite fillings, dental implants, no waiting periods and 100% coverage on accidental dental injuries
- A choice of options, such as annual maximum (including unlimited annual maximum), deductibles, coinsurance, out-of-network reimbursement, basic/major services and child/adult orthodontia
- Ability to submit claims electronically for faster payment²

Blue View VisionSM

- Access to more than 39,000 eye doctors and more than 28,000 locations,³ including private practices, online at Glasses.com, ContactsDirect.com, 1-800 CONTACTS and Rayban.com, and local retail stores such as LensCrafters[®], Pearle Vision[®] and Target Optical[®]
- Savings of 20% off the balance on frames, 40% off extra pairs of glasses and 15% to 20% on other non-covered materials like lens upgrades, additional supplies of conventional contact lenses, lens treatments, eyewear accessories and more⁴
- Children and teen vision benefits — includes 100% coverage for polycarbonate and Transitions[®] lenses, 100% coverage for scratch resistant coating and benefits for prescription sports eyewear. All available for dependents under age 19.⁵
- Convenient customer service hours with representatives available seven days a week
- Online member self-service tools, including *Benefits Overviews*, *Check Claim Status* and *Find Care*

- International Travel Solution — Offered at no extra cost to our members. Members can find a trusted vision provider in 20 countries and territories⁶ who offers quality care and authentic frames, get 24/7 phone support with translation services in 160 languages for help talking with an eye doctor and request free temporary emergency glasses (delivered within 24 hours in most locations). Members can submit a copy of their receipt to apply for out-of-network benefits to help cover their costs.

Life

- Group term life and accidental death and dismemberment (AD&D) products available on a fully insured (FI), voluntary (employee-paid) or supplemental (employee buy-up) basis
- Customer-focused service from sale to account implementation to ongoing support, including a designated claim specialist for each group client
- Resource Advisor counseling, financial and legal support services for employees and their families that they can use now and after a life-changing event happens
- Travel assistance services that can help with emergencies and medical evacuations when traveling more than 100 miles from home

Disability

- A wide variety of products, including short-term and long-term disability, that are employer-paid or voluntary
- Resource Advisor counseling, financial and legal support services for employees and their families that may help prevent short-term disability claims from happening at all
- Personal attention for employees who have filed a disability claim through an assigned case manager who will help guide employees through the process and help them access the tools they need to get back to work

1 Anthem Quarterly Network Metric Report, 2020.

2 Anthem website: Claims Submission (Accessed September 2016): anthem.com

3 Network360, May 2020.

4 Laws in some states may prohibit network providers from discounting products and services that are not covered benefits under the plan.

5 Transitions is a registered trademark of Transitions Optical, Inc. Photochromic performance is influenced by temperature, UV exposure and lens material.

6 Available in Australia, Austria, Brazil, Canada, Chile, China, Columbia, Ecuador, England, France, Germany, Hong Kong SAR, Italy, Japan, Mexico, New Zealand, Peru, Puerto Rico U.S., Spain, and Switzerland.

Your clients will appreciate:

- Submitting only **One** group application
- Having only **One** implementation process
- Reviewing only **One** bill for all products
- Accessing **One** employer services website for all administrative needs



Employees will appreciate:

- Completing only **One** enrollment application
- Receiving only **One** member ID card
- Accessing **One** employee services website for all their needs

Combined with Anthem health plans

Our dental, vision, life and disability plans are connected to our health plans, administratively and clinically. This means we deliver a bigger and better picture of health for employees with less hassle and more savings for your clients.

Administration made easy

Our simplified administration services allow new small groups with health, dental, vision, life and disability benefits to enjoy the following administrative conveniences:

- Submitting only one group application
- Having only one implementation process
- Receiving only one bill for all products
- Accessing one employer services website for all administrative needs

Employees will appreciate:

- Completing only one enrollment application
- Receiving only one member ID card
- Accessing one website
- Accessing member benefits and ID cards through the mobile app, Sydney Health

Anthem Whole Health Connection

Anthem Whole Health Connection[®] means our health plans work together with patients and providers – something stand-alone carriers just can't achieve in the same way.

As members visit various providers, including network dentists, eye doctors, primary care doctors and care coordinators, we securely share relevant patient information with those providers through electronic health records. This includes patient summaries, diagnoses, lab results and prescriptions. This sharing of data allows us to create more complete health profiles, which helps identify gaps in care and leads to the delivery of better, more informed care.

Dental Essential Choice PPO

We provide electronic patient health profiles to our dentists, with relevant patient health information including medical diagnoses and prescription medications. This promotes collaboration between dentists and primary care physicians and gives a more complete picture of a patient's health which helps diagnose and treat patients.

Also, members who have one of our dental plans and actively participate in any of our care management programs through their Anthem health plan are automatically eligible for an additional dental cleaning or periodontal maintenance procedure, which is a deeper cleaning of the gums, each benefit period.

For members who aren't enrolled in eligible care management programs, we offer a self-enrollment feature to receive extra dental services for the medical conditions listed.

Blue View Vision



Eye doctors can detect a number of health problems during a routine eye exam. With Anthem Whole Health Connection, we facilitate two-way communication between our network eye doctors and our network primary care doctors. This enables earlier detection of health problems and coordinated action, so members can get the follow-up care and support they need.

Disability

Early identification, referral and increased engagement in health and wellness programs may help reduce disability costs and cost of care – and improve the overall member experience. That's why we make referrals from the Anthem Disability team to the Anthem Care Management teams. Some of the conditions that we refer include diabetes, coronary artery disease, behavioral health, cancer, pharmacy and pregnancy-related claims. We make referrals to the appropriate Anthem Care Management programs like Case Management, Future Moms, High Risk OB or Behavioral Health. All members who are covered by the Anthem short-term disability and Anthem health benefit plans get the integration. We do all this so that Anthem's integrated short-term disability and Anthem's health benefits improve employees' health and productivity.

Voluntary options

We know your clients continuously face the challenges that come with balancing rising health insurance costs with the goal of offering a competitive benefits program that helps attract and retain the best employees. Our voluntary benefits can help resolve those challenges. We offer dental, vision, life and disability on a voluntary basis with low minimum participation requirements: 5 enrollees for dental; 5 enrollees for vision. For life, 20% of eligible employees must elect coverage, or 5 enrollees, whichever is greater. For disability, 20% of eligible employees must elect coverage, or 10 enrollees, whichever is greater. And because the employees pay up to 100% of these costs, there is no effect on your clients' bottom line.

Challenge	Anthem's solutions
 <p>Controlling benefit costs</p>	<p>Broaden benefit choices to offer a complete benefits program, with no direct cost to the employer.</p>
 <p>Attracting and retaining employees</p>	<p>Improve employees' satisfaction, engagement and loyalty with a strong, complete benefits program.</p>



Your clients win

Boosting employees' satisfaction and loyalty
 Building employees' benefits program without spending a dime



Employees win

Enjoying discounted group rates
 Paying premiums easily through payroll deduction



You win

Strengthening client relationships and competitive differentiation
 Leveraging a new revenue source



Check out all the health and wellness tools and resources we offer to help your clients' employees get healthier.
healthandwellness.anthem.com



Money talks

Bundling coverage provides your clients with a way to help improve their employees' health and also saves your clients money.

Discounts

Your clients can save 5% on dental, vision, life and disability when they purchase dental and add vision, life and/or disability coverage.¹

Sign up for...	...and save
Dental + vision	5% on dental and 5% on vision rates
Dental + life (\$25,000 minimum)	5% on dental and 5% on life rates
Dental + short-term disability (STD)	5% on dental and 5% on STD rates
Dental + long-term disability ² (LTD)	5% on dental and 5% on LTD rates

¹ Discount only applies when new Anthem dental coverage is purchased with an additional Anthem vision, life, STD and/or LTD product. Discount also only applies to dental and vision groups with 2-50 employees and life and disability groups with 10-50 employees. The discount does not apply to voluntary life, voluntary disability, and supplemental life. Contact your representative for complete offer details.

² If LTD is sold with STD, only the STD rate qualifies for the 5% discount.

Anthem's commission schedule

Small group dental 2-50	
Dental Essential Choice PPO (employer-paid and voluntary)	10% first year, 6% thereafter
Dental Affordable Care Act plans (stand-alone pediatric, family)	10% first year, 6% thereafter
Small group vision 2-50	
Full-service and material-only plans (employer-paid and voluntary)	10%
Small group life and disability 2-50	
Life, AD&D	15%
Short-term disability	15%
Long-term disability	15%
Supplemental/voluntary 10-50	
Supplemental/voluntary products	15%

This is intended to be a summary and is subject to change. Anthem reserves the right to interpret the terms and conditions of these programs, including eligibility, calculation and payout, and may terminate this program at any time. Only a definitive agreement in writing by you and an authorized Anthem representative will be binding upon Anthem to have any liability thereafter.



Get more information about dental, vision, life and disability by visiting anthem.com/specialty.



Let us help you

Your clients aren't in this alone and neither are you. The Anthem Connect Inside Sales Team is there to answer any question and provide any assistance you may need — from quotes to participation guidelines, new business sales to renewals and everything in between.

Anthem Connect

Our team of experts can:

- Help with new business sales and quickly run quotes.
- Consult on plan options for alternate benefits or lower rates.
- Assist you with using our website so you can run quotes anytime — you'll get your own producer self-service user ID and password.
- Assist with questions about participation guidelines, requirements and materials to ensure a seamless business implementation.
- Help make renewals smooth and easy.



1-866-956-8602
connect@anthem.com

We offer dedicated Connect Sales inside sales and support reps for Anthem Small Group producers.

Personal attention makes a world of difference. You know that first-hand. That extra attention and support you give your clients strengthens your relationships with them. Well, now it's your turn to get the personal attention that can help make your job easier — and help you help your clients.

Our Anthem Connect Inside Sales Rep is your direct connection.

Whether you write a lot of small group dental, vision, life and disability business or just a little every year, getting the answers and support you need quickly and easily is always important. And now you have a direct connection to benefit experts who can help you with new business sales and quotes, explain participation requirements or walk you through plan options. You'll have more time to focus on growing your business, making sure all details are covered and keeping your clients happy.

Our Connect Team is an expert small group specialty sales team for your market — it's not a general customer service line. Think of our team as your personal producer concierge service for sales support.

As your personal inside sales team for Small Group specialty needs, Anthem Connect is always available by phone and email during business hours. Contact us directly any time you need assistance.

- Call: 1-866-956-8602
- Email: connect@anthem.com

You'll get personal sales service — not lip service.

Our Connect Team was created to help specifically with your new small group sales and service. So feel free to contact us with any type of plan question. We won't leave you hanging or send you somewhere else to dig up the information you need. We can't say it enough — we're here for you.

Small Group (2-50) Underwriting Guidelines

Dental

- o Participation requirements:
 - Non-voluntary dental sold stand-alone or with medical: Groups with 2-4 eligible employees require 100% participation. Groups with 5-50 eligible employees require 50% participation.
 - Voluntary dental sold stand-alone or with medical: A minimum of 5 employees must enroll in the stand-alone dental products. There is no further participation requirement.
- o Orthodontic coverage is available for groups of 5 or more enrolled.
- o Waiting periods:
 - Non-voluntary dental: no waiting periods
 - Voluntary dental: A 12-month waiting period applies to employee-paid (voluntary) major and orthodontic services. Twelve-month waiting period waived only for initial enrollees with prior comparable group coverage. Prior comparable coverage is defined as at least 12 months consecutive coverage with the same coverage categories (e.g., preventive, basic, major, orthodontic) as the dental plan the group selects. DHMO may be considered comparable coverage.
- o Rate guarantee options of 12 or 24 months
- o A dual option is available if the group has at least 15 net eligible employees, a minimum of 5 employees must enroll in each option, and the two plans offered must have at least a 10% premium differential of the employee-only tier premium. Not allowed for Voluntary products.

Vision (Standalone plans)

- o Participation requirements:
 - Non-voluntary vision sold alongside medical and/or dental for eligible employees and their dependents not enrolling on Anthem medical plans that offer an embedded Blue View Vision plan: Minimum of 2 enrolled employees. Vision participation must match medical and/or dental participation; if less, must be at least 50% of total eligible employees.
 - Non-voluntary vision sold stand-alone: Minimum of 2 enrolled employees; must be at least 50% of total eligible employees.
 - Voluntary vision sold stand-alone or with medical and/or dental: Minimum of 5 enrolled employees.
- o 24-month rate guarantee
- o No waiting periods

Life and disability

These underwriting guidelines apply to all life and disability products. Life and disability underwriting guidelines differ from medical underwriting guidelines. This is not a complete list of all life and disability underwriting requirements. Each group is evaluated during the underwriting process. These basic underwriting guidelines are subject to change at an underwriter's discretion. Additional guidelines for each product are shown below.

- o 24-month rate guarantee
- o Valid and appropriate SIC must be used for quoting. Rates are subject to change if appropriate SIC is not used.
- o Group must have been in business at least one year for short-term disability, long-term disability, voluntary short-term disability, voluntary long-term disability.
- o Group must be in good financial status. Groups in bankruptcy are not eligible.
- o Employees must be actively at work. Employees must be U.S. citizens working in the U.S. or approved foreign nationals with U.S. work visas working in the U.S.
- o Retiree coverage is not available.
- o 1099 workers/contractors are not eligible for coverage.
- o May be sold with other Anthem products or as stand-alone.
- o Employees must work at least 30 hours per week to be eligible.
- o Groups must maintain the minimum participation levels to remain eligible. Groups may not be renewed if participation falls below the required minimum.
- o No more than 50% of any group may be related by marriage or blood. *Exception:* Underwriting may agree to an exception to quote a basic life and AD&D flat benefit if the group exceeds the 50% marriage or blood relationship rule. To qualify for this exception, family members must be employed for one year to be eligible.

Let us help you (continued)

Group term life

- Groups of 2-9, age banded rates.
- Groups of 10+, composite rates.
- Participation requirements:
 - All eligible employees must participate when coverage is entirely employer-paid (Religious waiver allowed with written documentation.)
 - 75% of eligible employees must participate when employee contribution is required. (These participation requirements are the same for group term life sold with or without medical and for term life sold with or without other life and disability products).
- Contribution requirements: Minimum employer contribution (not including dependent coverage) is 25% for contributory plans and 100% for non-contributory plans.
- Benefit may vary by class based on employer offering by class up to maximum number of classes (2-9, 1 class; 10-50, 5 classes). No more than 2.5X difference in life benefit amount between classes. No carve outs allowed. It's acceptable to create a class with a \$50,000 maximum benefit for those employees desiring no imputed income for tax purposes.
- No open enrollment allowed. Annual enrollments are allowed for contributory coverage, late enrollees are subject to Evidence of Insurability.
- Increase in coverage for non-contributory basic life:
 - Increase at renewal, Groups of 10+: If a group wants an increase in coverage of more than 2X their current benefit, all employees must submit Evidence of Insurability and be approved by Medical Evidence Underwriting. If any employee is not approved, the increase in the group's benefit amount will not be effective for the entire group.
 - Increase at renewal, Group of 2-9: If a group wants to increase coverage, all employees must submit Evidence of Insurability and be approved by Medical Evidence Underwriting. If any employee is not approved, the increase in the group's benefit amount will not be effective for the entire group.
 - Increase mid-year/not at renewal, All size groups: If a group wants to increase coverage, all employees must submit Evidence of Insurability and be approved by Medical Evidence Underwriting. If any employee is not approved, the increase in the group's benefit amount will not be effective for the entire group.
- Increase in coverage for contributory basic life, all size groups:
 - Increase at renewal or mid-year/not at renewal: If a group wants to increase coverage, all employees must submit Evidence of Insurability and be approved by Medical Evidence Underwriting. If any employee is not approved, the increase in the group's benefit amount will not be effective for the entire group.

Supplemental life and voluntary life

- Age banded rates.
- Supplemental life must be sold with group term life. Voluntary life is sold as stand-alone.
- Participation requirement: Greater of 20% of eligible employees or 5 employees must enroll. Example: A group with 10 employees will need to have 5 employees enroll to satisfy the 'greater of' requirement.
- Contribution requirement: 100% employee-paid.
- Supplemental life only – employees must be enrolled in Group term life coverage.
- Takeover coverage: Initial one-time enrollment is included for 30 days prior to group effective date for takeover coverage on groups with 10 or more eligible lives.
 - For groups with Supplemental/Voluntary life employee guaranteed issue limit of more than \$100,000, the initial one-time enrollment employee guaranteed issue limit is \$100,000. For example, if the group's employee guaranteed issue limit is \$200,000, the initial one-time enrollment employee guaranteed issue limit is \$100,000.
 - For groups with Supplemental/Voluntary life employee guaranteed issue limit of less than \$100,000, the initial one-time enrollment employee guaranteed issue limit is the group's employee guaranteed issue limit. For example, if the group's employee guaranteed issue limit is \$50,000, the initial one-time enrollment employee guaranteed issue limit is \$50,000.
 - For groups with Supplemental/Voluntary life spouse guaranteed issue limit of more than \$10,000, the initial one-time enrollment spouse guaranteed issue limit is \$10,000. For example, if the group's spouse guaranteed issue limit is \$20,000, the initial one-time enrollment spouse guaranteed issue limit is \$10,000.
 - For groups with Supplemental/Voluntary life spouse guaranteed issue limit of less than \$10,000, the initial one-time enrollment spouse guaranteed issue limit is the group's spouse guaranteed issue limit. For example, if the group's spouse guaranteed issue limit is \$5,000, the initial one-time enrollment spouse guaranteed issue limit is \$5,000.
- This is not an annual open enrollment.

- Future enrollments require Evidence of Insurability for late enrollees and increases in coverage regardless of amount.
- Requests for takeover/grandfathering of Supplemental/Voluntary life amounts need to be reviewed and approved by Life & Disability Underwriting.
- o New coverage: Initial one-time enrollment is included for 30 days prior to group effective date for groups that have never offered Supplemental/Voluntary life. Employees and dependents may enroll up to the guaranteed issue limits without Evidence of Insurability.
- o No annual open enrollment. Evidence of Insurability is required for late enrollees and increases in coverage regardless of amount. Evidence of Insurability is required for all coverage amounts above guaranteed issue limits.
- o Increase in coverage for Supplemental/Voluntary life, all size groups, at renewal or mid-year/not at renewal:
 - If a group wants to increase coverage, all employees must submit Evidence of Insurability and be approved by Medical Evidence Underwriting. If any employee is not approved, the increase in the group's benefit amount will not be effective for the entire group.

Basic and optional supplemental/voluntary dependent life

- o Dependent coverage cannot exceed 50% of the employee amount.
- o Child coverage begins on the 15th day following birth/ends at age 26.
- o Family unit rate structure.

Short-term disability and long-term disability

- o Groups of 2-9, age banded rates.
- o Groups of 10+, composite rates.
- o Participation requirements:
 - All eligible employees must participate when coverage is entirely employer-paid.
 - 75% of eligible employees must participate when employee contribution is required.
- o Short-term and long-term disability are available independent of each other.
- o Contribution requirements: The minimum employer contribution for STD insurance coverage is 25% for contributory plans and 100% for non-contributory plans.

- o No open enrollment allowed. 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.
- o Short-term disability does not replace the state mandated benefits of CA, NY, NJ, HI, PR or RI. This plan will integrate or offset with the state-mandated coverage where employees covered by such plans exist at time of claim. If the census data provided for a quote includes state location at the employee level, the state-mandated plan benefits will be considered in setting our pricing.
- o Pre-existing condition limitation applies to long-term disability.

Voluntary short-term and long-term disability

- o Age banded rates
- o Participation requirement: Greater of 20% of eligible employees or 10 employees must enroll.
- o Voluntary short-term and voluntary long-term disability are available independent of each other.
- o Contribution requirements: no employer contribution.
- o No open enrollment allowed. Annual enrollments are allowed but require Evidence of Insurability. Pre-existing condition limitation applies.
- o Takeover coverage: No initial one-time enrollment for takeover coverage. Evidence of Insurability is required for late enrollees and increases in coverage regardless of amount.
- o New coverage: Initial one-time enrollment is included for 30 days prior to group effective date for groups that have never offered voluntary short-term and long-term disability. Employees may enroll up to the guaranteed issue limits without Evidence of Insurability.
- o No annual open enrollment. Evidence of Insurability is required for late enrollees and increases in coverage regardless of amount.
- o Evidence of Insurability is required for all coverage amounts above guaranteed issue limits.
- o Pre-existing condition limitation applies to VSTD and VLTD.
- o Quote for VLTD assumes participation in Social Security. Groups that do not participate in Social Security or have other state or local disability plans must be quoted by Life & Disability Underwriting.

This information is intended to be a brief outline of life and disability underwriting guidelines and not intended to be a complete description of the underwriting policies. Each group is underwritten individually and other underwriting factors apply. Anthem may decline to quote on a group. Groups in certain SIC classifications are not eligible for coverage. In the event of a conflict between a Proposal and this document, the terms of the Proposal will prevail.

Quoting guidelines

To help your clients get the most timely, accurate and competitive quote for their 2-50 business, please provide the following information:

Dental and vision (2-50)

Minimum information needed to quote:

- Census (including gender; date of birth (DOB); ZIP codes; enrolled dental tier)
- Tier structure (four-tier rates)
- SIC code and total number of eligible employees (for quoting dental)
- Total number of eligible employees (for quoting vision)
- Plan design
- Current rates

Additional information for the most competitive quote:

- Renewal rates/rate history
- Current carrier certificate

Group term life (2-50), Supplemental life (10-50), Voluntary life (10-50)

Minimum information needed to quote:

- Census (including gender; age or DOB; class structure with benefits; salary (salary-based benefit); name or employee ID)
- Plan design
- Employer contribution percentage
- For Voluntary life, elected coverage amounts

Additional information for the most competitive quote:

- Current rates
- Renewal rates
- Current carrier certificate (optional, to match plan design)
- Supplemental life and dependent life census with DOB, gender, benefit amounts, name or employee ID

Short-term disability (2-50), Voluntary short-term disability (10-50)

Minimum information needed to quote:

- Census (including DOB; gender; salary; class structure with benefits; name or employee ID; ZIP codes)
- Plan design
- Employer contribution percentage
- Elected coverage amounts

Additional information for most competitive quote:

- Current rates
- Renewal rates
- Current carrier certificate

Long-term disability (2-50), Voluntary long-term disability (10-50)

Minimum information needed to quote:

- Census (including DOB; gender; salary; class structure with benefits; occupations (for VLTD); elected coverage amounts; name or employee ID)
- Plan design
- Employer contribution percentage
- Employees' occupations

Additional information for the most competitive quote:

- Current rates
- Renewal rates
- Current carrier certificate



**Need help quoting,
finding forms or
marketing materials?**

**Check out the tools available to
you at [anthem.com/producer](https://www.anthem.com/producer).**

How to get a quote

- Generate a medical, dental, vision, life and/or disability quote using the SALES tool.
- Contact our Connect team at 1-866-956-8602 or connect@anthem.com for additional plan options.





Pick a plan

Our variety of plan options for dental, vision, life and disability coverage means your clients will be able to find a plan that's right for their employees' health needs and their own business needs.

Dental Essential Choice PPO plans (2-50)

All plans include International Emergency Dental Program, Ask a Hygienist and SpecialOffers.

	Value	Classic		Enhanced		Voluntary	
	Passive	Passive	Active	Passive	Active	Passive	Active
Annual benefit maximum	\$500	\$1,000 / \$1,250 / \$1,500 / \$2,000 / Unlimited		\$1,500 / \$2,000 / \$2,500 / Unlimited	\$1,000 / \$1,500 / \$2,000 / \$2,500 / Unlimited	\$1,000 / \$1,250 / \$1,500	
Annual deductible¹ (individual, family)	\$50, \$150	\$50, \$150		\$50, \$150		\$50, \$150	
Diagnostic and preventive services¹ (INN, OON)	100%, 100%	100%, 100%	100%, 80%	100%, 100%		100%, 100%	100%, 80%
Basic services (INN, OON)	80%, 80%	80%, 80%	80%, 60%	90%, 90%	100%, 100% / 90%, 80%	80%, 80%	80%, 60%
Major services (INN, OON)	Not covered	50%, 50%		60%, 60%	60%, 50%	50%, 50%	
Endodontic, periodontal and oral surgery services	Basic / Not covered	Basic / Major		Basic / Major		Basic / Major	
Orthodontia services²	Not covered	Not covered / 50%		Not covered / 50%		Not covered / 50%	
Orthodontia coverage	Not covered	Not covered / Children only / Adults and children		Not covered / Children only / Adults and children		Not covered / Children only	
Orthodontia lifetime maximum	Not applicable	Not applicable / \$1,000 / \$1,500 / \$2,000		Not applicable / \$1,500 / \$2,000	Not applicable / \$1,000 / \$1,500 / \$2,000	Not applicable / \$1,000	
Waiting periods³ (major services and orthodontia)	Not applicable	None		None		12 months	
Out-of-network reimbursement	90th / MAC	90th / MAC		90th / MAC		90th / MAC	
Dental network	Dental Complete	Dental Complete		Dental Complete		Dental Complete	
Annual maximum carryover⁴	Included	Included / Not included		Included / Not included		Included	
Posterior composites	Included	Included		Included		Included	
Dental implants	Not included	Included		Included		Included	
Anthem Whole Health Connection	Included	Included		Included		Included	
Accidental dental injury benefit⁵	Included	Included		Included		Included	
Extension of benefits	Included	Included		Included		Included	

INN = In-network or Network

OON = Out-of-network or Non-network

MAC = Maximum allowable charge

1 Deductible is waived for diagnostic and preventive services.

2 Optional benefit. Available for groups of 5+ employees enrolled.

3 12-month waiting period waived only for initial enrollees with prior comparable group coverage.

4 Annual maximum carryover benefit isn't included with unlimited annual maximum plans.

5 No deductible, no coinsurance or waiting periods apply. Accumulates to the annual maximum.

2021 Blue View Vision (2-50)

These plans are available on an employer-paid basis or on a voluntary basis for groups with five or more enrolled employees.

CY = calendar year

Plan	Copay ¹ for eye exam/ eyeglass lenses	Allowance ^{1,2} for frames/contact lenses	Eye exam (frequency)	Eyeglass lenses (frequency)	Frames (frequency)	Contact lenses (frequency)
Full service plans						
FS.A.10.0.130.130	\$10/\$0	\$130/\$130	Once every CY	Once every CY	Once every CY	Once every CY
FS.A.10.0.150.150	\$10/\$0	\$150/\$150	Once every CY	Once every CY	Once every CY	Once every CY
FS.A.10.0.180.180	\$10/\$0	\$180/\$180	Once every CY	Once every CY	Once every CY	Once every CY
FS.A.10.10.130.130	\$10/\$10	\$130/\$130	Once every CY	Once every CY	Once every CY	Once every CY
FS.A.10.10.150.150	\$10/\$10	\$150/\$150	Once every CY	Once every CY	Once every CY	Once every CY
FS.A.10.20.130.130	\$10/\$20	\$130/\$130	Once every CY	Once every CY	Once every CY	Once every CY
FS.A.10.25.130.130	\$10/\$25	\$130/\$130	Once every CY	Once every CY	Once every CY	Once every CY
FS.A.10.25.150.150	\$10/\$25	\$150/\$150	Once every CY	Once every CY	Once every CY	Once every CY
FS.A.10.25.200.200	\$10/\$25	\$200/\$200	Once every CY	Once every CY	Once every CY	Once every CY
FS.A.20.20.130.130	\$20/\$20	\$130/\$130	Once every CY	Once every CY	Once every CY	Once every CY
FS.B.10.0.180.180	\$10/\$0	\$180/\$180	Once every CY	Once every CY	Once every other CY	Once every CY
FS.B.10.10.130.130	\$10/\$10	\$130/\$130	Once every CY	Once every CY	Once every other CY	Once every CY
FS.B.10.10.150.150	\$10/\$10	\$150/\$150	Once every CY	Once every CY	Once every other CY	Once every CY
FS.B.10.20.130.130	\$10/\$20	\$130/\$130	Once every CY	Once every CY	Once every other CY	Once every CY
FS.B.10.25.130.130	\$10/\$25	\$130/\$130	Once every CY	Once every CY	Once every other CY	Once every CY
FS.B.10.25.150.150	\$10/\$25	\$150/\$150	Once every CY	Once every CY	Once every other CY	Once every CY
FS.B.10.25.200.200	\$10/\$25	\$200/\$200	Once every CY	Once every CY	Once every other CY	Once every CY
FS.B.20.20.130.130	\$20/\$20	\$130/\$130	Once every CY	Once every CY	Once every other CY	Once every CY
FS.C.10.20.100.100	\$10/\$20	\$100/\$100	Once every CY	Once every other CY	Once every other CY	Once every other CY
FS.C.10.20.130.130	\$10/\$20	\$130/\$130	Once every CY	Once every other CY	Once every other CY	Once every other CY
FS.C.20.20.130.80	\$20/\$20	\$130/\$80	Once every CY	Once every other CY	Once every other CY	Once every other CY
FS.C.20.20.130.130	\$20/\$20	\$130/\$130	Once every CY	Once every other CY	Once every other CY	Once every other CY
FS.C.20.20.150.150	\$20/\$20	\$150/\$150	Once every CY	Once every other CY	Once every other CY	Once every other CY
FS.C.25.0.120.115	\$25/\$0	\$120/\$115	Once every CY	Once every other CY	Once every other CY	Once every other CY
Materials only plans						
MO.A.10.130.130	Not covered/\$10	\$130/\$130	Not covered	Once every CY	Once every CY	Once every CY
MO.B.10.130.130	Not covered/\$10	\$130/\$130	Not covered	Once every CY	Once every other CY	Once every CY
MO.A.10.150.150	Not covered/\$10	\$150/\$150	Not covered	Once every CY	Once every CY	Once every CY
MO.B.10.150.150	Not covered/\$10	\$150/\$150	Not covered	Once every CY	Once every other CY	Once every CY
MO.A.20.130.130	Not covered/\$20	\$130/\$130	Not covered	Once every CY	Once every CY	Once every CY
MO.B.20.130.130	Not covered/\$20	\$130/\$130	Not covered	Once every CY	Once every other CY	Once every CY

¹ Amounts reflect in-network copays and allowances.

² Non-elective contacts covered in full.

Benefits include coverage for member's choice of eyeglass lenses or contact lenses, but not both.

Group term life (2-50)

	Group size 2-9	Group size 10-50
Rate guarantee	Two years	
Rate basis	Age-banded rates (each employee's premium is based on the group's rate table, using five-year age bands).	Composite rates (each employee's premium is based on the group rate, regardless of age).
Guaranteed issue amounts	\$50,000 for 2-9 lives. Medical questionnaires are required for coverage above the guaranteed issue amount and for late enrollees.	Variable by group size. Employees qualify for guaranteed issue benefit amounts based on the group size, as well as industry and occupation classes.
Benefit amounts	Specific dollar amount of \$15,000, \$25,000, \$30,000 or \$50,000 One-time annual salary, up to a maximum benefit of \$100,000	A specific dollar amount, from \$15,000 to \$350,000 (\$10,000 benefit available for groups that also purchase Supplemental Life. Must be quoted by Life & Disability Underwriting.) One, two or three times salary up to a maximum benefit of \$350,000 Life & Disability Underwriting can quote four or five times salary and will be considered based on group characteristics and volume based on Underwriting discretion. \$500,000 benefit maximum will be considered based on group characteristics and volume based on Underwriting discretion.
Age reductions	Benefits are reduced by 35% at age 65 and 50% at age 70. Benefits terminate at retirement.	Standard: Benefits are reduced by 35% at age 65 and 50% at age 70. Option: 50% reduction at age 70. Benefits terminate at retirement.
Accidental death and dismemberment (AD&D) benefits	Included AD&D includes extra benefits: Seat belt benefit, airbag benefit, child education, repatriation, common carrier benefit, coma benefit.	
Dependent life (Dependent coverage may not exceed 50% of the employee's life benefit amount.)	\$10,000 spouse/\$5,000 child age 15 days to 26 years \$5,000 spouse/\$2,500 child age 15 days to 26 years	Single options or multiple options under a class-based plan are available. – \$20,000 spouse/\$10,000 child age 15 days to 26 years – \$10,000 spouse/\$5,000 child age 15 days to 26 years – \$5,000 spouse/\$2,500 child age 15 days to 26 years
Waiver of premium	Standard for employee coverage. If an employee under age 60 becomes disabled, premiums are waived after the first six months of a total disability. Waiver ends at age 65 or at retirement, whichever comes first.	
Living benefit (accelerated death benefit)	Standard. If an employee has a terminal illness, pays up to 75% of the life benefit, up to \$125,000 for groups 2-9, \$250,000 for groups of 10-50.	
Continuation of coverage	Standard. If coverage ends due to a layoff or leave of absence, employers can continue the employee's coverage for up to three months by paying the premium. If coverage ends due to a disability, employees can continue coverage up to six months.	
Value added services	Resource Advisor member assistance program and Travel Assistance program are included.	

Supplemental life (10-50)

Group size 10-50	
Rate guarantee	Matches the group term life rate guarantee
Rate basis	Supplemental life: Age-banded rates (each employee's premium is based on the group's rate table, using five-year age bands). Supplemental accidental death and dismemberment: Composite rates (each employee's premium is based on the group rate, regardless of age).
Guaranteed issue amounts	Varies by group size. Employees qualify for guaranteed issue benefit amounts based on the group size, as well as industry and occupation classes. Medical questionnaires are required for coverage above the guaranteed issue amount and for late enrollees.
Benefit amounts	Specific dollar amount of \$25,000 to \$300,000, benefit in increments of \$5,000 or one, two or three times annual salary up to \$300,000. A lower maximum may be set by Underwriting. Each employee's benefit cannot be more than five times his or her salary. – \$10,000 benefit will be considered for groups that have other classes with higher coverage amount that make the average for all classes at or close to \$25,000 – \$500,000 benefit maximum will be considered based on group characteristics and volume based on Underwriting discretion
Age reductions	Age reduction schedule matches the reduction schedule for group term life. If group term life does not have age reductions, then supplemental life will have age reductions of 35% at age 65 and 50% at age 70. Benefits terminate at retirement.
Supplemental AD&D benefits	Matches supplemental life amount.
Supplemental dependent life	Dependent coverage may not exceed 50% of the employee's life benefit amount. Spouse coverage: \$10,000 to \$50,000 in increments of \$5,000 Dependent coverage: \$5,000, \$10,000 or \$15,000 for each child Dependent life guaranteed issue limit: Spouse: \$30,000 Child: All coverage is guaranteed issue
Waiver of premium	Standard for employee coverage. Waiver of premium for supplemental life coverage matches the basic life waiver of premium.
Living benefit (accelerated death benefit)	Standard. If an employee has a terminal illness, pays up to 75% of the life benefit, up to \$250,000.
Continuation of coverage	Standard. If coverage ends due to a layoff or leave of absence, employers can continue the employee's coverage for up to three months by paying the premium. If coverage ends due to a disability, employees can continue coverage up to six months.
Conversion	Employees and their dependents may have the right to convert to an individual whole life policy if coverage is terminated.
Portability	Standard. Employees under age 65 may keep their coverage if they have been covered under the plan for at least 12 months and apply within 31 days of ending employment. Coverage ends at age 70.
Value added services	Resource Advisor member assistance program and Travel Assistance program are included.

Voluntary life (10-50)

Group size 10-50	
Rate guarantee	Two years
Rate basis	<p>Voluntary life: Age-banded rates (each employee's premium is based on the group's rate table, using five-year age bands).</p> <p>Voluntary accidental death and dismemberment: Composite rates (each employee's premium is based on the group rate, regardless of age).</p>
Guaranteed issue amounts	Varies by group size. Employees qualify for guaranteed issue benefit amounts based on the group size, as well as industry and occupation classes. Medical questionnaires are required for coverage above the guaranteed issue amount and for late enrollees.
Age reductions	<p>Benefits are reduced by 35% at age 65 and 50% at age 70. Benefits terminate at retirement.</p> <p>Option: Benefits are reduced by 50% at age 70.</p>
Benefit amounts	<p>Specific dollar amount of \$25,000 to \$300,000, benefit in increments of \$5,000 or one, two or three times annual salary, up to \$300,000 depending on group size. A lower maximum may be set by Underwriting.</p> <p>Each employee's benefit cannot be more than five times his or her salary.</p> <ul style="list-style-type: none"> – \$10,000 benefit will be considered for groups that have other classes with higher coverage amount that makes the average for all classes at or close to \$25,000 – \$500,000 benefit maximum will be considered for salary-based plans based on group characteristics and volume based on Underwriting discretion
Accidental death and dismemberment (AD&D) benefits	Matches voluntary life amount.
Dependent life (Dependent coverage may not exceed 50% of the employee's life benefit amount.)	<p>Voluntary dependent coverage may not exceed 50% of the employee's life benefit amount.</p> <ul style="list-style-type: none"> – Spouse coverage: \$10,000 to \$50,000 in increments of \$5,000 – Dependent coverage: \$5,000, \$10,000 or \$15,000 for each child – Dependent life guaranteed issue limit: – Spouse: \$30,000 – Child: All coverage is guaranteed issue
Waiver of premium	Standard for employee coverage. If an employee under age 60 becomes disabled, premiums are waived after the first six months of a total disability. Waiver ends at age 65 or at retirement, whichever comes first.
Living benefit (accelerated death benefit)	Standard. If an employee has a terminal illness, the plan pays up to 75% of the life benefit, up to \$250,000.
Continuation of coverage	Standard. If coverage ends due to a layoff or leave of absence, employers can continue the employee's coverage for up to three months by paying the premium. If coverage ends due to a disability, employees can continue coverage up to six months.
Conversion	Employees and their dependents may have the right to convert to an individual whole life policy if coverage is terminated.
Portability	Standard. Employees under age 65 may keep their coverage if they have been covered under the plan for at least 12 months and apply within 31 days of ending employment. Coverage ends at age 70.
Value added services	Resource Advisor member assistance program and Travel Assistance program are included.

Short-term disability (2-50)

	Group size 2-9	Group size 10-50
Benefit features	<ul style="list-style-type: none"> – Residual benefit included. – Work retention assistance included. 	
Rate guarantee	Two years	
Rate basis	Age-banded rates (each employee's premium is based on the group's rate table, using five-year age bands).	Composite rates (each employee's premium is based on the group rate, regardless of age).
Guaranteed issue	2-5 employees: \$500 per week. Medical questionnaires are required for amounts over \$500. 6+ employees: all amounts are guaranteed issue.	
Benefit payments	60% or 67% (67% option for non-contributory plans) of weekly earnings or specific dollar amount of \$250 per week. Maximum benefit available \$200 to \$1,350 per week subject to the average of the top three salaries in the group. A lower maximum benefit may be set by Underwriting.	<ul style="list-style-type: none"> – 50%, 55%, 60% or 67% (67% option for non-contributory plans) of weekly earnings or specific dollar amount of \$200 or \$250 per week. – 40%, 70% available at Underwriting discretion. (70% option for non-contributory plans) \$100 or \$150 available at Underwriting discretion. Maximum benefit available \$200 to \$2,500 per week subject to the average of the top three salaries in the group. A lower maximum benefit may be set by Underwriting.
Benefit elimination period	Plan benefits can begin: <ul style="list-style-type: none"> – On the first day for disability caused by an accident, and on the eighth day for an illness-related disability. – On the eighth day for disability caused by an accident or illness. – On the 15th day for disability caused by an accident or illness. 	
Benefit periods	13 weeks or 26 weeks	13 weeks or 26 weeks. (9, 11, 12, 22, 24, or 25 weeks are also available to coordinate with LTD.)
First day hospital coverage	N/A	
Integrated short-term disability and Anthem health plans	We make referrals from Anthem Disability team to Anthem Care Management teams. Some of the conditions that we refer include diabetes, coronary artery disease, behavioral health, cancer, pharmacy and pregnancy-related claims. We make referrals to the appropriate Anthem Care Management programs like Case Management, Future Moms, High Risk OB or Behavioral Health.	
Value added services	Resource Advisor member assistance program included.	

Voluntary short-term disability (10-50)

	Group size 10-50
Rate guarantee	Two years
Rate basis	Age-banded rates (each employee's premium is based on the group's rate table, using five-year age bands).
Guaranteed issue	\$1,500
Benefit payments	50%, 55% or 60% of weekly earnings or a specific dollar amount of \$200 or \$250 per week. Maximum benefit up to \$1,500 per week subject to the average of the top three salaries in the group. Underwriting may set a lower maximum benefit.
Benefit elimination period	Plan benefits can begin: – On the first day for disability caused by an accident, and on the eighth day for an illness-related disability. – On the eighth day for disability caused by an accident or illness. – On the 15th day for disability caused by an accident or illness.
Benefit periods	13 weeks or 26 weeks. (9, 11, 12, 22, 24 or 25 weeks are also available to coordinate with LTD.)
Pre-existing condition	3/12 or 12/12
First day hospital coverage	N/A
Integrated short-term disability and Anthem health plans	We make referrals from Anthem Disability team to Anthem Care Management teams. Some of the conditions that we refer include diabetes, coronary artery disease, behavioral health, cancer, pharmacy and pregnancy-related claims. We make referrals to the appropriate Anthem Care Management programs like Case Management, Future Moms, High Risk OB or Behavioral Health.
Value added services	Resource Advisor member assistance program included.

Long-term disability (2-50)

	Group size 2-9	Group size 10-50
Rate guarantee	Two years	
Rate basis	Age-banded rates (each employee's premium is based on the group's rate table, using five-year age bands).	Composite rates (each employee's premium is based on the group rate, regardless of age).
Guaranteed issue	2-5 employees: Medical questionnaires are required. 6+ employees: All standard benefit amounts are guaranteed issue.	
Maximum benefit period options	Gold Plan: To age 65 with reducing benefit duration Silver Plan: Five years with reducing benefit duration Bronze Plan: Two years with reducing benefit duration	To Social Security normal retirement age (standard) Can also quote with Underwriting approval: – Two years with reducing benefit duration – Five years with reducing benefit duration – To age 65 with reducing benefit duration
Percentage of salary benefit	60%	50%, 60% and 67%* (Life & Disability Underwriting can also quote 40% on an exception basis)
Benefit maximum (per month)	\$3,000 or \$6,000	\$1,000 to \$6,000
Elimination period	Gold Plan: 90 or 180 days Silver Plan: 90 or 180 days Bronze Plan: 180 days	90 or 180 days
Pre-existing condition	12/6/24	3/12, 3/6/12, 12/24, 6/12/24 (Life & Disability Underwriting can also quote 6/12/24 on an exception basis.)
Partial disabilities	12-month work incentive benefit, then part-time earnings are offset using a proportionate loss formula.	
Benefit features	Maternity benefits: Coverage for pregnancy is the same as coverage for any illness-related disability. Additional benefits also included: 12-month work incentive benefit, vocational rehabilitation benefit with 5% incentive, work retention assistance. Workplace modification benefit	
Value added services	Resource Advisor member assistance program included.	

*67% plans must be non-contributory.

Voluntary long-term disability (10-50)

	Group size 10-50
Rate guarantee	Two years
Rate basis	Age-banded rates (each employee's premium is based on the group's rate table, using five-year age bands).
Guaranteed issue	\$6,000
Percentage of salary benefit	50% or 60%
Benefit maximum (per month)	\$6,000
Elimination period	90 or 180 days
	3/12, 3/6/12, 12/24, 6/12/24
Pre-existing condition	(Life & Disability Underwriting can also quote 6/12/24 on an exception basis)
Maximum benefit period options	To Social Security normal retirement age Can also quote with Underwriting approval: – Two years with reducing benefit duration – Five years with reducing benefit duration – To age 65 with reducing benefit duration
Partial disabilities	12-month work incentive benefit, then part-time earnings are offset using a proportionate loss formula.
Benefit features	Maternity benefits: Coverage for pregnancy is the same as coverage for any illness-related disability. Additional benefits also included: 12-month work incentive benefit, vocational rehabilitation benefit with 5% incentive, work retention assistance. Workplace modification benefit.
Value added services	Resource Advisor member assistance program included.



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Blue View Vision customer service	Phone (group): 1-866-723-0515 Online: anthem.com	Vision claims: Blue View Vision P.O. Box 8504 Mason, OH 45040-7111
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