

A smiling man with short dark hair and glasses, wearing a grey suit, white shirt, and dark tie. He is positioned in the foreground, looking towards the camera. The background is a blurred office scene with a woman writing on a whiteboard and another person standing nearby. The entire image is framed by blue and grey diagonal stripes.

# SELECT PLAN

DESIGNED BY ENGINEERS, FOR ENGINEERS

*You Belong™*

# YOU BELONG IN A BETTER HEALTH PLAN

## The Select Plan

ACEC Life/Health Insurance Trust provides an extensive range of health care coverage options to participating ACEC firms of all sizes. One of those options is the Select Plan, an alternative funding model that is available in 32 states to employees of small and midsize firms.

What do we mean by "alternative funding model?" Basically, the Select Plan combines many of the features of the self-funded model with added risk protection. Firms can retain a portion of their medical benefit premiums in years when the utilization of health care services and claims is low, while establishing a fixed annual premium.

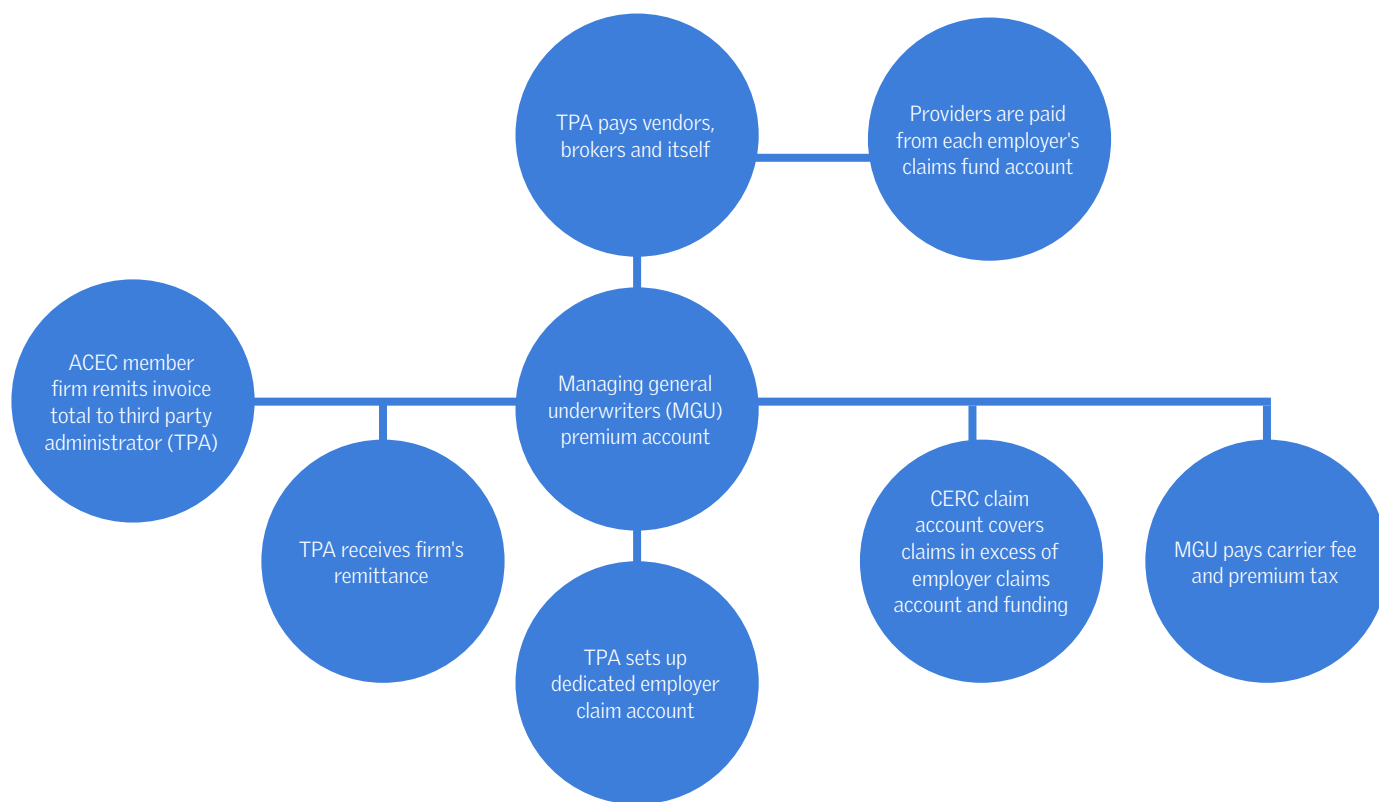
## KEY ADVANTAGES

As a small to midsize ACEC firm, you will benefit from the following when you elect the Select Plan for your employees:

- Access in 32 states (please refer to the map on page 7)
- Preferred group rates based on the pooled experience of other consulting engineering firms only
- The opportunity to receive a financial credit for effectively using medical services
- Financial risk that is limited to the premium your firm pays each month
- A dedicated customer service and account management team that is available to answer and meet your unique needs
- Extensive benefit plan options
- Access to the Aetna Choice POS II Network of doctors and hospitals, as well as more than 75,000 pharmacies nationwide
- Numerous exemptions to health care reform requirements for fully insured plans, which means more competitive coverage
- The opportunity to enroll in the Designed Wellness Program, which aims to encourage healthy behaviors, as well as the Designed Telehealth, which gives you 24/7 access to certified doctors via phone or video—whether you're at work, home or on the go
- Access to Benefitsolver®, our exclusive state-of-the-art online enrollment system that is designed to alleviate your HR/administrative workload by streamlining the benefits enrollment process



## HOW THE PLAN WORKS



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### Important Notes

- The member firm's cost (risk) is limited to their invoiced total. This includes funding of claims fund, risk premium and fees.
- Medical claims are paid to the providers from your firm's claims account.
- Any surplus of funds in your firm's claims account at the end of the contract period is credited to your firm and applied to future invoices.
- If your firm's claims account is exhausted and requires additional funding, the Trust and our insurance carrier partner will fund the cost of all claims submitted.



# HOW TO OBTAIN A QUOTE

If you are ready to take the next step in determining whether the Select Plan is right for your firm, start by obtaining a quote from us! Simply provide the following to the Life/Health Trust Sales team at [sales@aceclifehealthtrust.com](mailto:sales@aceclifehealthtrust.com) and a licensed sales representative will be in contact with you.

EMPLOYEE POPULATION	REQUIRED DOCUMENTS
2–24 Employees	<p>Completed Member Firm Application (<a href="#">click here</a> to download)</p> <p>Employee Census (include all eligible employees and their dependents)</p> <ul style="list-style-type: none"><li>• Include each employee and dependent's first and last name, gender, date of birth and home zip code</li><li>• Indicate coverage type (e.g., employee only, employee + spouse, employee + child(ren), employee + family)</li><li>• If offering dual option plan designs, please indicate which plan design is applicable to each employee</li><li>• List all COBRA participants (former employees and/or dependents), if applicable</li></ul> <p>Completed Health Statement from each employee. We use the HIPAA-compliant secure web portal EasyAppsOnline to obtain this information.</p> <ul style="list-style-type: none"><li>• Those waiving coverage only need to complete the basic demographic information, indicate their desire to waive coverage and sign the form.</li></ul> <p>Summary of current and renewal medical benefit plan(s)</p> <p>Current and renewal medical benefit plan rates</p>
25–29 Employees	<p>Completed Member Firm Application</p> <p>Employee Census (include all eligible employees and their dependents)</p> <ul style="list-style-type: none"><li>• Include each employee and dependents' first and last name, gender, date of birth and home zip code</li><li>• Indicate coverage type (e.g., employee only, employee + spouse, employee + child(ren), employee + family)</li><li>• If offering dual option plan designs, please indicate which plan design is applicable to each employee</li><li>• List all COBRA participants (former employees and/or dependents), if applicable</li></ul> <p>Completed Health Statements may be required after initial review (at the discretion of underwriting). We use the HIPAA-compliant secure web portal EasyAppsOnline to obtain this information.</p> <p>Summary of current and renewal medical benefit plan(s)</p> <p>Current and renewal medical benefit plan rates</p>
100 Employees or More*	<p>Completed Member Firm Application</p> <p>Employee Census (include all eligible employees and their dependents)</p> <ul style="list-style-type: none"><li>• Include each employee and dependent's first and last name, gender, date of birth and home zip code</li><li>• Indicate coverage type (e.g., employee only, employee + spouse, employee + child(ren), employee + family)</li><li>• If offering dual option plan designs, please indicate which plan design is applicable to each employee</li><li>• List all COBRA participants (former employees and/or dependents), if applicable</li></ul> <p>24 months of incurred claims and premium paid data</p> <p>List of all claims over \$15,000 incurred in the past 12 months</p> <p>Summary of current and renewal benefit plan(s)</p> <p>Current and renewal medical benefit plan rates</p>

**Note:** At the Trust's discretion, a sample quote can be released without the required underwriting documentation. However, a sample quote is non-binding and subject to change once all enrollment information has been received.



# FREQUENTLY ASKED QUESTIONS

We have put together the following summary for your convenience. If you have any further questions regarding the Select Plan, please call (844) 259-0325, go to [www.aceclifehealthtrust.com](http://www.aceclifehealthtrust.com) or email [sales@aceclifehealthtrust.com](mailto:sales@aceclifehealthtrust.com).

## OVERVIEW

### Where are these plans offered?

The Select Plan is offered to ACEC member firms that are headquartered in one of the following 32 states:

- Alabama
- Alaska
- Arkansas
- Connecticut
- Delaware
- Idaho
- Indiana
- Iowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi
- Montana
- Nebraska
- Nevada
- New Hampshire
- New Jersey
- New York\*
- North Dakota
- Oregon
- Pennsylvania
- South Dakota
- Tennessee
- Vermont
- Washington
- West Virginia
- Wyoming

\*For more than 100 employees.

### What are the various features and benefits of the Select Health Plan?

The Select Plan offers more than 50 standard PPO plan designs with in- and out-of-network benefits. These benefit designs have different deductibles and out-of-pocket maximums.

The Select Plan is unique in that it includes an aggregate only self-funded feature that provides firms with the opportunity to retain a portion of their medical premiums in years where the utilization of health care services and claims is low, while establishing a fixed annual premium. In addition, the Select Plan is not subject to the rate and pricing requirements under the Affordable Care Act (ACA, or health care reform), which provides a further price advantage for ACEC member firms.

### What are the plan participation requirements?

Seventy-five percent of employees must participate in the plan.

### Can I offer any of the benefits on a voluntary basis (i.e., no employer contribution)?

No. The Select Plan requires an employer contribution of at least 50 percent of the employee-only rate in order to be offered.

### Why is the Trust offering this additional benefit option?

The mission of ACEC Life/Health Trust is to provide health care benefit solutions and services to support the business objectives of ACEC member firms and the health and well-being of the firms' employees and families. We believe the Select Plan enhances our overall value proposition to member firms located in the 32 states where the Select Plan is offered.

# FREQUENTLY ASKED QUESTIONS

## NETWORK/PLAN ADMINISTRATION

### **Will I be able to use my current medical provider in the plan?**

The Select Plan offers the Aetna Choice POS II Network. To verify whether your provider is in the network, go to [www.aetna.com/docfind/custom/mymeritain](http://www.aetna.com/docfind/custom/mymeritain).

### **Is my pharmacy in the network and will my prescription drugs be covered at the same cost?**

The pharmacy benefit manager for the Select Plan is CVS. In addition, the pharmacy network includes more than 50,000 retail outlets, including:

Albertsons	Sam's Club
Costco	Shopko
CVS	Target
K-Mart	Walgreens
Kroger	Walmart
Rite Aid	And more!

We encourage you to review the Select Plan drug formulary and preferred drug list to ensure that your current medication has the same or similar coverage. For a copy of the formulary, please email [info@aceclifehealthtrust.com](mailto:info@aceclifehealthtrust.com) or visit [www.caremark.com](http://www.caremark.com).

### **Who administers the Select Plan?**

The third party administrator (TPA) for the Select Plan is Aetna Choice POS II TPA: Meritain, based in Minneapolis, MN.

## SALES/MARKETING & BROKER

### **How are these plans marketed?**

The Select Plan will be marketed both directly and through brokers and agents to individual ACEC member firms, as well as consulting engineering firms that are not current members of ACEC. We encourage the ACEC member firms to continue to utilize their own appointed insurance broker or agent/consultant. The Trust has made provisions for the continued use of these brokers and agents.

### **Who should I contact about sales of the Select Plan?**

Rates for the Select Plan are issued based on each individual member firm. All rates are issued as composite rates. To obtain a rate for your firm, please send your request to [sales@aceclifehealthtrust.com](mailto:sales@aceclifehealthtrust.com).

The information that needs to be supplied to obtain a quote varies by the member firm's size and is listed on <http://aceclifehealthtrust.com/products/select-plan/>.

### **Will I be able to keep my current broker as the broker of record?**

Yes! All Select Plan rates will be quoted to include compensation and payments to brokers. Compensation brokers and agents are made on a fee basis. In order for brokers to represent the Select Plan, they will need to provide a copy of their respective state insurance license and proof of their E&O coverage.

# SELECT PLAN AVAILABILITY

## Can I still participate in the plan if I do not live in one of the Select Plan states?

Currently, the Select Plan is only available to member firms whose main office or headquarters are located in one of the 32 states shown in blue on the map below. However, employees can work in any of the 50 states to be eligible.

## SELECT PLAN STATES

In an effort to provide affordable, quality healthcare solutions to ACEC member firms across America, the Select Plan offers a strong network of providers accessible to you in 32 states.

