



FACE RISK HEAD ON



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To build
something
great,
there must
be a plan.

Survey Results

- 285 Total Responses from Dental Practices
- 250 Dental Practices are eligible to move on to Phase 2 with 1470 eligible members interested in coverage
 - ✓ Nebraska Owned
 - ✓ 2 or more eligible employees
 - ✓ Be willing to contribute at least 50% of the single premium
 - ✓ Meet minimum participation requirements

Phase 2 Underwriting

- 2 Underwriting Methods Based on Group Enrollment Count
 - ✓ 1-14 enrolled, all eligible employees must submit an application utilizing the BCBS data hub
 - ✓ 15+ enrolled, a member level census can be submitted for underwritten rates
- All 250 Dental Practices will receive an email on 4/1 with instructions on completing the underwriting process. Email will come from NEDA@northrsikpartners.com
- This must be completed by 4/16 to submit to BCBS

Phase 2 Considerations

- Final rates will be issued based on this data, it is important to have employees enroll / waive as accurately as possible or rates provided may not be valid
- Any change in enrollment +/- 10% will need to be resubmitted to BCBs for updated rates (this includes dependents)
- Participation guidelines must be met – 50% of the total eligible OR 75% of those without other qualified coverage not less than 25% of the total eligible (individual coverage, Christian Share plans are not qualified coverage)

Final Plan and Rates Established

- The goal is to have final plans and rate tables presented by 5/15 for negotiation with North Risk Partners and the NDA.
- Plans, Rate Tables and Underwriting Guidelines Established
 - ✓ Nebraska State Bar Association has 7 plans, 7 rate tiers, 3 networks
 - ✓ Nebraska Trucking Association has 5 plans, 7 rate tiers, 3 networks
- Email out plans and rates to all dental practices that completed underwriting by the third week of May

Implementation

- Decision on moving forward is needed as soon as possible (we must have at least 250 enrolled employees for installation)
- 6/1 to 7/1 complete paperwork with each Practice that has made the decision to move forward with coverage effective 7/1/2021 (contribution and participation guidelines must be met)
- All Dental Practices with existing plans will receive Deductible & Out of Pocket credit

Association Plan Positives

- You can implement a group plan with only 1 enrolled employee (you have to have at least two eligible employees to be considered a group but you only need one to enroll to as long as you are meeting the participation requirements)
- Your practice is able to qualify for lower rates than the ACA plans if you are healthy
- Lower participation requirements than other underwritten programs (Blue Flex)
- Being part of a larger group protects you from high renewal increases due to claims, renewal is negotiated as an association group and not as an individual member
- You are guaranteed to stay in the same rating tier until your 2nd renewal through the program and can only be moved up one rate tier at a time even with high claims



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