

# Join a health plan for small businesses in your state

Enjoy a cost-saving solution providing benefits your employees want



You deserve an easy, affordable way to offer high-quality healthcare to your employees. The Chamber Benefit Plan, administered by The Health Plan (THP) with network access from HealthLink and Freedom Network Select, offers small businesses in your state access to comprehensive healthcare benefits at rates usually reserved for larger organizations. These plans are designed specifically for businesses that are Chamber Benefit Plan members. They include the benefits, programs, and services that reflect your local communities.

## Big benefits for small business

When you join the Chamber Benefit Plan, your small business becomes part of a large, self-funded group that shares in the overall claims risk with other small businesses. As part of this group, you'll enjoy the financial protection backed by stop loss coverage, and a flexible choice of plans designed exclusively for Missouri Chamber Federation plan participants. Lower, predictable costs and easier administration make it a great alternative to Affordable Care Act (ACA) plans, letting you focus on running your business — not your health plan.

## A healthy business depends on healthy employees

Along with financial peace of mind, you can offer your employees access to care through one of the nation's largest networks of high-quality doctors, hospitals, and other healthcare professionals. Eligible businesses also receive expanded health and wellness tools, services, and resources designed to empower employees to make more-informed healthcare decisions that can improve health and help lower costs for everyone.



## The Chamber Benefit Plan difference

Joining a larger self-funded group helps small businesses save on costs while providing robust benefits to their employees. The Chamber Benefit Plan, and the doctors and other care professionals we choose to work with, must meet high standards before we connect them with local businesses like yours. Plus, the Chamber Benefit Plan gives you stop loss protection included with the plan. The cost of this coverage is built into predictable monthly payments, so you know what to expect in health plan costs.



### Cost advantages

- Competitive rates
- Fixed, predictable payments
- Stop loss coverage to protect you from high-cost claims

### Inclusive, flexible access

- A choice of benefit plans
- Inclusive access for people who reflect local communities where they work

### Ease in use

- One single account management team ready to answer questions and resolve issues
- Simpler plan administration and streamlined renewal process
- One place to manage multiple plans

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### Benefits designed for whole-person health

Employees can count on outstanding core health and wellness programs and services, including 24-hour nurse line, case management, and telemedicine.

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# Frequently asked questions

## What is a Chamber Benefit Plan?

The Chamber Benefit Plan is a self-funded employee welfare benefit plan, trust, or other arrangement that is established or maintained for the purpose of offering group insurance to Missouri Chamber Federation members. It is governed by trustees and bylaws that satisfy the Missouri Chamber Federation/Missouri Department of Insurance.

## Who makes the decisions for the Chamber Benefit Plan?

There is a board of trustees that oversees the plan and ensures that it complies with all applicable laws and regulations.

## Why choose the Chamber Benefit Plan over an ACA plan?

By being part of a self-funded group, a business shares overall claims risk, as well as the cost for financial protection provided by stop loss coverage. Being part of a larger group also gives a business access to competitive, predictable rates and high-quality benefits through one of the largest national healthcare networks. In addition, expanded access to innovative tools, programs, and services empowers employees to make more-informed healthcare decisions that can improve their health, and can lower overall group costs.

## Which businesses are eligible to participate?

The Chamber Benefit Plan is available to small business employers who:

- Have at least two employees enrolled in the medical plan and no more than 50 full-time eligible employees.
- Have their corporate headquarters located in Missouri.
- Are members in good standing with a the Missouri Chamber Federation or your local participating chamber that satisfies the Missouri Department of Insurance.

Qualification to offer the plan depends on the business's location in the state.

## Do businesses have to join the Missouri Chamber Federation to participate in the plan?

Yes, a business needs to join the Missouri Chamber Federation to be eligible for the Chamber Benefit Plan. Missouri Chamber Federation members have access to a full range of high-quality plans and options that can lead to significant savings. Contact your local Missouri Chamber Federation for details about Missouri Chamber Federation membership dues and how to join. Brokers can contact their HealthLink representative to learn more about requirements for selling the plan, including joining a local chamber.

## Do businesses need to meet certain participation and contribution requirements?

Yes. At least 50% of the net eligible employees and a minimum of two employees must be covered under the plan.

The program also requires a minimum employer contribution of at least 50% of the employee rate, and 25% of the total premium equivalent.

If a business contributes 100% of the premium equivalent rate, then 100% of the net eligible employees must enroll.

## Can a business join the Chamber Benefit Plan at any time during the year?

Yes. Renewals for participating businesses in the Chamber Benefit Plan occur at different times of the year. A group's renewal date is based on the group's original effective date.

## How are premium equivalent rates (monthly premium payments) determined?

There are multiple factors that impact the premium equivalent rate, including:

- Medical history and expected future health claims risk of enrollees
- Age and gender of enrollees
- Number of people enrolled
- Where the business is located
- Benefits being offered

## What costs are included in the premium equivalent rate?

The premium equivalent rate covers expected claims, administrative expenses, taxes and assessments, and stop loss premiums.

## Are there other payments to make in addition to the premium equivalent rate?

Yes. In addition to monthly medical premiums, businesses receive invoices for product dues, and must also pay membership dues to the chamber of which they are a member.

## How will the annual renewal increase be determined?

Any overall increase needed for the Chamber Benefit Plan will be calculated based on a projection of the claims for the upcoming policy year for the entire plan. The increase for each participating business will then be calculated based on their specific risk profile and claims history, as well as any changes in their demographics and number of enrollees.

## Can a business terminate the plan at any time?

During the policy period, a business may only elect to withdraw from the plan at the end of a calendar month by giving written notice at least 30 days prior to that date. At renewal time, the business must give written notice at least 30 days in advance.

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