

Exhibit 1
Testing Summary for Calendar Year 2025
Blue Cross Blue Shield of Michigan – Large Group
Community Blue (CB) Plans - ALL PLANS PASS
Plan Primary

[illegible]

Rx Plans (Copay by Tier: Generic/Preferred Brand/Non Preferred Brand/Preferred Specialty/Non Preferred Specialty)

Drug Plan	Copay Design	Formulary	Rx Tiers Where Ded. Applies Before Rx Copays
A	\$10/\$40/\$80/\$40/\$80	Custom	None
B	\$10/\$40/\$80/\$40/\$80	Custom Select	None
C	\$10/\$40/\$80/\$40/\$80	Preferred Drug List	None
D	\$15/\$30/\$60/\$30/\$60	Custom	None
E	\$15/\$50/50% Min \$70 Max \$100/\$50/50% Min \$70 Max \$100	Custom	None
F	\$15/\$50/50% Min \$70 Max \$100/\$50/50% Min \$70 Max \$100	Custom Select	None
G	\$15/\$50/50% Min \$70 Max \$100/\$50/50% Min \$70 Max \$100	Preferred Drug List	None
H	\$20/\$60/50% Min \$80 Max \$100/\$60/50% Min \$80 Max \$100	Custom	None
I	\$20/\$60/50% Min \$80 Max \$100/\$60/50% Min \$80 Max \$100	Custom Select	None
J	\$20/\$60/50% Min \$80 Max \$100/\$60/50% Min \$80 Max \$100	Preferred Drug List	None
K	\$10/\$40/\$80/15% Min \$0 Max \$150/25% Min \$0 Max \$300	Custom	None
L	\$10/\$40/\$80/15% Min \$0 Max \$150/25% Min \$0 Max \$300	Custom Select	None
M	\$10/\$40/\$80/15% Min \$0 Max \$150/25% Min \$0 Max \$300	Preferred Drug List	None
N	\$15/\$50/50% Min \$70 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$300	Custom	None
O	\$15/\$50/50% Min \$70 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$300	Custom Select	None
P	\$15/\$50/50% Min \$70 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$300	Preferred Drug List	None
Q	\$20/\$60/50% Min \$80 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$300	Custom	None
R	\$20/\$60/50% Min \$80 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$300	Custom Select	None
S	\$20/\$60/50% Min \$80 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$300	Preferred Drug List	None

[illegible]

Drug Plan	Copay Design	Formulary	Rx Tiers Where Ded. Applies Before Rx Copays
A	\$10/\$40/\$80/\$40/\$80	Custom	None
B	\$10/\$40/\$80/\$40/\$80	Custom Select	None
C	\$10/\$40/\$80/\$40/\$80	Preferred Drug List	None
D	\$15/\$30/\$60/\$30/\$60	Custom	None
E	\$15/\$50/50% Min \$70 Max \$100/\$50/50% Min \$70 Max \$100	Custom	None
F	\$15/\$50/50% Min \$70 Max \$100/\$50/50% Min \$70 Max \$100	Custom Select	None
G	\$15/\$50/50% Min \$70 Max \$100/\$50/50% Min \$70 Max \$100	Preferred Drug List	None
H	\$20/\$60/50% Min \$80 Max \$100/\$60/50% Min \$80 Max \$100	Custom	None
I	\$20/\$60/50% Min \$80 Max \$100/\$60/50% Min \$80 Max \$100	Custom Select	None
J	\$20/\$60/50% Min \$80 Max \$100/\$60/50% Min \$80 Max \$100	Preferred Drug List	None
K	\$10/\$40/\$80/15% Min \$0 Max \$150/25% Min \$0 Max \$300	Custom	None
L	\$10/\$40/\$80/15% Min \$0 Max \$150/25% Min \$0 Max \$300	Custom Select	None
M	\$10/\$40/\$80/15% Min \$0 Max \$150/25% Min \$0 Max \$300	Preferred Drug List	None
N	\$15/\$50/50% Min \$70 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$30	Custom	None
O	\$15/\$50/50% Min \$70 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$30	Custom Select	None
P	\$15/\$50/50% Min \$70 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$30	Preferred Drug List	None
Q	\$20/\$60/50% Min \$80 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$30	Custom	None
R	\$20/\$60/50% Min \$80 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$30	Custom Select	None
S	\$20/\$60/50% Min \$80 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$30	Preferred Drug List	None

Exhibit 3
Testing Summary for Calendar Year 2025
Blue Cross Blue Shield of Michigan – Large Group
Simply Blue Routine Care Plans - ALL PLANS PASS
Plan Primary

Plan	Ded.	Coins.	ECM	OOPM	Copay Strings (OV/SPEC/UC/ER)	A	B	C	D	E	F	G	H
Simply Blue Routine Care PPO \$2500/20%	\$2,500	20%	\$2,500	\$6,600	\$30/Ded&Coins/\$60/Ded&Coins	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS
Simply Blue Routine Care PPO \$2500/20%	\$2,500	20%	\$2,500	\$6,600	\$40/Ded&Coins/\$60/Ded&Coins	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS
Simply Blue Routine Care PPO \$4000/30%	\$4,000	30%	NA	\$6,600	\$30/Ded&Coins/\$60/Ded&Coins	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS
Simply Blue Routine Care PPO \$4000/30%	\$4,000	30%	NA	\$6,600	\$40/Ded&Coins/\$60/Ded&Coins	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS

Rx Plans (Copay by Tier: Generic/Preferred Brand/Non Preferred Brand/Preferred Specialty/Non Preferred Specialty)

Drug Plan	Copay Design	Formulary	Rx Tiers Where Ded. Applies Before Rx Copays
A	\$10/\$40/\$80/\$40/\$80	Custom	All but Tier 1
B	\$10/\$40/\$80/\$40/\$80	Custom Select	All but Tier 1
C	\$10/\$40/\$80/\$40/\$80	Preferred Drug List	All but Tier 1
D	\$15/\$30/\$60/\$30/\$60	Custom	All but Tier 1
E	\$15/\$50/50% Min \$70 Max \$100/\$50/50% Min \$70 Max \$100	Custom	All but Tier 1
F	\$15/\$50/50% Min \$70 Max \$100/\$50/50% Min \$70 Max \$100	Preferred Drug List	All but Tier 1
G	\$20/\$60/50% Min \$80 Max \$100/\$60/50% Min \$80 Max \$100	Custom	All but Tier 1
H	\$20/\$60/50% Min \$80 Max \$100/\$60/50% Min \$80 Max \$100	Preferred Drug List	All but Tier 1

Exhibit 4A
Testing Summary for Calendar Year 2025
Blue Cross Blue Shield of Michigan -- Large Group
Simply Blue (SB) HSA Plans - ALL PLANS PASS
Plan Primary

Plan	Ded.	Coins.	ECM	OOPM	Copay Strings (OV/SPEC/UC/ER)	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U
Simply Blue HSA PPO \$1650/0%	\$1,650	0%	NA	\$4,000	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$1650/10%	\$1,650	10%	NA	\$4,000	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$1650/20%	\$1,650	20%	NA	\$4,000	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$2000/0%	\$2,000	0%	NA	\$4,000	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$2000/10%	\$2,000	10%	NA	\$4,000	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$2000/20%	\$2,000	20%	NA	\$4,000	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$2500/0%	\$2,500	0%	NA	\$4,000	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$2500/10%	\$2,500	10%	NA	\$4,000	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$2500/20%	\$2,500	20%	NA	\$4,000	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$3300/0%	\$3,300	0%	NA	\$6,900	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$3300/20%	\$3,300	20%	NA	\$6,900	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$3300/30%	\$3,300	30%	NA	\$6,900	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$3500/0%	\$3,500	0%	NA	\$6,900	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$3500/20%	\$3,500	20%	NA	\$6,900	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$3500/30%	\$3,500	30%	NA	\$6,900	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Minimum Value Plans SB HSA \$4000/50%	\$4,000	50%	NA	\$6,350	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins	PASS																				
Minimum Value Plans SB HSA \$6350/0%	\$6,350	0%	NA	\$6,350	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins		PASS																			

Rx Plans (Copay by Tier: Generic/Preferred Brand/Non Preferred Brand/Preferred Specialty/Non Preferred Specialty)

Drug Plan	Copay Design	Formulary	Rx Tiers Where Ded. Applies Before Rx Copays
A	50%/50%/50%/50%/50%	Clinical	All
B	0%/0%/0%/0%/0%	Clinical	All
C	\$10/\$40/\$80/\$40/\$80	Custom	All
D	\$10/\$40/\$80/\$40/\$80	Custom Select	All
E	\$10/\$40/\$80/\$40/\$80	Preferred Drug List	All
F	\$15/\$30/\$60/\$30/\$60	Custom	All
G	\$15/\$50/50% Min \$70 Max \$100/\$50/50% Min \$70 Max \$100	Custom	All
H	\$15/\$50/50% Min \$70 Max \$100/\$50/50% Min \$70 Max \$100	Custom Select	All
I	\$15/\$50/50% Min \$70 Max \$100/\$50/50% Min \$70 Max \$100	Preferred Drug List	All
J	\$20/\$60/50% Min \$80 Max \$100/\$60/50% Min \$80 Max \$100	Custom	All
K	\$20/\$60/50% Min \$80 Max \$100/\$60/50% Min \$80 Max \$100	Custom Select	All
L	\$20/\$60/50% Min \$80 Max \$100/\$60/50% Min \$80 Max \$100	Preferred Drug List	All
M	\$10/\$40/\$80/15% Min \$0 Max \$150/25% Min \$0 Max \$300	Custom	All
N	\$10/\$40/\$80/15% Min \$0 Max \$150/25% Min \$0 Max \$300	Custom Select	All
O	\$10/\$40/\$80/15% Min \$0 Max \$150/25% Min \$0 Max \$300	Preferred Drug List	All
P	\$15/\$50/50% Min \$70 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$300	Custom	All
Q	\$15/\$50/50% Min \$70 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$300	Custom Select	All
R	\$15/\$50/50% Min \$70 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$300	Preferred Drug List	All
S	\$20/\$60/50% Min \$80 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$300	Custom	All
T	\$20/\$60/50% Min \$80 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$300	Custom Select	All
U	\$20/\$60/50% Min \$80 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$300	Preferred Drug List	All

Exhibit 4B
Testing Summary for Calendar Year 2025
Blue Cross Blue Shield of Michigan -- Large Group
Simply Blue (SB) HSA Plans
Medicare Primary

Plan	Ded.	Coins.	ECM	OOPM	Copay Strings (OV/SPEC/UC/ER)	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U
Simply Blue HSA PPO \$1650/0%	\$1,650	0%	NA	\$4,000	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$1650/10%	\$1,650	10%	NA	\$4,000	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$1650/20%	\$1,650	20%	NA	\$4,000	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$2000/0%	\$2,000	0%	NA	\$4,000	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$2000/10%	\$2,000	10%	NA	\$4,000	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$2000/20%	\$2,000	20%	NA	\$4,000	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$2500/0%	\$2,500	0%	NA	\$4,000	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$2500/10%	\$2,500	10%	NA	\$4,000	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$2500/20%	\$2,500	20%	NA	\$4,000	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$3300/0%	\$3,300	0%	NA	\$6,900	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$3300/20%	\$3,300	20%	NA	\$6,900	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$3300/30%	\$3,300	30%	NA	\$6,900	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$3500/0%	\$3,500	0%	NA	\$6,900	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$3500/20%	\$3,500	20%	NA	\$6,900	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Simply Blue HSA PPO \$3500/30%	\$3,500	30%	NA	\$6,900	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins			PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	
Minimum Value Plans SB HSA \$4000/50%	\$4,000	50%	NA	\$6,350	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins	FAIL																				
Minimum Value Plans SB HSA \$6350/0%	\$6,350	0%	NA	\$6,350	Ded&Coins/Ded&Coins/Ded&Coins/Ded&Coins		FAIL																			

Rx Plans (Copay by Tier: Generic/Preferred Brand/Non Preferred Brand/Preferred Specialty/Non Preferred Specialty)

Drug Plan	Copay Design	Formulary	Rx Tiers Where Ded. Applies Before Rx Copays
A	50%/50%/50%/50%/50%	Clinical	All
B	0%/0%/0%/0%/0%	Clinical	All
C	\$10/\$40/\$80/\$40/\$80	Custom	All
D	\$10/\$40/\$80/\$40/\$80	Custom Select	All
E	\$10/\$40/\$80/\$40/\$80	Preferred Drug List	All
F	\$15/\$30/\$60/\$30/\$60	Custom	All
G	\$15/\$50/50% Min \$70 Max \$100/\$50/50% Min \$70 Max \$100	Custom	All
H	\$15/\$50/50% Min \$70 Max \$100/\$50/50% Min \$70 Max \$100	Custom Select	All
I	\$15/\$50/50% Min \$70 Max \$100/\$50/50% Min \$70 Max \$100	Preferred Drug List	All
J	\$20/\$60/50% Min \$80 Max \$100/\$60/50% Min \$80 Max \$100	Custom	All
K	\$20/\$60/50% Min \$80 Max \$100/\$60/50% Min \$80 Max \$100	Custom Select	All
L	\$20/\$60/50% Min \$80 Max \$100/\$60/50% Min \$80 Max \$100	Preferred Drug List	All
M	\$10/\$40/\$80/15% Min \$0 Max \$150/25% Min \$0 Max \$300	Custom	All
N	\$10/\$40/\$80/15% Min \$0 Max \$150/25% Min \$0 Max \$300	Custom Select	All
O	\$10/\$40/\$80/15% Min \$0 Max \$150/25% Min \$0 Max \$300	Preferred Drug List	All
P	\$15/\$50/50% Min \$70 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$300	Custom	All
Q	\$15/\$50/50% Min \$70 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$300	Custom Select	All
R	\$15/\$50/50% Min \$70 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$300	Preferred Drug List	All
S	\$20/\$60/50% Min \$80 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$300	Custom	All
T	\$20/\$60/50% Min \$80 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$300	Custom Select	All
U	\$20/\$60/50% Min \$80 Max \$100/20% Min \$0 Max \$200/25% Min \$0 Max \$300	Preferred Drug List	All

NOTE: This page tests HSA plans assuming *Medicare is Primary*. This is less common, but might come into play when considering HSA plans for groups that have less than 20 employees.

Exhibit 5A
Blue Cross Blue Shield of Michigan
Creditable Coverage for Rx Plans
Testing Summary for Calendar Year 2025
Community Blue (CB), CB HRA, Simply Blue (PPO, HRA, HSA, and Routine Care) (SB)
Plan Primary

BCBSM Small Group Menu Plans									
Product Family	Plan	Ded.	Coins.	ECM	OOPM	Contribution	Copay Strings (OV/SPEC/UC/ER)	Rx	Pass/Fail
Community Blue	2025 Community Blue PPO Platinum Option 1	\$0	20%	\$3,000	\$9,100	\$0	\$30/\$40/\$60/\$250	\$10/\$50/\$100	PASS
	2025 Community Blue PPO Platinum Option 2	\$250	20%	\$4,000	\$9,100	\$0	\$20/\$30/\$60/\$150	\$5/\$40/\$100	PASS
	2025 Community Blue PPO Platinum Option 3	\$500	20%	\$2,000	\$8,700	\$0	\$20/\$30/\$60/\$150	\$10/\$40/\$100	PASS
	2025 Community Blue PPO Platinum Option 4	\$1,000	10%	\$3,000	\$7,350	\$0	\$10/\$20/\$60/\$150	\$10/\$40/\$100	PASS
	2025 Community Blue PPO Gold	\$1,500	30%	\$6,000	\$9,200	\$0	\$30/\$50/\$60/\$250	\$15/\$30/\$60	PASS
Community Blue HRA	2025 Community Blue HRA PPO Platinum	\$1,500	20%	\$4,000	\$6,350	\$300	\$20/\$20/\$60/\$150	\$5/\$40/\$80	PASS
	2025 Community Blue HRA PPO Gold	\$5,500	30%	N/A	\$8,700	\$0	\$40/\$40/\$60/\$250	\$15/\$30/\$60	PASS
Simply Blue	2025 Simply Blue PPO Platinum	\$250	20%	\$1,000	\$6,600	\$0	\$20/\$40/\$60/\$150	\$10/\$40/\$80/15%-150/25%-300	PASS
	2025 Simply Blue PPO Gold Option 1	\$500	30%	\$5,000	\$8,150	\$0	\$30/\$50/\$60/\$250	\$20/\$60/\$100/20%-\$200/25%-\$300	PASS
	2025 Simply Blue PPO Gold Option 2	\$1,000	20%	\$5,000	\$8,150	\$0	\$30/\$50/\$60/\$250	\$20/\$60/\$100/20%-\$200/25%-\$300	PASS
	2025 Simply Blue PPO Gold Option 3	\$1,500	20%	\$4,000	\$8,150	\$0	\$30/\$50/\$60/\$250	\$20/\$60/\$100/20%-\$200/25%-\$300	PASS
	2025 Simply Blue PPO Gold Option 4	\$2,000	20%	N/A	\$7,350	\$0	\$30/\$50/\$60/\$150	\$20/\$60/\$100/20%-\$200/25%-\$300	PASS
	2025 Simply Blue PPO Gold Option 5	\$2,500	20%	N/A	\$7,000	\$0	\$30/\$50/\$60/\$150	\$20/\$60/\$100/20%-\$200/25%-\$300	PASS
	2025 Simply Blue PPO Gold Option 6	\$3,000	20%	N/A	\$6,600	\$0	\$30/\$50/\$60/\$150	\$20/\$60/\$100/20%-\$200/25%-\$300	PASS
	2025 Simply Blue PPO Gold Option 7	\$4,000	20%	N/A	\$6,600	\$0	\$30/\$50/\$60/\$150	\$15/\$50/\$100/20%-\$200/25%-\$300	PASS
	2025 Simply Blue PPO Silver	\$4,000	50%	N/A	\$9,200	\$0	\$40/\$70/\$70/\$350	\$25/\$75/\$175/20%-\$300/25%-\$500	PASS
Simply Blue HRA	2025 Simply Blue HRA PPO Platinum	\$5,000	30%	N/A	\$6,350	\$2,500	\$30/\$50/\$60/\$150	\$20/\$60/\$100/20%-\$200/25%-\$300	PASS
	2025 Simply Blue HRA PPO Gold Option 1	\$1,500	20%	\$4,000	\$9,100	\$50	\$30/\$50/\$60/\$150	\$20/\$60/\$100/20%-\$200/25%-\$300	PASS
	2025 Simply Blue HRA PPO Gold Option 2	\$2,000	20%	N/A	\$9,100	\$150	\$30/\$50/\$60/\$250	\$20/\$60/\$125/20%-\$200/25%-\$300	PASS
	2025 Simply Blue HRA PPO Gold Option 3	\$4,000	20%	N/A	\$9,100	\$450	\$30/\$50/\$60/\$250	\$20/\$60/\$125/20%-\$200/25%-\$300	PASS
Simply Blue HSA	2025 Simply Blue HSA PPO Platinum*	\$1,650	0%	N/A	\$1,650	\$0	Deductible	Ded	PASS
	2025 Simply Blue HSA PPO Gold Option 1*	\$1,650	20%	N/A	\$4,500	\$0	D/C	Ded.&\$20/\$60/\$100/20%-\$200/25%-\$300	PASS
	2025 Simply Blue HSA PPO Gold Option 2*	\$2,500	0%	N/A	\$4,500	\$0	D/C	Ded.&\$20/\$60/\$150/20%-\$300/25%-\$500	PASS
	2025 Simply Blue HSA PPO Gold Option 3**	\$3,300	0%	N/A	\$3,300	\$0	D/C	Ded	PASS
	2025 Simply Blue HSA PPO Silver Option 1**	\$3,300	20%	N/A	\$7,500	\$0	D/C	Ded.&\$15/\$50/\$150/20%-\$300/25%-\$500	PASS
	2025 Simply Blue HSA PPO Silver Option 2**	\$4,500	0%	N/A	\$7,000	\$0	D/C	Ded.&\$20/\$60/\$150/20%-\$300/25%-\$500	PASS
	2025 Simply Blue HSA PPO bronze**	\$7,500	0%	N/A	\$7,500	\$0	D/C	Ded	PASS
Simply Blue Routine Care	2025 Simply Blue Routine Care PPO Silver	\$3,500	30%	N/A	\$9,100	\$0	\$30 PCP & UC/Ded/Coins	\$15/ Ded.&\$50/\$100/20%-\$200/25%-\$300	PASS
	2025 Simply Blue Routine Care PPO Bronze	\$9,200	0%	N/A	\$9,200	\$0	\$40 PCP & UC/Ded/Coins	\$25/ Ded.&0%	FAIL

Exhibit 5B
Blue Cross Blue Shield of Michigan
Creditable Coverage for Rx Plans
Testing Summary for Calendar Year 2025
Simply Blue HSA (SB)
Medicare Primary

BCBSM Small Group Menu Plans									
Product Family	Plan	Ded.	Coins.	ECM	OOPM	Employer Contribution	Copay Strings (OV/SPEC/UC/ER)	Rx	Pass/Fail
Simply Blue HSA	2025 Simply Blue HSA PPO Platinum*	\$1,650	0%	N/A	\$1,650	\$0	Deductible	Ded	PASS
	2025 Simply Blue HSA PPO Gold Option 1*	\$1,650	20%	N/A	\$4,500	\$0	D/C	Ded.&\$20/\$60/\$100/20%-\$200/25%-\$300	PASS
	2025 Simply Blue HSA PPO Gold Option 2*	\$2,500	0%	N/A	\$4,500	\$0	D/C	Ded.&\$20/\$60/\$150/20%-\$300/25%-\$500	PASS
	2025 Simply Blue HSA PPO Gold Option 3**	\$3,300	0%	N/A	\$3,300	\$0	D/C	Ded	PASS
	2025 Simply Blue HSA PPO Silver Option 1**	\$3,300	20%	N/A	\$7,500	\$0	D/C	Ded.&\$15/\$50/\$150/20%-\$300/25%-\$500	PASS
	2025 Simply Blue HSA PPO Silver Option 2**	\$4,500	0%	N/A	\$7,000	\$0	D/C	Ded.&\$20/\$60/\$150/20%-\$300/25%-\$500	FAIL
	2025 Simply Blue HSA PPO bronze**	\$7,500	0%	N/A	\$7,500	\$0	D/C	Ded	FAIL

NOTE: This page tests HSA plans assuming *Medicare is Primary*. This is less common, but might come into play when considering HSA plans for groups that have less than 20 employees.

Exhibit 6
Blue Care Network, Inc.
Creditable Coverage Testing for Prescription Drug Plans
Calendar Year 2025

Plan Number	Form ID	Plan Acronym	Plan Name	Dollar or percent amount of deductible (minimum dollar, maximum dollar)										Deductible applies to tier level					
				Generic - Tier 1	Generic - Tier 2	Brand Formulary	Brand Non-Formulary	Specialty Formulary	Specialty Non-Formulary	50% max language ?	Pass or Fail	Specialty OOP Max	Plan Family	Generic - Tier 1	Generic - Tier 2	Brand Formulary	Brand Non-Formulary	Specialty Formulary	Specialty Non-Formulary
1	CF5680	PD0NSC	0\0\0\0\0\0\0 sexual dysfunction \$0	0	0	0	0	0	0	N	PASS	NA		No	No	No	No	No	No
2	CF3598	10PDC	10\10\10\10\10\10\10	10	10	10	10	10	10	N	PASS	NA		No	No	No	No	No	No
3	CF4258	PD10NS	10\10\10\10\10\10\10 with 50% language	10	10	10	10	10	10	Y	PASS	NA		No	No	No	No	No	No
4	CF2929	PD10NSC	10\10\10\10\10\10\10 with 50% language (sexual dysfunction \$10)	10	10	10	10	10	10	Y	PASS	NA		No	No	No	No	No	No
5	CF1062	1015DC	10\10\15\15\15\15\15	10	10	15	15	15	15	N	PASS	NA		No	No	No	No	No	No
6	CF6139	10153C	10\10\15\30\15\30	10	10	15	30	15	30	N	PASS	NA		No	No	No	No	No	No
7	CF3859	1020DC	10\10\10\20\20\20\20	10	10	20	20	20	20	N	PASS	NA		No	No	No	No	No	No
8	CF3900	1020PD	10\10\10\20\20\20\20	10	10	20	20	20	20	N	PASS	NA		No	No	No	No	No	No
9	CF2684	OF102C	10\10\10\20\20\20\20	10	10	20	20	20	20	N	PASS	NA		No	No	No	No	No	No
10	CF7089	PD1020	10\10\10\20\20\20\20 with 50% language	10	10	20	20	20	20	Y	PASS	NA		No	No	No	No	No	No
11	CF7067	PD102C	10\10\10\20\20\20\20 with 50% language	10	10	20	20	20	20	Y	PASS	NA		No	No	No	No	No	No
12	CF7920	10203C	10\10\10\20\30\10\30	10	10	20	30	20	30	N	PASS	NA		No	No	No	No	No	No
13	CF12969	10235C	10\10\10\20\35\10\35	10	10	20	35	20	35	N	PASS	NA		No	No	No	No	No	No
14	CF4155	P10204	10\10\10\20\40\10\40	10	10	20	40	20	40	N	PASS	NA		No	No	No	No	No	No
15	CF4162	P1024C	10\10\10\20\40\10\40	10	10	20	40	20	40	N	PASS	NA		No	No	No	No	No	No
16	CF3677	102040	10\10\10\20\40\10\40 with 50% language	10	10	20	40	20	40	Y	PASS	NA		No	No	No	No	No	No
17	CF3672	10204C	10\10\10\20\40\10\40 with 50% language	10	10	20	40	20	40	Y	PASS	NA		No	No	No	No	No	No
18	CF10960	10205C	10\10\10\20\50\10\50	10	10	20	50	20	50	N	PASS	NA		No	No	No	No	No	No
19	CF15160	1020%C	10\10\10\20\50%(50,75)\20\50%(50,75)	10	10	20	50%(50,75)	20	50%(50,75)	N	PASS	NA		No	No	No	No	No	No
20	CF11624	1024%	10\10\10\20%(20,70)\40%(40,90)\20%(20,70)\40%(40,90)	10	10	20%(20,70)	40%(40,90)	20%(20,70)	40%(40,90)	N	PASS	NA		No	No	No	No	No	No
21	CF11625	1024%C	10\10\10\20%(20,70)\40%(40,90)\20%(20,70)\40%(40,90)	10	10	20%(20,70)	40%(40,90)	20%(20,70)	40%(40,90)	N	PASS	NA		No	No	No	No	No	No
22	CF13568	P102%C	10\10\10\20%(30,80)\40%(60,100)\20%(30,80)\40%(60,100)	10	10	20%(30,80)	40%(60,100)	20%(30,80)	40%(60,100)	N	PASS	NA		No	No	No	No	No	No
23	CF10401	1025PC	10\10\10\25\25\125\125	10	10	25	25	25	25	N	PASS	NA		No	No	No	No	No	No
24	CF10400	1025PD	10\10\10\25\25\125\125	10	10	25	25	25	25	N	PASS	NA		No	No	No	No	No	No
25	CF10463	10254C	10\10\10\25\40\125\40 with 50% language	10	10	25	40	25	40	Y	PASS	NA		No	No	No	No	No	No
26	CF0569	10255C	10\10\10\25\50\125\50	10	10	25	50	25	50	N	PASS	NA		No	No	No	No	No	No
27	CF15161	1025%C	10\10\10\25\50%(50,75)\125\50%(50,75)	10	10	25	50%(50,75)	25	50%(50,75)	N	PASS	NA		No	No	No	No	No	No
28	CF0578	1030DC	10\10\10\30\30\130\130	10	10	30	30	30	30	N	PASS	NA		No	No	No	No	No	No
29	CF16140	1350SP	10\10\10\30\50\100\1200	10	10	30	50	100	200	N	PASS	NA		No	No	No	No	No	No
30	CF12070	10305C	10\10\10\30\50\130\150	10	10	30	50	30	50	N	PASS	NA		No	No	No	No	No	No
31	CF14050	1036SP	10\10\10\30\60\100\100	10	10	30	60	100	100	N	PASS	NA		No	No	No	No	No	No
32	CF16080	1306SP	10\10\10\30\60\100\100\1200	10	10	30	60	100	200	N	PASS	NA		No	No	No	No	No	No
33	CF13497	1030CS	10\10\10\30\60\120%(0,100)\20%(0,100)	10	10	30	60	20%(0,100)	20%(0,100)	N	PASS	NA		No	No	No	No	No	No
34	CF14824	1030SP	10\10\10\30\60\120%(0,100)\20%(0,200)	10	10	30	60	20%(0,100)	20%(0,200)	N	PASS	NA		No	No	No	No	No	No
35	CF10619	10306C	10\10\10\30\60\130\160	10	10	30	60	30	60	N	PASS	NA		No	No	No	No	No	No
36	CF15357	1367SP	10\10\10\30\60\175\175	10	10	30	60	75	75	N	PASS	NA		No	No	No	No	No	No
37	CF11608	10308C	10\10\10\30\80\130\180	10	10	30	80	30	80	N	PASS	NA		No	No	No	No	No	No
38	CF12755	10355C	10\10\10\35\50\135\150	10	10	35	50	35	50	N	PASS	NA		No	No	No	No	No	No
39	CF15598	10357C	10\10\10\35\70\135\170	10	10	35	70	35	70	N	PASS	NA		No	No	No	No	No	No
40	CF2809	1040C	10\10\10\40\40\140\40 with 50% language	10	10	40	40	40	40	Y	PASS	NA		No	No	No	No	No	No
41	CF3908	1040DC	10\10\10\40\40\140\40	10	10	40	40	40	40	N	PASS	NA		No	No	No	No	No	No
42	CF3930	1040PD	10\10\10\40\40\140\40	10	10	40	40	40	40	N	PASS	NA		No	No	No	No	No	No
43	CF1347	OF104C	10\10\10\40\40\140\40	10	10	40	40	40	40	N	PASS	NA		No	No	No	No	No	No
44	CF14051	1048SP	10\10\10\40\80\100\100	10	10	40	80	100	100	N	PASS	NA		No	No	No	No	No	No
45	CF11957	1040CS	10\10\10\40\80\120%(0,100)\20%(0,200)	10	10	40	80	20%(0,100)	20%(0,200)	N	PASS	NA		No	No	No	No	No	No
46	CF11464	104080	10\10\10\40\80\140\180	10	10	40	80	40	80	N	PASS	NA		No	No	No	No	No	No
47	CF11465	10408C	10\10\10\40\80\140\180	10	10	40	80	40	80	N	PASS	NA		No	No	No	No	No	No
48	CF11368	1050C	10\10\10\50\150\150\150	10	10	50	50	50	50	N	PASS	NA		No	No	No	No	No	No
49	CF15196	10507C	10\10\10\50\175\150\175	10	10	50	75	50	75	N	PASS	NA		No	No	No	No	No	No
50	CF16189	P136CS	10\30\160\80\120%(0,200)\20%(0,200)	10	30	60	80	20%(0,200)	20%(0,200)	N	PASS	NA		No	No	No	No	No	No
51	CF14730	P1036	10\30\160\80\120%(0,200)\20%(0,300)	10	30	60	80	20%(0,200)	20%(0,300)	N	Refer to Exhibit 7	NA		No	No	Yes	Yes	Yes	Yes
52	CF14818	P103CL	10\30\160\80\120%(0,200)\20%(0,300)	10	30	60	80	20%(0,200)	20%(0,300)	N	PASS	NA		No	No	No	No	No	No
53	CF14704	P103CS	10\30\160\80\120%(0,200)\20%(0,300)	10	30	60	80	20%(0,200)	20%(0,300)	N	PASS	NA		No	No	No	No	No	No
54	CF12764	11338C	11\11\133\88\133\88	11	11	33	88	33	88	N	PASS	NA		No	No	No	No	No	No
55	CF13675	11359C	11\11\135\90\135\90	11	11	35	90	35	90	N	PASS	NA		No	No	No	No	No	No
56	CF14176	12401C	12\12\140\100\140\100	12	12	40	100	40	100	N	PASS	NA		No	No	No	No	No	No
57	CF13514	1245MC	12\12\145\90\145\90 with mail order	12	12	45	90	45	90	N	PASS	NA		No	No	No	No	No	No
58	CF4010	1525DC	15\15\125\125\125\125	15	15	25	25	25	25	N	PASS	NA		No	No	No	No	No	No
59	CF3663	1530C	15\15\130\30\130\30 with 50% language	15	15	30	30	30	30	Y	PASS	NA		No	No	No	No	No	No
60	CF4067	1530DC	15\15\130\30\130\30	15	15	30	30	30	30	N	PASS	NA		No	No	No	No	No	No
61	CF10636	OF153C	15\15\130\30\130\30	15	15	30	30	30	30	N	PASS	NA		No	No	No	No	No	No
62	CF10695	15305C	15\15\130\50\130\50 with 50% language	15	15	30	50	30	50	Y	PASS	NA		No	No	No	No	No	No
63	CF16728	1530SP	15\15\130\50%\60\170	15	15	30	50%	60	70	N	PASS	NA		No	No	No	No	No	No
64	CF14183	1536SP	15\15\130\60\100\100	15	15	30	60	100	100	N	PASS	NA		No	No	No	No	No	No
65	CF3659	15306C	15\15\130\60\130\60 with 50% language	15	15	30	60	30	60	Y	PASS	NA		No	No	No	No	No	No
66	CF4178	P1536C	15\15\130\60\130\60	15	15	30	60	30	60	N	PASS	NA		No	No	No	No	No	No
67	CF0382	1535DC	15\15\135\135\135\135	15	15	35	35	35	35	N	PASS	NA		No	No	No	No	No	No
68	CF15380	1535SP	15\15\135\60\185\185	15	15	35	60	85	85	N	PASS	NA		No	No	No	No	No	No
69	CF1335	1540%C	15\15\140%(40,100)\140%(40,100)\140%(40,100)	15	15	40%(40,100)	40%(40,100)	40%(40,100)	40%(40,100)	N	PASS	NA		No	No	No	No	No	No
70	CF1339	15500%	15\15\150\50%(70,100)\150\50%(70,100)	15	15	50	50%(70,100)	50	50%(70,100)	N	PASS	NA		No	No	No	No	No	No
71	CF2804	1550C	15\15\150\50\150\150	15	15	50	50	50	50	N	PASS	NA		No	No	No	No	No	No

Exhibit 6
Blue Care Network, Inc.
Creditable Coverage Testing for Prescription Drug Plans
Calendar Year 2025

Plan Number	Form ID	Plan Acronym	Plan Name	Dollar or percent amount of deductible (minimum dollar, maximum dollar)										Deductible applies to tier level					
				Generic - Tier 1	Generic - Tier 2	Brand Formulary	Brand Non-Formulary	Specialty Formulary	Specialty Non-Formulary	50% max language ?	Pass or Fail	Specialty OOP Max	Plan Family	Generic - Tier 1	Generic - Tier 2	Brand Formulary	Brand Non-Formulary	Specialty Formulary	Specialty Non Formulary
72	CF4092	1550DC	15 \ 15 \ 50 \ 50 \ 50 \ 50	15	15	50	50	50	50	N	PASS	NA		No	No	No	No	No	No
73	CF4096	1550PD	15 \ 15 \ 50 \ 50 \ 50 \ 50	15	15	50	50	50	50	N	PASS	NA		No	No	No	No	No	No
74	CF0379	OF155C	15 \ 15 \ 50 \ 50 \ 50 \ 50	15	15	50	50	50	50	N	PASS	NA		No	No	No	No	No	No
75	CF1338	1555%C	15 \ 15 \ 50 \ 50%(70,100) \ 50 \ 50%(70,100)	15	15	50	50%(70,100)	50	50%(70,100)	N	PASS	NA		No	No	No	No	No	No
76	CF11958	15508S	15 \ 15 \ 50 \ 80 \ 20%(0,150) \ 20%(0,300)	15	15	50	80	20%(0,150)	20%(0,300)	N	PASS	NA		No	No	No	No	No	No
77	CF11959	1550CS	15 \ 15 \ 50 \ 80 \ 20%(0,150) \ 20%(0,300) Specialty drug Coinsurance Maximum of \$3600	15	15	50	80	20%(0,150)	20%(0,300)	N	PASS	NA		No	No	No	No	No	No
78	CF12455	15508C	15 \ 15 \ 50 \ 80 \ 50 \ 80	15	15	50	80	50	80	N	PASS	NA		No	No	No	No	No	No
79	CF10737	15556C	15 \ 15 \ 55 \ 65 \ 55 \ 65 with 50% language	15	15	55	65	55	65	Y	PASS	NA		No	No	No	No	No	No
80	CF3325	PD2NS	2 \ 2 \ 2 \ 2 \ 2 \ 2	2	2	2	2	2	2	N	PASS	NA		No	No	No	No	No	No
81	CF4590	PD2NSC	2 \ 2 \ 2 \ 2 \ 2 \ 2 sexual dysfunction \$2	2	2	2	2	2	2	N	PASS	NA		No	No	No	No	No	No
82	CF10791	20405C	20 \ 20 \ 40 \ 50 \ 40 \ 50	20	20	40	50	40	50	N	PASS	NA		No	No	No	No	No	No
83	CF10739	20406C	20 \ 20 \ 40 \ 60 \ 40 \ 60	20	20	40	60	40	60	N	PASS	NA		No	No	No	No	No	No
84	CF14052	2048SP	20 \ 20 \ 40 \ 80 \ 20%(120,240) \ 20%(120,240)	20	20	40	80	20%(120,240)	20%(120,240)	N	PASS	NA		No	No	No	No	No	No
85	CF15381	2045SP	20 \ 20 \ 45 \ 85 \ 100 \ 100	20	20	45	85	100	100	N	PASS	NA		No	No	No	No	No	No
86	CF1342	20605%	20 \ 20 \ 60 \ 50%(80,100) \ 60 \ 50%(80,100)	20	20	60	50%(80,100)	60	50%(80,100)	N	PASS	NA		No	No	No	No	No	No
87	CF13567	265%CS	20 \ 20 \ 60 \ 50%(80,100) \ 50%(160,200) \ 50%(160,200)	20	20	60	50%(80,100)	50%(160,200)	50%(160,200)	N	PASS	NA		No	No	No	No	No	No
88	CF1343	2065%C	20 \ 20 \ 60 \ 50%(80,100) \ 60 \ 50%(80,100)	20	20	60	50%(80,100)	60	50%(80,100)	N	PASS	NA		No	No	No	No	No	No
89	CF10502	2060P	20 \ 20 \ 60 \ 60 \ 60 \ 60	20	20	60	60	60	60	N	PASS	NA		No	No	No	No	No	No
90	CF10503	2060PC	20 \ 20 \ 60 \ 60 \ 60 \ 60	20	20	60	60	60	60	N	PASS	NA		No	No	No	No	No	No
91	CF11961	2060CS	20 \ 20 \ 60 \ 80 \ 20%(0,200) \ 20%(0,400)	20	20	60	80	20%(0,200)	20%(0,400)	N	PASS	NA		No	No	No	No	No	No
92	CF15382	2068CS	20 \ 20 \ 60 \ 80 \ 20%(0,450) \ 20%(0,600)	20	20	60	80	20%(0,450)	20%(0,600)	N	PASS	NA		No	No	No	No	No	No
93	CF16839	2075CS	20 \ 20 \ 75 \ 100 \ 20%(0,200) \ 20%(0,400)	20	20	75	100	20%(0,200)	20%(0,400)	N	PASS	NA		No	No	No	No	No	No
94	CF0630	P20%MC	20%(10,20) \ 20%(10,20) \ 20%(18,36) \ 20%(40,80) \ 20%(18,36) \ 20%(40,80) Sexual	20%(10,20)	20%(10,20)	20%(18,36)	20%(40,80)	20%(18,36)	20%(40,80)	N	PASS	NA		No	No	No	No	No	No
95	CF7072	PD20%C	20%(5,100) \ 20%(5,100) \ 20%(5,100) \ 20%(5,100) \ 20%(5,100) \ 20%(5,100)	20%(5,100)	20%(5,100)	20%(5,100)	20%(5,100)	20%(5,100)	20%(5,100)	N	PASS	NA		No	No	No	No	No	No
96	CF0468	25304C	25%(0,50) \ 25%(0,50) \ 30%(0,100) \ 45%(0,150) \ 30%(0,100) \ 45%(0,150) sexual dysfunction	25%(0,50)	25%(0,50)	30%(0,100)	45%(0,150)	30%(0,100)	45%(0,150)	N	PASS	NA		No	No	No	No	No	No
97	CF4533	31225C	3 \ 3 \ 12 \ 25 \ 12 \ 25	3	3	12	25	12	25	N	PASS	NA		No	No	No	No	No	No
98	CF3965	PD3NS	3 \ 3 \ 3 \ 3 \ 3 \ 3 sexual dysfunction \$3	3	3	3	3	3	3	N	PASS	NA		No	No	No	No	No	No
99	CF3967	PD3NSC	3 \ 3 \ 3 \ 3 \ 3 \ 3 sexual dysfunction \$3	3	3	3	3	3	3	N	PASS	NA		No	No	No	No	No	No
100	CF3664	PD30%C	30%(5,100) \ 30%(5,100) \ 30%(5,100) \ 30%(5,100) \ 30%(5,100) \ 30%(5,100)	30%(5,100)	30%(5,100)	30%(5,100)	30%(5,100)	30%(5,100)	30%(5,100)	N	PASS	NA		No	No	No	No	No	No
101	CF13088	P415CL	4 \ 15 \ 40 \ 80 \ 20%(0,200) \ 20%(0,300)	4	15	40	80	20%(0,200)	20%(0,300)	N	PASS	NA		No	No	No	No	No	No
102	CF13171	P415CS	4 \ 15 \ 40 \ 80 \ 20%(0,200) \ 20%(0,300)	4	15	40	80	20%(0,200)	20%(0,300)	N	PASS	NA		No	No	No	No	No	No
103	CF11963	440CS	4 \ 4 \ 40 \ 75% \ 20%(0,200) \ 20%(0,300) Specialty Drug Annual Coinsurance Maximum of \$3,000 per	4	4	40	75%	20%(0,200)	20%(0,300)	N	PASS	NA		No	No	No	No	No	No
104	CF4107	510PDC	5 \ 5 \ 10 \ 10 \ 10 \ 10	5	5	10	10	10	10	N	PASS	NA		No	No	No	No	No	No
105	CF3437	OF510	5 \ 5 \ 10 \ 10 \ 10 \ 10 with 50% language; Sexual dysfunction drugs at applicable tiered copay	5	5	10	10	10	10	Y	PASS	NA		No	No	No	No	No	No
106	CF3436	OF510C	5 \ 5 \ 10 \ 10 \ 10 \ 10 with 50% language	5	5	10	10	10	10	Y	PASS	NA		No	No	No	No	No	No
107	CF7062	PD510	5 \ 5 \ 10 \ 10 \ 10 \ 10 with 50% language	5	5	10	10	10	10	Y	PASS	NA		No	No	No	No	No	No
108	CF7063	PD510C	5 \ 5 \ 10 \ 10 \ 10 \ 10 with 50% language	5	5	10	10	10	10	Y	PASS	NA		No	No	No	No	No	No
109	CF10536	P5102C	5 \ 5 \ 10 \ 20 \ 10 \ 20	5	5	10	20	10	20	N	PASS	NA		No	No	No	No	No	No
110	CF10214	P512MC	5 \ 5 \ 10 \ 20 \ 10 \ 20 with mail order	5	5	10	20	10	20	N	PASS	NA		No	No	No	No	No	No
111	CF0403	51030	5 \ 5 \ 10 \ 30 \ 10 \ 30 with 50% language	5	5	10	30	10	30	Y	PASS	NA		No	No	No	No	No	No
112	CF10740	516DMC	5 \ 5 \ 11 \ 11 \ 11 \ 11 \$16 Sexual Dysfunction (includes mail order)	5	5	11	11	11	11	N	PASS	NA		No	No	No	No	No	No
113	CF12752	512SDC	5 \ 5 \ 12 \ 12 \ 12 \ 12 \$18 Sexual Dysfunction	5	5	12	12	12	12	N	PASS	NA		No	No	No	No	No	No
114	CF10487	51225C	5 \ 5 \ 12 \ 25 \ 12 \ 25	5	5	12	25	12	25	N	PASS	NA		No	No	No	No	No	No
115	CF4115	515PDC	5 \ 5 \ 15 \ 15 \ 15 \ 15	5	5	15	15	15	15	N	PASS	NA		No	No	No	No	No	No
116	CF0416	OF515	5 \ 5 \ 15 \ 15 \ 15 \ 15	5	5	15	15	15	15	N	PASS	NA		No	No	No	No	No	No
117	CF0417	OF515C	5 \ 5 \ 15 \ 15 \ 15 \ 15	5	5	15	15	15	15	N	PASS	NA		No	No	No	No	No	No
118	CF7064	PD515C	5 \ 5 \ 15 \ 15 \ 15 \ 15 with 50% language	5	5	15	15	15	15	Y	PASS	NA		No	No	No	No	No	No
119	CF7073	51525C	5 \ 5 \ 15 \ 25 \ 15 \ 25 with 50% language	5	5	15	25	15	25	Y	PASS	NA		No	No	No	No	No	No
120	CF4250	P5152C	5 \ 5 \ 15 \ 25 \ 15 \ 25	5	5	15	25	15	25	N	PASS	NA		No	No	No	No	No	No
121	CF0132	PD520	5 \ 5 \ 20 \ 20 \ 20 \ 20	5	5	20	20	20	20	N	PASS	NA		No	No	No	No	No	No
122	CF0134	PD520C	5 \ 5 \ 20 \ 20 \ 20 \ 20	5	5	20	20	20	20	N	PASS	NA		No	No	No	No	No	No
123	CF0581	52030C	5 \ 5 \ 20 \ 30 \ 20 \ 30	5	5	20	30	20	30	N	PASS	NA		No	No	No	No	No	No
124	CF13082	52045C	5 \ 5 \ 20 \ 45 \ 20 \ 45	5	5	20	45	20	45	N	PASS	NA		No	No	No	No	No	No
125	CF16931	5254C	5 \ 5 \ 25 \ 40 \ 25 \ 40	5	5	25	40	25	40	N	PASS	NA		No	No	No	No	No	No
126	CF12030	52550C	5 \ 5 \ 25 \ 50 \ 25 \ 50	5	5	25	50	25	50	N	PASS	NA		No	No	No	No	No	No
127	CF15358	5257SP	5 \ 5 \ 25 \ 50 \ 75 \ 75	5	5	25	50	75	75	N	PASS	NA		No	No	No	No	No	No
128	CF7369	530CMO	5 \ 5 \ 30 \ 30 \ 30 \ 30 with mail order (\$30/\$30)	5	5	30	30	30	30	N	PASS	NA		No	No	No	No	No	No
129	CF12269	530MC	5 \ 5 \ 30 \ 30 \ 30 \ 30 with mail order (\$10/\$75)	5	5	30	30	30	30	N	PASS	NA		No	No	No	No	No	No
130	CF4126	530PD	5 \ 5 \ 30 \ 30 \ 30 \ 30	5	5	30	30	30	30	N	PASS	NA		No	No	No	No	No	No
131	CF4154	530PDC	5 \ 5 \ 30 \ 30 \ 30 \ 30	5	5	30	30	30	30	N	PASS	NA		No	No	No	No	No	No
132	CF2807	PD530C	5 \ 5 \ 30 \ 30 \ 30 \ 30 with 50% language	5	5	30	30	30	30	Y	PASS	NA		No	No	No	No	No	No
133	CF3653	53060	5 \ 5 \ 30 \ 60 \ 30 \ 60 with 50% language	5	5	30	60	30	60	Y	PASS	NA		No	No	No	No	No	No
134	CF3652	53060C	5 \ 5 \ 30 \ 60 \ 30 \ 60 with 50% language	5	5	30	60	30	60	Y	PASS	NA		No	No	No	No	No	No
135	CF4380	PD535	5 \ 5 \ 35 \ 35 \ 35 \ 35	5	5	35	35	35	35	N	PASS	NA		No	No	No	No	No	No
136	CF4431	PD540C	5 \ 5 \ 40 \ 40 \ 40 \ 40	5	5	40	40	40	40	N	PASS	NA		No	No	No	No	No	No
137	CF4259	PD5NS	5 \ 5 \ 5 \ 5 \ 5 \ 5 sexual dysfunction \$5	5	5	5	5	5	5	N	PASS	NA		No	No	No	No	No	No
138	CF3964	PD5NSC	5 \ 5 \ 5 \ 5 \ 5 \ 5 sexual dysfunction \$5	5	5	5	5	5	5	N	PASS	NA		No	No	No	No	No	No
139	CF4476	PD550	5 \ 5 \ 50 \ 50 \ 50 \ 50	5	5	50	50	50	50	N	PASS	NA		No	No	No	No	No	No
140	CF4490	PD550C	5 \ 5 \ 50 \ 50 \ 50 \ 50	5	5	50	50	50	50	N	PASS	NA		No	No	No	No	No	No

Exhibit 6
Blue Care Network, Inc.
Creditable Coverage Testing for Prescription Drug Plans
Calendar Year 2025

Plan Number	Form ID	Plan Acronym	Plan Name	Dollar or percent amount of deductible (minimum dollar, maximum dollar)										Deductible applies to tier level					
				Generic - Tier 1	Generic - Tier 2	Brand Formulary	Brand Non-Formulary	Specialty Formulary	Specialty Non-Formulary	50% max language ?	Pass or Fail	Specialty OOP Max	Plan Family	Generic - Tier 1	Generic - Tier 2	Brand Formulary	Brand Non-Formulary	Specialty Formulary	Specialty Non-Formulary
141	CF3434	PD50%	50%(5,100) \ 50%(5,100) \ 50%(5,100) \ 50%(5,100) \ 50%(5,100) \ 50%(5,100)	50%(5,100)	50%(5,100)	50%(5,100)	50%(5,100)	50%(5,100)	50%(5,100)	N	PASS	NA		No	No	No	No	No	No
142	CF3435	PD50%C	50%(5,100) \ 50%(5,100) \ 50%(5,100) \ 50%(5,100) \ 50%(5,100) \ 50%(5,100)	50%(5,100)	50%(5,100)	50%(5,100)	50%(5,100)	50%(5,100)	50%(5,100)	N	PASS	NA		No	No	No	No	No	No
143	CF0112	50%PC5	50%(5,50) \ 50%(5,50) \ 50%(5,50) \ 50%(5,50) \ 50%(5,50) \ 50%(5,50)	50%(5,50)	50%(5,50)	50%(5,50)	50%(5,50)	50%(5,50)	50%(5,50)	N	PASS	NA		No	No	No	No	No	No
144	CF13089	P625CL	6 \ 25 \ 50 \ 80 \ 20%(0,200) \ 20%(0,300)	6	25	50	80	20%(0,200)	20%(0,300)	N	PASS	NA		No	No	No	No	No	No
145	CF13172	P625CS	6 \ 25 \ 50 \ 80 \ 20%(0,200) \ 20%(0,300)	6	25	50	80	20%(0,200)	20%(0,300)	N	PASS	NA		No	No	No	No	No	No
146	CF13090	P640CL	6 \ 40 \ 60 \ 80 \ 20%(0,200) \ 20%(0,300)	6	40	60	80	20%(0,200)	20%(0,300)	N	PASS	NA		No	No	No	No	No	No
147	CF13678	P640CS	6 \ 40 \ 60 \ 80 \ 20%(0,200) \ 20%(0,300)	6	40	60	80	20%(0,200)	20%(0,300)	N	PASS	NA		No	No	No	No	No	No
148	CF10796	OFM61C	6 \ 6 \ 11 \ 11 \ 11 \ 11 \$17 sexual dysfunction	6	6	11	11	11	11	N	PASS	NA		No	No	No	No	No	No
149	CF11359	627DMC	6 \ 6 \ 12 \ 12 \ 12 \ 12 \$17 Sexual Dysfunction; includes mail order	6	6	12	12	12	12	N	PASS	NA		No	No	No	No	No	No
150	CF11454	OM612C	6 \ 6 \ 12 \ 12 \ 12 \ 12 \$17 sexual dysfunction; includes mail order	6	6	12	12	12	12	N	PASS	NA		No	No	No	No	No	No
151	CF4495	OF715C	7 \ 7 \ 15 \ 15 \ 15 \ 15 with 50% language	7	7	15	15	15	15	Y	PASS	NA		No	No	No	No	No	No
152	CF0184	PD715C	7 \ 7 \ 15 \ 15 \ 15 \ 15 with 50% language	7	7	15	15	15	15	Y	PASS	NA		No	No	No	No	No	No
153	CF0372	71530C	7 \ 7 \ 15 \ 30 \ 15 \ 30	7	7	15	30	15	30	N	PASS	NA		No	No	No	No	No	No
154	CF10559	P7153C	7 \ 7 \ 15 \ 30 \ 15 \ 30 with 50% language	7	7	15	30	15	30	Y	PASS	NA		No	No	No	No	No	No
155	CF0622	72035C	7 \ 7 \ 20 \ 35 \ 20 \ 35	7	7	20	35	20	35	N	PASS	NA		No	No	No	No	No	No
156	CF16932	7255C	7 \ 7 \ 25 \ 50 \ 25 \ 50	7	7	25	50	25	50	N	PASS	NA		No	No	No	No	No	No
157	CF12846	740CS	7 \ 7 \ 40 \ 90 \ 15%(0,200) \ 25%(0,300)	7	7	40	90	15%(0,200)	25%(0,300)	N	PASS	NA		No	No	No	No	No	No
158	CF11069	P745C	7 \ 7 \ 45 \ 45 \ 45 \ 45	7	7	45	45	45	45	N	PASS	NA		No	No	No	No	No	No
159	CF6107	PD7NSC	7 \ 7 \ 7 \ 7 \ 7 \ 7 with 50% language \$7 sexual dysfunction drugs	7	7	7	7	7	7	Y	PASS	NA		No	No	No	No	No	No
160	CF11356	82540C	8 \ 8 \ 25 \ 40 \ 25 \ 40	8	8	25	40	25	40	N	PASS	NA		No	No	No	No	No	No
161	CF14819	P1036C	Routine Care 1500-30-\$150 OV40 UC60; 10 \ 30 \ 60 \ 80 \ 20%(0,200) \ 20%(0,300)	10	30	60	80	20%(0,200)	20%(0,300)	N	Refer to Exhibit 7	NA		No	No	Yes	Yes	Yes	Yes
162	CF13917	P6256C	Routine Care 3000-20-\$150 OV30 UC60; 6 \ 25 \ 60 \ 80 \ 20%(0,200) \ 20%(0,300)	6	25	60	80	20%(0,200)	20%(0,300)	N	Refer to Exhibit 7	NA		No	No	Yes	Yes	Yes	Yes
163	CF13917	P6256C	Routine Care Silver \$2500/30%/\$7900 OV30	6	25	60	80	20%(0,200)	20%(0,300)	N	PASS	NA		No	No	Yes	Yes	Yes	Yes
164	CF17117	P625D	Routine Care Bronze \$7350/0%/\$7350 OV30	6	25	Ded	Ded	Ded	Ded	N	PASS	NA		No	No	Yes	Yes	Yes	Yes
165	CF13962	P625E	Routine Care - \$3000 / 20%/\$8150 OV30 UC60 6 \ 25 \ 60 \ 80 \ 20% (0,200) \ 20% (0,300)	6	25	60	80	20%(0,200)	20%(0,300)	N	Refer to Exhibit 7	NA		No	No	Yes	Yes	Yes	Yes
166	CF17852	1480CS	\$15 \ \$40 \ \$80 \ 20%(max \$200) \ 20%(max \$300)	15	15	40	80	20%(0,200)	20%(0,300)	N	PASS	NA		No	No	No	No	No	No
167	CF17853	2558CS	\$25 \ \$50 \ \$80 \ 20%(max \$200) \ 20%(max \$300)	25	25	50	80	20%(0,200)	20%(0,300)	N	PASS	NA		No	No	No	No	No	No
168	CF17854	3068CS	\$30 \ \$60 \ \$80 \ 20%(max \$200) \ 20%(max \$300)	30	30	60	80	20%(0,200)	20%(0,300)	N	PASS	NA		No	No	No	No	No	No
169	CF17116	P154CS	15 \ 40 \ 60 \ 80 \ 20%(0,200) \ 20%(0,300)	15	40	60	80	20%(0,200)	20%(0,300)	N	PASS	NA		No	No	No	No	No	No
170	CF18165	10303C	10% (max \$40) \ 30% (max \$60) \ 30% (max \$120)	10%(0,40)	10%(0,40)	30%(0,60)	30%(0,120)	30%(0,60)	30%(0,120)	N	PASS	NA		No	No	No	No	No	No
171	CF18526	83590C	8 \ 8 \ 35 \ 50 \ 35 \ 50	8	8	35	50	35	50	N	PASS	NA		No	No	No	No	No	No
172	CF18529	54080C	5 \ 5 \ 40 \ 80 \ 40 \ 80	5	5	40	80	40	80	N	PASS	NA		No	No	No	No	No	No
173	CF19057	12555C	10 \ 10 \ 25 \ 55 \ 25 \ 55	10	10	25	55	25	55	N	PASS	NA		No	No	No	No	No	No
174	CF19257	10102C	10% (max \$50) \ 10% (max \$400) \ 20% (No Copay Max)	10%(0,50)	10%(0,50)	10%(0,400)	20% (no max)	10%(0,400)	20% (no max)	N	PASS	NA		No	No	No	No	No	No
175	CF19488	1045CS	\$10 / \$45 / \$75 / 20% / 20%	10	10	45	75	0.2	0.2	N	PASS	NA		No	No	No	No	No	No
176	CF19278	520CS	\$5 / \$20 / \$80 / \$150 / 20% / 20%	5	20	80	150	0.2	0.2	N	PASS	NA		No	No	No	No	No	No
177	CF18184	4148CS	\$4 / \$15 / \$40 / \$80 / \$200 / \$300	4	15	40	80	200	300	N	PASS	NA		No	No	No	No	No	No
178	CF18183	1368CS	\$10 / \$30 / \$60 / \$80 / \$200 / \$300	10	30	60	80	200	300	N	PASS	NA		No	No	No	No	No	No
179	CF18185	P1540	\$15 / \$40 / Deductible	15	40	Ded	Ded	Ded	Ded	N	Refer to Exhibit 7	NA		No	No	Yes	Yes	Yes	Yes
180	CF19275	1481CS	\$15 / \$40 / \$80 / \$100 / \$200 / \$300	15	40	80	100	200	300	N	PASS	NA		No	No	No	No	No	No
181	CF19277	150CS	\$15 / \$40 / \$80 / \$150 / 20% / 20%	15	40	80	150	0.2	0.2	N	PASS	NA		No	No	No	No	No	No
182	CF19280	626CS	\$6 / \$25 / \$60 / \$80 / 20% / 20%	6	25	60	80	0.2	0.2	N	PASS	NA		No	No	No	No	No	No
183	CF10800	OF125C	\$10/\$25/\$25	10	10	25	25	25	25	N	PASS	NA		No	No	No	No	No	No
184	CF17402	4408SP	\$4/\$40/\$80/\$20%/20%	4	4	40	80	0.2	0.2	N	PASS	NA		No	No	No	No	No	No
185	CF17326	OFM125	\$10/\$25/\$25 with mail order (\$20/\$35/\$35)	10	10	25	25	25	25	N	PASS	NA		No	No	No	No	No	No
186	CF17327	OFM530	\$5/\$30/\$30 with mail order (\$15/\$30/\$30)	5	5	30	30	30	30	N	PASS	NA		No	No	No	No	No	No
187	CF17642	1548CS	\$15 / \$40 / \$80 / \$100 / 20% / 20%	15	40	80	100	0.2	0.2	N	PASS	NA		No	No	No	No	No	No
188	CF19941	5204C	\$5/\$20/\$40	5	5	20	40	20	40	N	PASS	NA		No	No	No	No	No	No
189	CF20081	1575SP	\$15/75%/75%/75%/75%	15	15	0.75	0.75	0.75	0.75	N	FAIL	NA		No	No	No	No	No	No

Exhibit 7A
Testing Summary for Calendar Year 2025
Blue Cross Blue Shield of Michigan -- Large Group
BCN Large Group Plans
Plan Primary

[illegible]

	BCN65 (Available with all Plan Offerings)							A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA	AB	AC	AD	AE	AF	AG	
BCN65 (1) - Optional \$10 copay virtual visit rider available	BCN65 Medicare Complementary		\$0	\$0	\$0	N/A	\$25/\$25/\$50/\$250	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	N/A	N/A	N/A	N/A

Rx Plans (Copay by Tier: Preferred Generic/Non Preferred Generic/Preferred Brand/Non Preferred Brand/Preferred Specialty/Non Preferred Specialty OR Generic/Preferred Brand/Non Preferred Brand/Preferred Specialty/Non Preferred Specialty)

[illegible]

*Rx plans G-L apply the deductible to non-generic tiers for Routine Care plans.

Product Family	Plan	Ded	Coins	ECM	OOP Max	OV/SPEC/UC/ER	Rx	Pass or Fail
BCN Minimum Value (3) - Custom Drug list only. (Plans available with PCP Focus). Optional \$10 copay/0%coinsurance virtual visit rider available except for HSA \$6350	BCN HMO \$1500/20%	\$1,500	20%	N/A	\$5,000	\$30/\$45/\$50/\$250	Limited Rx Benefits	FAIL
	BCN HSA \$4000/50%	\$4,000	50%	N/A	\$6,350	Deductible/coinsurance	50% Coinsurance for large groups - all Tiers - Integrated Deductible	PASS
	BCN HSA \$6350/0%	\$6,350	0%	N/A	\$6,350	Deductible	0% coinsurance for large groups - All Tiers covered in full after deductible - Integrated Deductible	PASS

Exhibit 7B
Testing Summary for Calendar Year 2025
Blue Cross Blue Shield of Michigan – Large Group
BCN Large Group Plans
Medicare Primary

1/1/2025 BCN Large Group																																												
Product Family	Plan	Ded	Coins	ECM	OOP Max	OV/SPEC/UC/ER																																						
							A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA	AB	AC	AD	AE	AF	AG					
BCN HSA (All plans available with PCP Focus) (12) - Optional riders: - 0% coinsurance virtual visit rider available for plans with a coinsurance - IRS expanded preventive services (deductible waiver)	BCN HSA HMO \$1650/0%*	\$1,650	0%	N/A	\$4,000	Deductible	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	N/A	N/A	
	BCN HSA HMO \$1650/10%*	\$1,650	10%	N/A	\$4,000	Deductible/coinsurance	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	N/A	N/A			
	BCN HSA HMO \$1650/20%*	\$1,650	20%	N/A	\$4,000	Deductible/coinsurance	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	PASS	N/A			
	BCN HSA HMO \$2000/0%*	\$2,000	0%	N/A	\$4,000	Deductible	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	N/A	N/A			
	BCN HSA HMO \$2,000/10%*	\$2,000	10%	N/A	\$4,000	Deductible/coinsurance	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	N/A	N/A			
	BCN HSA HMO \$2000/20%*	\$2,000	20%	N/A	\$4,000	Deductible/coinsurance	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	PASS	N/A			
	BCN HSA HMO \$2500/0%*	\$2,500	0%	N/A	\$4,000	Deductible	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	N/A	N/A			
	BCN HSA HMO \$2,500/10%*	\$2,500	10%	N/A	\$4,000	Deductible/coinsurance	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	N/A	N/A			
	BCN HSA HMO \$2500/20%*	\$2,500	20%	N/A	\$4,000	Deductible/coinsurance	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	N/A	N/A		
	BCN HSA HMO \$3300/0%**	\$3,300	0%	N/A	\$6,900	Deductible	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	N/A	N/A		
BCN HSA HMO \$3300/20%**	\$3,300	20%	N/A	\$6,900	Deductible/coinsurance	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	FAIL	N/A			
BCN HSA HMO \$3300/30%**	\$3,300	30%	N/A	\$6,900	Deductible/coinsurance	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	FAIL	N/A				
Blue Elect Plus HSA (12) - Optional Riders: - In-Network 0% coinsurance virtual visit rider available for plans with a coinsurance - IRS expanded preventive services (deductible waiver)	Blue Elect Plus HSA POS \$1650/0%*	\$1,650	0%	N/A	\$4,000	Deductible	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	N/A	N/A
	Blue Elect Plus HSA POS \$1650/10%*	\$1,650	10%	N/A	\$4,000	Deductible/coinsurance	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	N/A	N/A			
	Blue Elect Plus HSA POS \$1650/20%*	\$1,650	20%	N/A	\$4,000	Deductible/coinsurance	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	PASS	N/A			
	Blue Elect Plus HSA POS \$2500/0%*	\$2,000	0%	N/A	\$4,000	Deductible	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	N/A	N/A		
	Blue Elect Plus HSA POS \$2,000/10%*	\$2,000	10%	N/A	\$4,000	Deductible/coinsurance	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	N/A	N/A			
	Blue Elect Plus HSA POS \$2000/20%*	\$2,000	20%	N/A	\$4,000	Deductible/coinsurance	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	PASS	N/A			
	Blue Elect Plus HSA POS \$2500/0%*	\$2,500	0%	N/A	\$4,000	Deductible	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	N/A	N/A			
	Blue Elect Plus HSA POS \$2,500/10%*	\$2,500	10%	N/A	\$4,000	Deductible/coinsurance	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	N/A	N/A			
	Blue Elect Plus HSA POS \$2000/20%*	\$2,500	20%	N/A	\$4,000	Deductible/coinsurance	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	PASS	N/A		
	Blue Elect Plus HSA POS \$3300/0%**	\$3,300	0%	N/A	\$6,900	Deductible	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	N/A	N/A		
Blue Elect Plus HSA POS \$3300/20%**	\$3,300	20%	N/A	\$6,900	Deductible/coinsurance	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	FAIL	N/A			
Blue Elect Plus HSA POS \$3300/30%**	\$3,300	30%	N/A	\$6,900	Deductible/coinsurance	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	FAIL	N/A			

	BCN65 (Available with all Plan Offerings)						A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA	AB	AC	AD	AE	AF	AG
BCN65 (1) - Optional \$10 copay virtual visit rider available	BCN65 Medicare Complementary	\$0	\$0	\$0	N/A	\$25/\$25/\$50/\$250	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	PASS	N/A	N/A	N/A	N/A	N/A

Rx Plans (Copay by Tier: Preferred Generic/Non Preferred Generic/Preferred Brand/Non Preferred Brand/Preferred Specialty/Non Preferred Specialty OR Generic/Preferred Brand/Non Preferred Brand/Preferred Specialty/Non Preferred Specialty)					

Drug Plan	Copy Design	Formulary
A	\$4/\$15/\$40/\$80/20%/20%	Custom
B	\$4/\$15/\$40/\$80/20%/20%	Custom Select
C	\$4/\$15/\$40/\$80/20%/20%	PDL
D	\$6/\$25/\$50/\$80/20%/20%	Custom
E	\$6/\$25/\$50/\$80/20%/20%	Custom Select
F	\$6/\$25/\$50/\$80/20%/20%	PDL
G	\$6/\$25/\$60/\$80/20%/20%	Custom
H	\$6/\$25/\$60/\$80/20%/20%	Custom Select
I	\$6/\$25/\$60/\$80/20%/20%	PDL

Drug Plan	Copay Design	Formulary
J	\$10/\$30/\$60/\$80/20%/20%	Custom
K	\$10/\$30/\$60/\$80/20%/20%	Custom Select
L	\$10/\$30/\$60/\$80/20%/20%	PDL
M	\$15/\$40/\$80/20%/20%	Custom
N	\$15/\$40/\$80/20%/20%	PDL
O	\$25/\$50/\$80/20%/20%	Custom
P	\$25/\$50/\$80/20%/20%	PDL
Q	\$30/\$60/\$80/20%/20%	Custom
R	\$30/\$60/\$80/20%/20%	PDL

Drug Plan	Copy Design	Formulary
S	\$15 / \$50 / 50% after deductible (Tier 3-min \$70; max \$100) - Integrated Deductible	Custom
T	\$15 / \$50 / 50% after deductible (Tier 3-min \$70; max \$100) - Integrated Deductible	PDL
U	\$10 / \$20 / \$40 - Integrated Deductible	Custom
V	\$10 / \$20 / \$40 - Integrated Deductible	PDL
W	\$10 / \$40 / \$80 after deductible - Integrated Deductible	Custom
X	\$10 / \$40 / \$80 after deductible - Integrated Deductible	PDL
Y	\$60 / \$60 / 50% after deductible (Tier 3-min \$80; max \$100) - Integrated Deductible	Custom
Z	\$20 / \$60 / 50% after deductible (Tier 3-min \$80; max \$100) - Integrated Deductible	PDL

Drug Plan	Copy Design	Formulary
AA	\$15/\$40/\$80/20%/20%	Custom
AB	\$15/\$40/\$80/20%/20%	PO
AC	0% coinsurance after integrated deductible/covered in full after deductible - Custom Select Drug List	Custom Select
AD	0% coinsurance for large groups - All Tiers covered in full after deductible - Integrated Deductible	Custom
AE	20% Coinsurance after deductible - All Tiers - Integrated Deductible	Custom
AF	All Tiers - 30% coinsurance after deductible	Custom Select
AG	\$15/\$40/0% after deductible	Custom Select

*Rx plans G-L apply the deductible to non-generic tiers for Routine Care plans.

Product Family	Plan	Ded	Coins	ECM	OOP Max	OV/SPEC/UC/ER	Rx	Pass or Fail
BCN Minimum Value (3) - Custom Drug list only. (Plans available with PCP Focus). Optional \$10 copay/0%coinsurance virtual visit rider available except for HSA \$6350	BCN HMO \$1500/20%	\$1,500	20%	N/A	\$5,000	\$30/\$45/\$50/\$250	Limited Rx Benefits	FAIL
	BCN HSA \$4000/50%	\$4,000	50%	N/A	\$6,350	Deductible/coinsurance	50% Coinsurance for large groups - all Tiers - Integrated Deductible	FAIL
	BCN HSA \$6350/0%	\$6,350	0%	N/A	\$6,350	Deductible	0% coinsurance for large groups - All Tiers covered in full after deductible - Integrated Deductible	FAIL

NOTE: This page tests HSA plans assuming *Medicare is Primary*. This is less common, but might come into play when considering HSA plans for groups that have less than 20 employees.

Exhibit 8A
Blue Care Network, Inc.
Creditable Coverage for Rx Plans
Testing Summary for Calendar Year 2025
Blue Elect Plus POS, BCN HMO Fixed Cost, BCN HMO, BCN Routine Care, Blue Elect Plus HRA POS, BCN HRA, Blue Elect Plus HSA POS, BCN HSA, and Healthy Blue Living
Plan Primary

2025 BCN Small Group Menu Plans										
Product Family	2025 Plan Name	Ded	Coins	ECM	OOP Max	Employer Contribution	OV/SPEC/UC/ER	Rx (Includes MOPD 3X-\$10 and contraceptives) Custom Select Drug List	2025 AV	PASS/FAIL
Blue Elect Plus - POS	2025 Blue Elect Plus POS Platinum Option 1	\$0/\$250 OON	20%	N/A	\$3,000	N/A	\$20/\$30/\$35/\$150	\$4/\$15/\$40/\$80/20% (\$200)/20% (\$300)	91.38%	PASS
	2025 Blue Elect Plus POS Platinum Option 2	\$250	20%	N/A	\$4,500	N/A	\$20/\$30/\$50/\$150	\$4/\$15/\$40/\$80/20% (\$200)/20% (\$300)	88.29%	PASS
	2025 Blue Elect Plus POS Gold Option 1	\$500	20%	\$5,000	\$9,100	N/A	\$30/\$50/\$50/\$250	\$10/\$30/\$60/\$80/20% (\$200)/20% (\$300)	81.83%	PASS
	2025 Blue Elect Plus POS Gold Option 2	\$1,000	20%	\$5,000	\$9,100	N/A	\$30/\$50/\$50/\$250	\$10/\$30/\$60/\$80/20% (\$200)/20% (\$300)	80.59%	PASS
	2025 Blue Elect Plus POS Gold Option 3	\$1,500	20%	\$5,000	\$9,100	N/A	\$30/\$50/\$50/\$250	\$10/\$30/\$60/\$80/20% (\$200)/20% (\$300)	79.78%	PASS
	2025 Blue Elect Plus POS Gold Option 4	\$2,000	20%	N/A	\$7,350	N/A	\$30/\$50/\$50/\$250	\$15/\$40/\$80/\$100/20% (\$200)/20% (\$300)	79.10%	PASS
	2025 Blue Elect Plus POS Gold Option 5	\$3,000	20%	N/A	\$7,350	N/A	\$30/\$50/\$50/\$250	\$15/\$40/\$80/\$100/20% (\$200)/20% (\$300)	78.60%	PASS
	2025 Blue Elect Plus POS Gold Option 6	\$4,000	20%	N/A	\$9,200	N/A	\$30/\$50/\$60/\$250	\$4/\$15/\$40/\$80/20% (\$200)/20% (\$300)	78.35%	PASS
	2025 Blue Elect Plus POS Gold Option 7	\$5,000	30%	N/A	\$9,200	N/A	\$20/\$30/\$50/\$150	\$4/\$15/\$40/\$80/20% (\$200)/20% (\$300)	79.64%	PASS
BCN HMO Fixed Cost	2025 BCN Fixed Cost Platinum	\$0	0%	N/A	\$4,000	N/A	\$15/\$30/\$30/\$250	\$4/\$15/\$40/\$80/\$200/\$300	89.27%	PASS
	2025 BCN Fixed Cost Gold Option 1	\$0	0%	N/A	\$9,200	N/A	\$20/\$50/\$50/\$250	\$15/\$40/\$80/\$100/\$200/\$300	81.71%	PASS
	2025 BCN Fixed Cost Gold Option 2	\$0	0%	N/A	\$9,200	N/A	\$40/\$60/\$60/\$550	\$15/\$40/\$80/\$100/\$200/\$300	79.82%	PASS
BCN HMO - without Deductible	2025 BCN Platinum Option 1	\$0	10%	\$1,000	\$5,000	N/A	\$20/\$30/\$35/\$150	\$6/\$25/\$50/\$80/20% (\$200)/20% (\$300)	91.33%	PASS
	2025 BCN Platinum Option 2	\$0	20%	\$1,000	\$6,600	N/A	\$25/\$35/\$35/\$150	\$6/\$25/\$50/\$80/20% (\$200)/20% (\$300)	89.99%	PASS
	2025 BCN Gold	\$0	30%	N/A	\$9,200	N/A	\$40/\$60/\$60/\$250	\$15/\$40/\$80/\$100/20% (\$200)/20% (\$300)	81.61%	PASS
BCN HMO - with Deductible	2025 BCN Platinum	\$500	0%	N/A	\$1,500	N/A	\$20/\$30/\$35/\$150	\$4/\$15/\$40/\$80/20% (\$200)/20% (\$300)	91.67%	PASS
	2025 BCN PCP Focus Platinum	\$500	0%	N/A	\$1,500	N/A	\$20/\$30/\$35/\$150	\$4/\$15/\$40/\$80/20% (\$200)/20% (\$300)	91.67%	PASS
	2025 BCN Gold Option 1	\$500	20%	\$5,000	\$9,100	N/A	\$30/\$50/\$50/\$350	\$15/\$40/\$80/\$100/20% (\$200)/20% (\$300)	80.54%	PASS
	2025 BCN Gold Option 2	\$1,000	20%	\$3,500	\$8,150	N/A	\$20/\$40/\$50/\$250	\$15/\$40/\$80/\$100/20% (\$200)/20% (\$300)	80.67%	PASS
	2025 BCN PCP Focus Gold Option 2	\$1,000	20%	\$3,500	\$8,150	N/A	\$20/\$40/\$50/\$250	\$15/\$40/\$80/\$100/20% (\$200)/20% (\$300)	80.67%	PASS
	2025 BCN Gold Option 3	\$1,500	20%	\$2,500	\$8,150	N/A	\$20/\$40/\$50/\$250	\$10/\$30/\$60/\$80/20% (\$200)/20% (\$300)	81.06%	PASS
	2025 BCN PCP Focus Gold Option 3	\$1,500	20%	\$2,500	\$8,150	N/A	\$20/\$40/\$50/\$250	\$10/\$30/\$60/\$80/20% (\$200)/20% (\$300)	81.06%	PASS
	2025 BCN Gold Option 4	\$2,000	20%	\$2,000	\$9,100	N/A	\$20/\$40/\$50/\$150	\$10/\$30/\$60/\$80/20% (\$200)/20% (\$300)	80.33%	PASS
	2025 BCN PCP Focus Gold Option 4	\$2,000	20%	\$2,000	\$9,100	N/A	\$20/\$40/\$50/\$150	\$10/\$30/\$60/\$80/20% (\$200)/20% (\$300)	80.33%	PASS
	2025 BCN Gold Option 5	\$2,500	20%	\$2,000	\$7,350	N/A	\$30/\$50/\$50/\$150	\$4/\$15/\$40/\$80/20% (\$200)/20% (\$300)	79.93%	PASS
	2025 BCN PCP Focus Gold Option 5	\$2,500	20%	\$2,000	\$7,350	N/A	\$30/\$50/\$50/\$150	\$4/\$15/\$40/\$80/20% (\$200)/20% (\$300)	79.93%	PASS
	2025 BCN Gold Option 6	\$3,000	20%	\$3,000	\$8,150	N/A	\$30/\$50/\$50/\$150	\$4/\$15/\$40/\$80/20% (\$200)/20% (\$300)	78.34%	PASS
	2025 BCN PCP Focus Gold Option 6	\$3,000	20%	\$3,000	\$8,150	N/A	\$30/\$50/\$50/\$150	\$4/\$15/\$40/\$80/20% (\$200)/20% (\$300)	78.34%	PASS
	2025 BCN Gold Option 7	\$4,000	10%	\$3,000	\$9,100	N/A	\$20/\$40/\$50/\$150	\$4/\$15/\$40/\$80/20% (\$200)/20% (\$300)	78.12%	PASS
	2025 BCN PCP Focus Gold Option 7	\$4,000	10%	\$3,000	\$9,100	N/A	\$20/\$40/\$50/\$150	\$4/\$15/\$40/\$80/20% (\$200)/20% (\$300)	78.12%	PASS
	2025 BCN Silver	\$5,000	30%	N/A	\$9,100	N/A	\$40/\$60/\$60/\$350	\$15/\$40/\$80/\$150/20% (\$300)/20% (\$500)	70.75%	PASS
	2025 BCN PCP Focus Silver	\$5,000	30%	N/A	\$9,100	N/A	\$40/\$60/\$60/\$350	\$15/\$40/\$80/\$150/20% (\$300)/20% (\$500)	70.75%	PASS
BCN Routine Care	2025 BCN Routine Care Silver	\$4,000	30%	N/A	\$9,100	N/A	\$30/deductible+coinsurance/ \$30/deductible+coinsurance	\$6/\$25/\$60/\$80/20% (\$200)/20% (\$300) - Deductible does not apply to generic tiers	69.63%	PASS
	2025 BCN Routine Care Bronze	\$9,200	0%	N/A	\$9,200	N/A	\$40/deductible/\$40/deductible	\$15/\$40/deductible - Deductible does not apply to generic tiers	63.10%	FAIL
Blue Elect Plus HRA POS	2025 Blue Elect Plus HRA POS Gold Option 1	\$2,000	20%	N/A	\$7,350	\$100	\$30/\$50/\$50/\$250	\$15/\$40/\$80/\$100/20% (\$200)/20% (\$300)	80.04%	PASS
	2025 Blue Elect Plus HRA POS Gold Option 2	\$4,000	20%	N/A	\$9,100	\$450	\$30/\$50/\$60/\$250	\$4/\$15/\$40/\$80/20% (\$200)/20% (\$300)	81.70%	PASS
BCN HRA	2025 BCN HRA Platinum Option 1	\$1,500	20%	\$500	\$6,350	\$750	\$20/\$40/\$50/\$150	\$4/\$15/\$40/\$80/20% (\$200)/20% (\$300)	89.89%	PASS
	2025 BCN HRA Platinum Option 2	\$2,000	20%	\$500	\$6,350	\$1,000	\$20/\$40/\$50/\$150	\$4/\$15/\$40/\$80/20% (\$200)/20% (\$300)	89.65%	PASS
	2025 BCN HRA Gold Option 1	\$3,000	20%	N/A	\$9,100	\$150	\$30/\$50/\$50/\$150	\$6/\$25/\$50/\$80/20% (\$200)/20% (\$300)	78.37%	PASS
	2025 BCN HRA Gold Option 2	\$4,000	20%	N/A	\$9,100	\$350	\$30/\$60/\$60/\$150	\$6/\$25/\$60/\$80/20% (\$250)/20% (\$350)	78.35%	PASS
	2025 BCN HRA Platinum Option 3	\$5,000	20%	N/A	\$6,350	\$2,500	\$20/\$40/\$50/\$150	\$6/\$25/\$50/\$80/20% (\$200)/20% (\$300)	90.07%	PASS
	2025 BCN HRA PCP Focus Platinum Option 3	\$5,000	20%	N/A	\$6,350	\$2,500	\$20/\$40/\$50/\$150	\$6/\$25/\$50/\$80/20% (\$200)/20% (\$300)	90.07%	PASS
Blue Elect Plus HSA POS	2025 Blue Elect Plus HSA POS Platinum*	\$1,650	0%	N/A	\$1,650	\$0	Deductible	Deductible	88.04%	PASS
	2025 Blue Elect Plus HSA POS Gold Option 1*	\$1,650	20%	N/A	\$4,500	\$0	Deductible/coinsurance	\$10/\$30/\$60/\$80/20% (\$200)/20% (\$300)	80.90%	PASS
	2025 Blue Elect Plus HSA POS Gold Option 2*	\$2,500	0%	N/A	\$4,500	\$0	Deductible	\$15/\$40/\$80/\$100/20% (\$200)/20% (\$300)	80.65%	PASS
	2025 Blue Elect Plus HSA POS Silver**	\$3,300	20%	N/A	\$7,500	\$0	Deductible/coinsurance	\$6/\$25/\$60/\$80/20% (\$200)/20% (\$300)	70.92%	PASS
	2025 Blue Elect Plus HSA POS Bronze**	\$7,500	0%	N/A	\$7,500	\$0	Deductible	Deductible	63.00%	FAIL
BCN HSA	2025 BCN HSA Platinum*	\$1,650	0%	N/A	\$1,650	\$0	Deductible	Deductible	88.04%	PASS
	2025 BCN HSA Gold Option 1*	\$1,650	20%	N/A	\$4,500	\$0	Deductible/coinsurance	\$10/\$30/\$60/\$80/20% (\$200)/20% (\$300)	80.90%	PASS
	2025 BCN HSA Gold Option 2*	\$2,500	0%	N/A	\$4,500	\$0	Deductible	\$15/\$40/\$80/\$100/20% (\$200)/20% (\$300)	80.65%	PASS
	2025 BCN HSA Gold Option 3**	\$3,300	0%	N/A	\$3,300	\$0	Deductible	Deductible	80.12%	PASS
	2025 BCN HSA Silver Option 1**	\$3,300	20%	N/A	\$7,500	\$0	Deductible/coinsurance	\$6/\$25/\$60/\$80/20% (\$200)/20% (\$300)	70.92%	PASS
	2025 BCN HSA Silver Option 2**	\$4,000	10%	N/A	\$7,050	\$0	Deductible/coinsurance	\$15/\$40/\$80/\$100/20% (\$200)/20% (\$300)	70.49%	PASS
	2025 BCN HSA Silver Option 3**	\$4,500	0%	N/A	\$7,000	\$0	Deductible	\$15/\$40/\$80/\$100/20% (\$200)/20% (\$300)	71.16%	PASS
	2025 BCN HSA Bronze**	\$7,500	0%	N/A	\$7,500	\$0	Deductible	Deductible	63.00%	FAIL
	2025 BCN HSA PCP Focus Bronze**	\$7,500	0%	N/A	\$7,500	\$0	Deductible	Deductible	63.00%	FAIL
	2025 BCN Healthy Blue Living Platinum	\$500	0%	N/A	\$2,000	N/A	\$10/\$30/\$35/\$150	\$4/\$15/\$40/\$80/20% (\$200)/20% (\$300)	88.23%	PASS
BCN Healthy Blue Living		\$1,250	20%	N/A	\$4,000	N/A	\$20/\$40/\$50/\$150	\$6/\$25/\$50/\$80/20% (\$200)/20% (\$300)		
	2025 BCN Healthy Blue Living Gold Option 1	\$1,000	20%	\$3,500	\$8,150	N/A	\$30/\$40/\$50/\$150	\$10/\$30/\$60/\$80/20% (\$200)/20% (\$300)	78.66%	PASS
		\$3,000	30%	\$4,000	\$8,150	N/A	\$40/\$60/\$60/\$250	\$15/\$40/\$60/\$80/20% (\$200)/20% (\$300)		
	2025 BCN Healthy Blue Living Gold Option 2	\$1,500	20%	\$2,500	\$6,600	N/A	\$30/\$40/\$50/\$150	\$6/\$25/\$50/\$80/20% (\$200)/20% (\$300)	79.65%	PASS
		\$4,000	30%	N/A	\$6,600	N/A	\$40/\$60/\$60/\$250	\$10/\$30/\$60/\$80/20% (\$200)/20% (\$300)		
	2025 BCN Healthy Blue Living Gold Option 3	\$2,000	20%	\$1,000	\$6,600	N/A	\$30/\$40/\$50/\$150	\$10/\$30/\$60/\$80/20% (\$200)/20% (\$300)	79.29%	PASS
		\$4,000	30%	\$2,000	\$6,600	N/A	\$40/\$60/\$60/\$250	\$15/\$40/\$60/\$80/20% (\$200)/20% (\$300)		

Exhibit 8B
Blue Care Network, Inc.
Creditable Coverage for Rx Plans
Testing Summary for Calendar Year 2025
Blue Elect Plus HSA POS and BCN HSA
Medicare Primary

2025 BCN Small Group Menu Plans

Product Family	2025 Plan Name	Ded	Coins	ECM	OOP Max	Employer Contribution	OV/SPEC/UC/ER	Rx (Includes MOPD 3X-\$10 and contraceptives) Custom Select Drug List	2025 AV	PASS/FAIL
Blue Elect Plus HSA POS	2025 Blue Elect Plus HSA POS Platinum*	\$1,650	0%	N/A	\$1,650	\$0	Deductible	Deductible	88.04%	PASS
	2025 Blue Elect Plus HSA POS Gold Option 1*	\$1,650	20%	N/A	\$4,500	\$0	Deductible/coinsurance	\$10/\$30/\$60/\$80/20% (\$200)/20% (\$300)	80.90%	PASS
	2025 Blue Elect Plus HSA POS Gold Option 2*	\$2,500	0%	N/A	\$4,500	\$0	Deductible	\$15/\$40/\$80/\$100/20% (\$200)/20% (\$300)	80.65%	PASS
	2025 Blue Elect Plus HSA POS Silver**	\$3,300	20%	N/A	\$7,500	\$0	Deductible/coinsurance	\$6/\$25/\$60/\$80/20% (\$200)/20% (\$300)	70.92%	PASS
	2025 Blue Elect Plus HSA POS Bronze**	\$7,500	0%	N/A	\$7,500	\$0	Deductible	Deductible	63.00%	FAIL
BCN HSA	2025 BCN HSA Platinum*	\$1,650	0%	N/A	\$1,650	\$0	Deductible	Deductible	88.04%	PASS
	2025 BCN HSA Gold Option 1*	\$1,650	20%	N/A	\$4,500	\$0	Deductible/coinsurance	\$10/\$30/\$60/\$80/20% (\$200)/20% (\$300)	80.90%	PASS
	2025 BCN HSA Gold Option 2*	\$2,500	0%	N/A	\$4,500	\$0	Deductible	\$15/\$40/\$80/\$100/20% (\$200)/20% (\$300)	80.65%	PASS
	2025 BCN HSA Gold Option 3**	\$3,300	0%	N/A	\$3,300	\$0	Deductible	Deductible	80.12%	PASS
	2025 BCN HSA Silver Option 1**	\$3,300	20%	N/A	\$7,500	\$0	Deductible/coinsurance	\$6/\$25/\$60/\$80/20% (\$200)/20% (\$300)	70.92%	PASS
	2025 BCN HSA Silver Option 2**	\$4,000	10%	N/A	\$7,050	\$0	Deductible/coinsurance	\$15/\$40/\$80/\$100/20% (\$200)/20% (\$300)	70.49%	FAIL
	2025 BCN HSA Silver Option 3**	\$4,500	0%	N/A	\$7,000	\$0	Deductible	\$15/\$40/\$80/\$100/20% (\$200)/20% (\$300)	71.16%	FAIL
	2025 BCN HSA Bronze**	\$7,500	0%	N/A	\$7,500	\$0	Deductible	Deductible	63.00%	FAIL
	2025 BCN HSA PCP Focus Bronze**	\$7,500	0%	N/A	\$7,500	\$0	Deductible	Deductible	63.00%	FAIL

NOTE: This page tests HSA plans assuming *Medicare is Primary*. This is less common, but might come into play when considering HSA plans for groups that have less than 20 employees.