

County of Chatham

Important contractual document. Please retain for your records

For effective dates beginning July 2026.

Revision: 2/13/2026

Tax Report: Not Applicable

Utilization Management (UM)

| Program Name | Description / Selection | Fee \$ |
|--|---|-----------------------------|
| Diagnostic Imaging Management (DIM) | Requires prior review for all CT, CTA, MRI, MRA, PET scans and nuclear imaging performed in an outpatient setting. <input checked="" type="checkbox"/> Include <input type="checkbox"/> Exclude | \$0.35 Per Member Per Month |
| Enhanced Cardiology Program | Requires prior approval for echocardiology and other codes related to cardiology management. <i>Note: Groups who exclude Diagnostic Imaging must exclude this program.</i> <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude | \$0.15 Per Member Per Month |
| Medical Oncology Solution | Promotes efficient use of chemotherapy and supportive agents through the use of evidence based treatment guidelines and quality outcomes. <input checked="" type="checkbox"/> Include <input type="checkbox"/> Exclude | \$0.21 Per Member Per Month |
| Musculoskeletal UM Program (MSK) | Requires prior approval for MSK procedures such as spine surgery, interventional pain management, and joint surgery. <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude | \$0.37 Per Member Per Month |
| Rehabilitation Management Program | Utilization Management, including prior approval for physical therapy, occupational therapy and speech therapy services. <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude | \$0.13 Per Member Per Month |
| Sleep Study Management Program | Requires prior approval for sleep studies. <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude | \$0.10 Per Member Per Month |
| Specialty Care Shopper Program | Involves referring providers and members in imaging site selection process by providing cost and quality transparency for CT and MRI studies. <i>Note 1: Not available to groups who purchase SmartShopper Program.</i> <i>Note 2: Not available to groups exclude Diagnostic Imaging Management Program.</i> <i>Note 3: Not available to groups who purchase the All Copay medical plan.</i> <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude | \$0.06 Per Member Per Month |
| Surgical Procedure Management Program | Surgical Procedure Management: Requires prior approval for certain minor surgical procedures of the eye, ear, digestive, and urinary systems when performed in an outpatient setting AND requires prior approval for Upper esophagogastroduodenoscopy (EGD) procedures in an outpatient, ambulatory surgical center (ASC) or office setting. <i>Note: Site of Care (the review of certain minor surgical procedures when requested in the outpatient setting) only applies to members receiving services in NC.</i> <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude | \$0.42 Per Member Per Month |

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Clinical Support

| Program Name | Description / Selection | Fee \$ |
|--|--|------------------------------------|
| Behavioral Health Management | Provides case management, utilization management, care coordination, after-care planning, and referral to Blue Cross NC behavioral health provider network, by our specialized behavioral health care navigation team. This service is provided to all members. | \$0.28 Per Member Per Month |
| Nurse Support Program (Case Management) | Personalized attention and comprehensive support for members dealing with complex health issues. Designed to help manage high-cost conditions and reduce medical costs. This service is provided to all members. | |
| Nurse Support Program (Condition Care) | Provides support for members with Diabetes, Asthma, Coronary Artery Disease, Congestive Heart Failure, Chronic Obstructive Pulmonary Disease, Hypertension, Maternity and other conditions. Includes care gap alerts and telephonic/digital health coaching. <i>Note: Only groups who purchase EngageHealth@ should exclude this program.</i> | |
| | <input checked="" type="checkbox"/> Include <input type="checkbox"/> Exclude (EngageHealth Clients Only) | \$0.64 Per Member Per Month |
| Diabetes Prevention Program (DPP) | Powered by Vida Health - Helps members achieve healthy weight and prevent type 2 diabetes and other conditions by adopting new healthy behaviors through expert coaching and in-app tools. This CDC-accredited program will allow members at risk for type 2 diabetes to participate in evidence-based lifestyle change programs to reduce their risk of type 2 diabetes. <i>Note: Groups must have pharmacy benefits integrated with medical plan.</i> | |
| | <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude | \$55.00 Per Participant Per Month |
| Weight Management | Powered by Vida Health - Helps members achieve healthy weight and prevent type 2 diabetes and other conditions by adopting new healthy behaviors through expert coaching and in-app tools. This program will support interested members in eating healthy, exercising, and losing weight through lifestyle changes. Some clinical exclusions apply, such as diagnosis of diabetes. <i>Note: Groups must have pharmacy benefits integrated with medical plan.</i> | |
| | <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude | \$55.00 Per Participant Per Month |
| GLP-1s for Weight Management | Powered by Vida Health - Helps members achieve healthy weight and prevent type 2 diabetes and other conditions by adopting new healthy behaviors through expert coaching and in-app tools. This program will support all interested members in eating healthy, exercising, and losing weight through lifestyle changes, in addition to GLP-1s for weight management for appropriate members. <i>Note 1: If GLP-1s for weight management program is elected, members can only receive GLP-1s for weight loss prescriptions through this program.</i> <i>Note 2: Groups must have pharmacy benefits integrated with medical plan.</i> <i>Note 3: GLP1 is only available to groups with custom benefits.</i> | |
| | <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude | \$142.00 Per Participant Per Month |

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Clinical Support *continued...*

| Program Name | Description / Selection | Fee \$ |
|-------------------------|---|------------------------------------|
| Feed Your Health | Powered by NourishedRx - Type 2 diabetes management program (HbA1c of 8 or higher in the last six months) providing 4 months of medically tailored, home delivered meals and groceries; 6 months of one-on-one sessions with registered dietitians and wellness advocates; and 12 months access to self-service tools and health and nutrition resources to empower members to manage their diabetes effectively. Program fees include 12 months of access, which are billed as 6 milestone-based payments within the first 6 months of the program with continuous engagement. Fees will continue for 6 months as long as the member remains engaged. If the member stops engaging, the fees will stop. <i>Note: Fees billed through claims, not as a Care Management Fee.</i> | |
| | <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude | \$125.00 Per Participant Per Month |

| | | |
|--|---|--|
| Musculoskeletal Virtual Care Solution | Powered by Hinge Health - Help your employees move beyond pain and musculoskeletal limitations. Hinge Health's team of physical therapists, surgeons, and health coaches build a personalized treatment plan for every member. Includes support for prevention, acute, chronic, and pre- and post-surgery as well as surgery decision support, fall prevention, women's pelvic health. <i>Note 1: Prevention program is offered to all members at no cost.</i> <i>Note 2: A 365-day subscription beginning upon members first session; \$250 initial fee per participant, then \$50 per subsequent session. An individual member's fee will not exceed \$1,750.</i> <i>Note 3: The program cap is the maximum a group pays annually - \$995 per engaged member. If total annual spend exceeds the cap, a reconciliation payment is issued.</i> <i>Note 4: Fees billed through claims, not as a Care Management Fee.</i> | |
| | <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude | |

Clinical Support - Telehealth

| Program Name | Description / Selection | Fee \$ |
|-------------------------|---|-----------------------------|
| Health Line Blue | 24/7 nurse line: confidential health information resource staffed by highly trained registered nurses (RNs). <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude | \$0.19 Per Member Per Month |

Programs by Teladoc® Health

Offered by Teladoc® Health many of these programs can be selected individually or added to a bundle for the same benefits and discounted pricing.

| | | |
|-------------------|---|-------------------------------|
| Primary360 | Primary360 addresses whole person health by offering virtual care services and specialists for: primary care, acute care, mental health care, dermatology, and nutrition. <i>Note 1: Groups purchasing bundle Options 2 or 3 are required to include this program.</i> <i>Note 2: Groups selecting Primary360 cannot select Telehealth program.</i> <i>Note 3: Grandfathered groups must exclude this program.</i> | |
| | <input checked="" type="checkbox"/> Include <input type="checkbox"/> Exclude | \$1.45 Per Contract Per Month |

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Clinical Support - Telehealth *continued...*

| Program Name | Description / Selection | Fee \$ |
|---------------------------|--|---|
| Telehealth | <p>Provides convenient access to doctor consultations by mobile device or online. Member activation and utilization campaigns are included.</p> <p><i>Note 1: Groups selecting Primary360 or bundle Options 2 or 3 cannot select the Telehealth program.</i> <i>Note 2: Grandfathered groups must exclude this program.</i> <i>Note 3: Groups purchasing Mental Health Complete should only purchase Telehealth: Acute Care or Telehealth: Acute Care + Dermatology.</i></p> <p> <input type="checkbox"/> Acute Care <input type="checkbox"/> Acute Care + Dermatology <input type="checkbox"/> Acute Care + Mental Health Care Teletherapy <input type="checkbox"/> Acute Care + Mental Health Care Teletherapy + Dermatology <input checked="" type="checkbox"/> Exclude </p> | <p>\$0.85 Per Contract Per Month \$0.90 Per Contract Per Month \$0.95 Per Contract Per Month \$1.05 Per Contract Per Month</p> |
| Catapult Health | <p>Catapult Health provides comprehensive onsite and at-home preventive screenings and evaluations. Employees meet virtually with a Nurse Practitioner (NP) to review their Personal Health Report and get connected to care if needed.</p> <p>First claim: \$40 preventive claim when kit is mailed to the participant's home (group can select to have kits mailed to all of their members or have them mailed only when a member requests one via Catapult Health's website); Or \$75 kit mailed with a blood pressure cuff (requested by the participant).</p> <p>Second claim: \$165 preventive claim when the home kit is complete, shipped back to Catapult's lab and bloodwork is processed (samples are overnighted) NP visit is included in this fee.</p> <p> <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude </p> | |
| Mental Health Care | <p>Mental Health Care application that offers structured digital courses, remote care engagement coaching and telepsychiatry. Fees billed through claims, not as a Care Management fee. Fee based on engaged participants, defined as active users within 6-month increments.</p> <p>Options: Mental Health Digital - Includes digital Mental Health Care app. Mental Health Complete Bundle - Includes digital behavioral health app with Mental Health Care Teletherapy at a discount when bundled with Chronic Condition Management Plus. Mental Health Complete - Includes Mental Health Digital app with Mental Health Care Teletherapy.</p> <p><i>Groups purchasing bundle Option 3 must include the Mental Health Digital Selection.</i> <i>Note 2: For the "Complete" options Teladoc Mental Health Care consultation fees apply.</i> <i>Note 3: If purchasing Mental Health Complete or Mental Health Complete Bundle, only select Telehealth Acute Care.</i></p> <p> <input type="checkbox"/> Mental Health Digital <input type="checkbox"/> Mental Health Complete Bundle <input type="checkbox"/> Mental Health Complete <input checked="" type="checkbox"/> Exclude </p> | <p>\$16.00 Per Participant Per Month \$17.00 Per Participant Per Month \$19.00 Per Participant Per Month</p> |

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Clinical Support - Telehealth *continued...*

| Program Name | Description / Selection | Fee \$ |
|--|---|-----------------------------------|
| Chronic Condition Management Plus | Virtual care for the chronic care conditions listed below. Fees billed through claims, not as a Care Management fee. Fee based on engaged participants, defined as active users within 3-month increments. Options: Hypertension Management Plus - Targets members with hypertension; also addresses dyslipidemia, weight management, and mental health. Prediabetes Management Plus - Targets members with pre-diabetes; also addresses hypertension, dyslipidemia, weight management and mental health. <i>Note: Members participating in this pre-diabetes program for one year, will have a fee reduction to \$55 per participant per month, beginning with month 13.</i> Diabetes Management Plus - Targets members with diabetes; also addresses hypertension, dyslipidemia, weight management and mental health. Note 1: Groups who select any of the program options below can get discount pricing if they select the Mental Health Complete Bundle option above. Note 2: Groups selecting bundle options 1, 2 or 3 cannot select this program. Note 3: Devices included based on applicable module. Lost or damaged devices replaced as a claim: blood glucose meter \$167, digital scales \$95, blood pressure monitor/cuff replacements \$97. You may select more than one. | |
| | <input type="checkbox"/> Hypertension Management Plus | \$55.00 Per Participant Per Month |
| | <input type="checkbox"/> Prediabetes Management Plus | \$74.00 Per Participant Per Month |
| | <input type="checkbox"/> Diabetes Management Plus | \$95.00 Per Participant Per Month |
| | <input checked="" type="checkbox"/> Exclude | |

**Teladoc® Health
Bundling Options**

The following bundling options are available with the Management Plus programs for savings.

| | | |
|-----------------|---|-----------------------------------|
| Option 1 | This bundle includes: Hypertension Management Plus, Prediabetes Management Plus and Diabetes Management Plus. Fees billed at a discounted rate as opposed to buying all included programs individually. Note 1: A group selecting this bundle cannot select any of the options under Chronic Condition Management Plus or any other bundle option. Note 2: Devices included based on applicable module. Lost or damaged devices replaced as a claim: blood glucose meter \$167, digital scales \$95, blood pressure monitor/cuff replacements \$97. You must select all to get the bundled pricing. | |
| | <input type="checkbox"/> Diabetes Management Plus <input type="checkbox"/> Hypertension Management Plus <input type="checkbox"/> Prediabetes Management Plus <input type="checkbox"/> Include | \$69.00 Per Participant Per Month |
| | <input checked="" type="checkbox"/> Exclude | |

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Clinical Support - Telehealth *continued...*

| Program Name | Description / Selection | Fee \$ |
|--------------|--|-----------------------------------|
| Option 2 | <p>This bundle includes: Hypertension Management Plus, Pre-diabetes Management Plus with the purchase of Primary360. Fees for Management Plus programs will be billed at a discounted rate as opposed to buying all included programs individually.</p> <p>Note 1: Group must select Primary360 program separately. Note 2: A group selecting this bundle cannot select any of the options under Chronic Condition Management Plus or any other bundle option. Note 3: Grandfathered groups are not eligible for this bundle. Note 4: Devices included based on applicable module. Lost or damaged devices replaced as a claim: blood glucose meter \$167, digital scales \$95, blood pressure monitor/cuff replacements \$97.</p> <p><i>You must select all to get the bundled pricing.</i></p> <p> <input type="checkbox"/> Diabetes Management Plus <input type="checkbox"/> Hypertension Management Plus <input type="checkbox"/> Prediabetes Management Plus <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude </p> | \$67.00 Per Participant Per Month |

| | | |
|----------|---|-----------------------------------|
| Option 3 | <p>This bundle includes: Hypertension Management Plus, Pre-diabetes Management Plus and Diabetes Management Plus with the purchase of Primary360 and Mental Health Digital. Fees for Management Plus programs will be billed at a discounted rate as opposed to buying all included programs individually.</p> <p>Note 1: Group must select Primary360 and Mental Health Care Digital programs separately. Note 2: A group selecting this bundle cannot select any of the options under Chronic Condition Management Plus or any other bundle option. Note 3: Grandfathered groups are not eligible for this bundle. Note 4: Devices included based on applicable module. Lost or damaged devices replaced as a claim: blood glucose meter \$167, digital scales \$95, blood pressure monitor/cuff replacements \$97.</p> <p><i>You must select all to get the bundled pricing.</i></p> <p> <input type="checkbox"/> Diabetes Management Plus <input type="checkbox"/> Hypertension Management Plus <input type="checkbox"/> Prediabetes Management Plus <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude </p> | \$65.00 Per Participant Per Month |
|----------|---|-----------------------------------|

Clinical Support - Reproductive Health

| Program Name | Description / Selection | Fee \$ |
|----------------------|--|-----------------------------|
| My Pregnancy Program | <p>Program includes a mobile app that supports expecting parents through pregnancy and the postpartum period. App includes customized education based on due date and member's individual pregnancy/postpartum journey, risk assessments, and direct messaging with Blue Cross NC health professionals. A non-rewardable member campaign is included.</p> <p>Note: Groups selecting Progyny's Pregnancy & Postpartum cannot select My Pregnancy.</p> <p> <input checked="" type="checkbox"/> Include <input type="checkbox"/> Exclude (Pregnancy & Postpartum Only) </p> | \$0.01 Per Member Per Month |

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Clinical Support - Reproductive Health *continued...*

| Program Name | Description / Selection | Fee \$ |
|--------------|-------------------------|--------|
|--------------|-------------------------|--------|

**Reproductive Health
Programs with Progyny**

There are 3 programs available: Fertility & Family Building, Pregnancy & Postpartum and Menopause & Midlife. Each program is billed as an engagement fee per enrolled member which is submitted as a claim.

**Fertility & Family
Building**

Access to specialists and plan designs that provide comprehensive, personalized and integrated support for optimal outcomes and member experience with regard to fertility and family planning.

Note 1: Progyny order form and agreement must be completed and sent to Progyny.

Note 2: The Fertility & Family Building engagement fee is valid for 12 months upon member engagement.

Note 3: Groups enrolling in an All Copay medical plan cannot select this Fertility & Family Building program.

Note 4: For groups who purchase Fertility & Family Building, there are additional options available below.

 Include

\$550.00 Per Participant

 Exclude

**Fertility & Family
Building Options**

Options available to groups who purchase the Fertility & Family Building program.

Add-On: Donor Tissue Purchase - Supports members who pursue surrogacy or purchase donor tissue to achieve pregnancy. No additional charge: covered within the Fertility & Family Building program engagement fee. Client and member pay claims, as applicable.

Add-On: Fertility Preservation - Adds elective fertility preservation to the medically necessary fertility preservation which is included in the core Fertility & Family Building program. No additional charge: covered within the Fertility & Family Building program engagement fee. Client and member pay claims, as applicable.

Adoption Reimbursement - Financial assistance throughout the adoption journey to offset high costs associated with this path to parenthood. Client sets reimbursement dollar maximum and pays qualified charges up to that amount and an additional 10% administrative fee based on the amount reimbursed.

Fertility Travel Reimbursement - Financial assistance for travel necessary to undergo fertility treatment. Client sets reimbursement dollar maximum and pays qualified charges up to that amount and an additional 10% administrative fee based on the amount reimbursed.

Surrogacy Reimbursement - Financial assistance throughout the surrogacy process to offset high costs associated with this path to parenthood. Client sets reimbursement dollar maximum and pays qualified charges up to that amount and an additional 10% administrative fee based on the amount reimbursed.

Note: These options are only available to groups who purchase the Fertility & Family Building program.

You may select more than one.

 Add-On: Donor Tissue Purchase

 Add-On: Fertility Preservation

 Adoption Reimbursement

 Fertility Travel Reimbursement

 Surrogacy Reimbursement

 Exclude

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Clinical Support - Reproductive Health *continued...*

| Program Name | Description / Selection | Fee \$ |
|-----------------------------------|--|--------------------------|
| Doula Reimbursement | Financial assistance throughout the parenthood journey. Group sets reimbursement dollar maximum and pays qualified charges up to that amount and an additional 10% administrative fee based on the amount reimbursed. <i>Note: Available to elect with the Fertility & Family Building program.</i> <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude | |
| Pregnancy & Postpartum | Proactive, dedicated coaching and educational curriculum through each stage of pregnancy and transition to parenthood – tailored to health risks, physical and emotional needs to close gaps in care and improve return to work. <i>Note 1: Group may select Pregnancy & Postpartum or My Pregnancy.</i> <i>Note 2: Progyny order form and agreement must be completed and sent to Progyny.</i> <i>Note 3: The Pregnancy and Postpartum engagement fee is valid for 21 months upon member engagement.</i> <i>Note 4: Groups enrolling in an All Copay medical plan cannot select this Pregnancy & Postpartum program.</i> <i>Note 5: Groups selecting Pregnancy & Postpartum can also enroll in the Doula Reimbursement program.</i> <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude | \$995.00 Per Participant |
| Doula Reimbursement | Financial assistance throughout the parenthood journey. Group sets reimbursement dollar maximum and pays qualified charges up to that amount and an additional 10% administrative fee based on the amount reimbursed. <i>Note: Available to elect with the Pregnancy & Postpartum program.</i> <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude | |
| Menopause & Midlife | Early education in perimenopause symptoms and unparalleled access to menopause-specialized medical care in all 50-states – for empowered, convenient and evidence-based care during critical stages of life and career transitions through midlife. <i>Note 1: Progyny order form and agreement must be completed and sent to Progyny.</i> <i>Note 2: The Menopause & Midlife engagement fee is valid for 12 months upon member enrollment.</i> <i>Note 3: Groups enrolling in an All Copay medical plan cannot select this Menopause & Midlife program.</i> <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude | \$250.00 Per Participant |

Clinical Support - Engagement

| Program Name | Description / Selection | Fee \$ |
|------------------------------|---|--------|
| SmartShopper® Program | SmartShopper® is an engagement incentive program - part of the Blue Cross NC cost transparency tool. It pays members cash for shopping certain procedures and selecting a cost-effective provider. It cannot be combined with Specialty Care Shopper. <i>Note 1: Pricing levels are available for selection on the SmartShopper activation form.</i> <i>Note 2: SmartShopper Activation form must be completed and sent to Zelis.</i> <i>Note 3: Renewing groups will auto renew and do not need to submit an activation form at renewal. If groups need to confirm pricing they should refer to their existing 3 way agreement.</i> <i>Note 4: Not available to clients who purchase an All Copay medical plan.</i> <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude | |

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Clinical Support - Engagement *continued...*

| Program Name | Description / Selection | Fee \$ |
|--------------------------|--|-------------------------------|
| Signature Service | A high-touch concierge solution designed to provide expert member service support, education and engagement. A Signature Service Intake must be completed for program activation. <i>Note 1: Program is only available to groups with 500+ enrolled subscribers.</i> <i>Note 2: Groups who purchase EngageHealth do not need to select this program.</i> | |
| | <input type="checkbox"/> Shared <input checked="" type="checkbox"/> Exclude | \$0.98 Per Contract Per Month |

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|----------------------|---|-------------------------------|
| EngageHealth® | A personalized, holistic health advocacy program that combines our most intensive Nurse Support Program with our Signature Service Program for a simplified member experience. It includes: Signature Service; CM Post Discharge Call; High Touch Customer Care Management; Primary Nurse Model; Preadmission Call. Signature Service Intake must be completed for program activation.] <i>Note 1: Program is only available to groups with 500+ enrolled subscribers.</i> <i>Note 2: EngageHealth includes Signature Service Premium and Nurse Support Program. You do NOT need to select these programs on this form.</i> | |
| | <input type="checkbox"/> Shared Support <input checked="" type="checkbox"/> Exclude | \$6.92 Per Contract Per Month |

Pharmacy Support

| Program Name | Description / Selection | Fee \$ |
|---------------------------------|---|-----------------------------|
| GuidedHealth® Rx Program | Identifies drug therapy opportunities and engages doctors to improve care and lower costs using an analysis of pharmacy and medical data. <i>Note: All employer groups have access to the base package which includes programs such as overutilization, adherence and underutilization . Self-funded groups can purchase the option to access more programs in these categories.</i> | |
| | <input checked="" type="checkbox"/> Include <input type="checkbox"/> Exclude | \$0.10 Per Member Per Month |

Wellness Support

| Program Name | Description / Selection | Fee \$ |
|--|--|---|
| Eat Smart, Move More, Weigh Less® | An online 15-week weight management program with optional 6-month weight loss maintenance program. Program billed through claims, not as a care management fee. Participants have the option to complete Eat Smart, Move More, Weigh Less 2, a 12-week series that builds on strategies from and has the same financial structure as Eat Smart, Move More, Weigh Less. <i>Note 1: Selection of this program requires the selection of the Eat Smart Move More Weigh Less Campaign below.</i> <i>Note 2: Not available to groups who purchase the All Copay medical plan.</i> | |
| | <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude | \$245.00 Per Participant Per Class Series |

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Wellness Support *continued...*

| Program Name | Description / Selection | Fee \$ |
|--|---|--------------------------|
| Eat Smart Move More Weigh Less Weight Management Campaign | Program is run by Eat Smart, Move More, Weigh Less. Group must purchase Eat Smart, Move More, Weigh Less program above. There is no charge for the non-rewardable campaign, but it must be selected below. Campaign end date is month prior to policy term date. <input type="checkbox"/> Standard Campaign Only <input checked="" type="checkbox"/> Exclude Eligibility: <input type="checkbox"/> Subscriber <input type="checkbox"/> Subscriber + Spouse / Domestic Partner <input checked="" type="checkbox"/> 18+ Member | |
| Tobacco Cessation | Powered by Pivot Health Technologies, a quit tobacco use program that uses innovative technology and clinically-proven strategies to help reduce, and ultimately quit, all forms of tobacco. <i>Note: Fees billed through claims, not as a Care Management Fee.</i> <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude | \$415.00 Per Participant |
| Blue365® | An exclusive program that enables Blue Cross NC to offer members dynamic deals on a wide array of health and wellness products and services, family care, financial services and healthy travel. | |

Wellness Support - Engagement

| Program Name | Description / Selection | Fee \$ |
|-------------------------------------|---|-----------------------------|
| Wellness Engagement Program | Member engagement is an easy way for you to promote participation in our wellness program and reward employees when they complete certain activities. The next four selections should be reviewed collectively to determine best selections for your group: Standard Wellness Experience, Private Challenges, Wellness Rewards Packages, and Wellness Reward Options. | |
| Standard Wellness Experience | Make it fun and easy for members to engage in healthy activities and positive lifestyle changes either online or via mobile app through wellness challenges and missions, wellness tools, educational materials, and a health survey to gauge health status. Additional activities available below. <i>Note: Must include if selecting the Private Challenges or Wellness Rewards Packages.</i> <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude | \$0.17 Per Member Per Month |
| Private Challenges | A non-rewardable wellness activity which can be combined with the Standard Wellness Experience that allows employer groups to create custom challenges that provide social motivation for members to build healthy habits. <i>Note 1: Must select Standard Wellness Experience.</i> <i>Note 2: This program cannot be combined with any track under the Wellness Rewards Packages program.</i> <input type="checkbox"/> Include <input checked="" type="checkbox"/> Exclude | \$0.10 Per Member Per Month |

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Wellness Support - Engagement *continued...*

| Program Name | Description / Selection | Fee \$ |
|--|--|--------------------------------------|
| Wellness Rewards Packages | Once you select Standard Wellness Experience, you can also elect to reward certain members through a variety of incentives for completing the activities listed in the packages below, for an additional fee. First, choose your Wellness Track, select participant Eligibility, and Reward Option. Also, selection of any Wellness Track cannot be paired with Private Challenges <i>Note 1: Fees for tracks below are in addition to Standard Wellness Experience.</i> <i>Note 2: Fees for tracks are based on the eligible population selected below.</i> | |
| <input type="checkbox"/> | Track 1: Support Health Survey + Public Challenges + Quizzes + Skill-Building Missions + Stride | \$0.62 Per Eligible Member Per Month |
| <input type="checkbox"/> | Track 2 Motivate Annual Physical + Blue Connect Checklist + Blue Connect Registration Campaign + Contact Preferences Campaign + Diabetes Progress Report - A1C Campaign + Health Survey + My Pregnancy Engagement Campaign + Nurse Support (Case Management) Campaign + Nurse Support (Condition Care) Campaign + Public Challenges + Quizzes + Skill-Building Missions + Stride | \$0.84 Per Eligible Member Per Month |
| <input type="checkbox"/> | Track 3 Inspire Annual Physical + Blue Connect Checklist + Blue Connect Registration Campaign + Contact Preferences Campaign + Diabetes Progress Report - A1C Campaign + Flu Shot + Health Survey + My Pregnancy Engagement Campaign + Nurse Support (Case Management) Campaign + Nurse Support (Condition Care) Campaign + Private Challenges + Public Challenges + Quizzes + Skill-Building Missions + Stride | \$1.03 Per Eligible Member Per Month |
| <input checked="" type="checkbox"/> | Exclude | |
| Eligibility: <input type="checkbox"/> Subscriber <input type="checkbox"/> Subscriber + Spouse / Domestic Partner <input type="checkbox"/> 18+ Member | | |

| | |
|--|---|
| Wellness Reward Options | The group is responsible for paying incentives and gift card admin fees, if applicable. There is a \$0.05 per eligible member per month gift card fee. Select one method below. HRA and HSA reward options are available for groups with HealthEquity® through Blue Cross NC. Employer Reward option can be used for Premium Contributions, other Savings Account vendors, other employer rewards. Reporting will be provided. Points are included with Standard Wellness Experience and can also be used as a reward for Tracks above. |
| <input type="checkbox"/> Employer Reward <input type="checkbox"/> Gift Cards <input type="checkbox"/> HRA <input type="checkbox"/> HSA <input type="checkbox"/> Points | |

Rewardable Campaigns/Activities

These are standalone campaigns which are included for all groups and will end one month prior to the plan year end date. Groups have the option to offer member incentives on one or more activities for a total fee of \$0.10 per member per month, regardless how many are selected as rewardable. Group is also responsible for member incentives and gift card administration fees, if applicable. See below for opt in. If group has selected a Wellness Rewards track, these are not eligible for rewards.

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Wellness Support - Engagement *continued...*

| Program Name | Description / Selection | Fee \$ |
|---|---|--|
| Onboarding Campaign | <p>This bundle includes three activities that educate and engage members, as appropriate, for a better health plan experience. The activities include: Blue Cross NC Member Portal Registration: Participants are encouraged to register for Blue Cross NC Member Portal, if not already registered. Blue Cross NC Member Portal Checklist: Participants complete a checklist-type activity to help familiarize them with their health plan. Contact Preferences: Participants select their preference for receiving important information from their health plan.</p> <p>This bundle promotes the 3 activities above and will run automatically as a part of your plan. If you'd like to reward for the completion of those 3 activities, you may elect to do so below. Please note that if you chose to do so, you will be electing to reward the same amount for all 3 activities.</p> <p>Eligible rewardable activities will end one month prior to policy plan year end date. Blue Cross NC Member Portal Registration Campaign + Blue Cross NC Member Portal Checklist Campaign + Contact Preferences Campaign</p> | <p><input type="checkbox"/> Rewardable \$ _____</p> <p><input checked="" type="checkbox"/> Standard Campaign Only</p> <p>Eligibility: <input type="checkbox"/> Subscriber <input type="checkbox"/> Subscriber + Spouse / Domestic Partner <input checked="" type="checkbox"/> 18+ Member</p> |
| Nurse Support (Case Management) Campaign | <p>Eligible rewardable activities will end one month prior to policy plan year end date.</p> | <p><input type="checkbox"/> Rewardable \$ _____</p> <p><input checked="" type="checkbox"/> Standard Campaign Only</p> <p>Eligibility: <input type="checkbox"/> Subscriber <input type="checkbox"/> Subscriber + Spouse / Domestic Partner <input checked="" type="checkbox"/> 18+ Member</p> |
| Nurse Support (Condition Care) Campaign | <p>Encourages all eligible participants to engage in the Nurse Support Condition Care program. Program must be selected above to select the campaign. Eligible rewardable activities will end one month prior to policy plan year end date.</p> <p>Groups who exclude the Nurse Support Condition Care Program will be excluded from this campaign.</p> | <p><input type="checkbox"/> Rewardable \$ _____</p> <p><input checked="" type="checkbox"/> Standard Campaign Only</p> <p>Eligibility: <input type="checkbox"/> Subscriber <input type="checkbox"/> Subscriber + Spouse / Domestic Partner <input checked="" type="checkbox"/> 18+ Member</p> |
| Diabetes Progress Report - A1C Campaign | <p>Targets all participants with a diabetic care gap and encourages them to visit their doctor for their screening or test. Eligible rewardable activities will end one month prior to policy plan year end date.</p> | <p><input type="checkbox"/> Rewardable \$ _____</p> <p><input checked="" type="checkbox"/> Standard Campaign Only</p> <p>Eligibility: <input type="checkbox"/> Subscriber <input type="checkbox"/> Subscriber + Spouse / Domestic Partner <input checked="" type="checkbox"/> 18+ Member</p> |
| My Pregnancy Engagement Campaign | <p>Standard campaign includes a two-wave targeted member message via e-mail and direct mail. Optional rewardable activity for expecting members who complete a pregnancy risk survey in the My Pregnancy app. Eligible rewardable activities will end one month prior to policy plan year end date. For groups who exclude the My Pregnancy Program, they will be excluded from this campaign.</p> | <p><input type="checkbox"/> Rewardable \$ _____</p> <p><input checked="" type="checkbox"/> Standard Campaign Only</p> <p>Eligibility: <input type="checkbox"/> Subscriber <input type="checkbox"/> Subscriber + Spouse / Domestic Partner <input checked="" type="checkbox"/> 18+ Member</p> |
| Standalone Activity Reward Options | <p>Reward Options will be administered by Blue Cross NC. Select the method below. The group is responsible for paying incentives and gift card admin fees (\$1.75 per redeemed card), if selected.</p> | <p><input type="checkbox"/> Gift Cards <input type="checkbox"/> HRA <input type="checkbox"/> HSA</p> |

County of Chatham

Important contractual document. Please retain for your records

For effective dates beginning July 2026.

Revision: 2/13/2026

Wellness Support - Engagement *continued...*

| Program Name | Description / Selection | Fee \$ |
|--|--|-----------------------------|
| Campaign Cost Program | Groups have the option to offer member incentives on one or more activities for a single per member per month fee. Group is also responsible for member incentives and gift card administration fees, if applicable. See below for opt in. All campaigns will end one month prior to the plan year end date. | |
| | Include <input checked="" type="checkbox"/> Exclude | \$0.10 Per Member Per Month |
| Emergency Room Education Campaign | Educates targeted members 18+ and subscribers of children <18 on how to save time and money by highlighting alternatives to the Emergency Room. <input checked="" type="checkbox"/> Standard Campaign Only | |

Other Considerations

County of Chatham

Important contractual document. Please retain for your records*For effective dates beginning July 2026.**Revision: 2/13/2026*

Statement of Understanding

1. This document makes up a part of your agreement with Blue Cross and Blue Shield of North Carolina (Blue Cross NC). Please retain for your records.
2. This Program Section Chart replaces any previously issued Program Selection Charts.
3. Please refer to the full rate exhibits for complete list of all rating assumptions and caveats.
4. Member Portal will only display programs purchased.
5. Blue Cross NC reserves the right to discontinue or change the programs within this Program Selection Chart at any time, in accordance with the Administrative Services Agreement (ASA).
6. Fees are effective as of the contract renewal date stated on this document, and are subject to change during the year.
7. Any program listed with a Per Member Per Month or Per Contract Per Month fixed fee will be itemized separately and billed through the monthly billing statement. All other charges will remain on the statement of account.
8. Please consult with your tax adviser and attorney to ensure the wellness plan design and any rewards comply with all applicable laws and regulations.
9. Employer is responsible for designing and funding the rewards.
10. Customized reporting may be available for an additional fee.
11. Blue365® offers access to savings on items that members may purchase directly from independent vendors, which are different from items that are covered under the policies with Blue Cross NC. Blue Cross and Blue Shield Association (BCBSA) may receive payments from Blue365 vendors. Neither Blue Cross NC nor BCBSA recommends, endorses, warrants or guarantees any specific Blue365 vendor or item.
12. Blue Cross NC contracts with independent companies to provide supplemental benefits and/or programs. Those companies are responsible for the services they provide. They do not provide Blue Cross or Blue Shield products or services.

By signing below, I agree that this document accurately reflects (1) the programs and features that have been elected by the Plan Administrator, and (2) any additional fees that will be charged under your agreement with Blue Cross NC for the above-noted contract year. Please consult with your tax adviser and/or attorney to ensure that your wellness and rewards programs comply with all applicable laws and regulations.

Plan Administrator _____ (print)

Plan Administrator Signature _____ Date _____