



HBAA HEALTH PLAN OVERVIEW

Rates effective 8/1/26–7/31/27

MEDICAL — BLUE CROSS BLUE SHIELD OF ALABAMA

BENEFITS OVERVIEW	HIGH PLAN	LOW PLAN
Calendar Year Deductible	\$1,000 single / \$2,000 family	\$5,000 single / \$10,000 family
Out-of-Pocket Maximum	\$2,000 single / \$4,000 family	\$7,000 single / \$14,000 family
Primary Care	\$35 Copay	\$35 Copay
Specialist	\$50 Copay	\$50 Copay
In-Network Coinsurance	80% after deductible	80% after deductible

MONTHLY RATES — HIGH PLAN				MONTHLY RATES — LOW PLAN	
COVERAGE TIER	YOUNGER THAN 40	40 - 49	50 OR OLDER	COVERAGE TIER	ALL-AGES
EE Only	\$714.15	\$730.57	\$766.25	EE Only	\$680.44
EE + Spouse	\$1,408.05	\$1,440.03	\$1,512.77	EE + Spouse	\$1,341.87
EE + Children	\$1,312.76	\$1,337.27	\$1,371.66	EE + Children	\$1,244.17
Family	\$2,004.79	\$2,038.87	\$2,113.31	Family	\$1,905.60

DENTAL — BLUE CROSS BLUE SHIELD OF ALABAMA

BENEFITS OVERVIEW	HIGH PLAN	LOW PLAN
Annual Deductible	\$50 single / \$150 family	\$50 single / \$150 family
Annual Maximum per Individual	\$1,500	\$750
Lifetime Orthodontia Maximum (19 and under)	\$1,000	Not Covered

MONTHLY RATES		
Employee Only	\$31.22	\$26.68
Employee + Spouse	\$61.47	\$52.37
Employee + Children	\$81.06	\$68.65
Family	\$121.11	\$103.09

VISION — VSP

BENEFITS OVERVIEW	IN-NETWORK	OUT-OF-NETWORK
Eye Exam	\$20 Copay	\$45 Allowance
Medically Necessary	\$20 Copay	\$210 Allowance
Elective	\$130 Allowance	\$105 Allowance
Contact Lens Evaluation & Fitting	Up to \$60 Copay	Not Covered
Frame Allowance	\$200 Allowance + 20% off balance	\$70 Allowance

MONTHLY RATES	
Employee Only	\$9.37
Employee + Spouse	\$13.20
Employee + Children	\$13.41
Family	\$19.78



www.BuildersHealthTrust.com



SCAN ME



HBAA@cagroup.com



205-874-1226



FREQUENTLY ASKED QUESTIONS

BlueCard PPO: The BlueCard PPO program allows you freedom of choice when selecting a doctor, outpatient facility, or hospital, even outside of Alabama. This program allows members to access the Preferred Provider Organization {PPO} networks available in each state that participates in the BlueCard PPO Program. When a member receives services from a PPO provider, these services are considered in-network services.

Who is Eligible for the HBAA Health Plan?

HBAA members who are directly involved in the home building trade are eligible for the HBAA Health Plan. For example, home builders, sub-contractors, or material suppliers would be eligible for the plan. Members must have at least one common law employee to be eligible for the HBAA Health Plan. Sole proprietors without at least one common law employee are not eligible to participate in the plan. Please contact CAC Group with additional questions: 205-874-1226.

Participation and Eligibility:

Under 50 employees - There is no requirement for offering coverage to all employees, nor is there a set amount of money that an employer must contribute toward health coverage.

50 or more employees - An employer must offer coverage to "substantially all" of their employees, meaning a maximum of 5 employees not offered coverage. An employer must offer a plan at a cost that is no more than 9.96% of their employee's take-home income.

What if I'm already offering a group health plan to my employees?

Open enrollment is a qualifying event for your company to make a change. The HBAA plan's effective date is August 1, and our open enrollment is typically held in July. Once enrolled, we will notify BCBS of the change and there will not be a gap in coverage.

What is secondary insurance?

Secondary insurance pays most deductibles and out-of-pocket expenses up to the policy limit after your primary medical plan has paid its covered expenses. For the HBAA High Plan, secondary coverage pays a total of \$5,000 toward your deductible and out-of-pocket maximum, meaning you that you likely would only pay \$2,000 toward the out-of-pocket maximum, outside of copays. To receive full benefits, be sure to give your doctor both your primary insurance card and your secondary insurance card.

When and how do I enroll?

The HBAA Health Plan renews August 1, and our Open Enrollment is held in June/July each year. Open enrollment is the one time per year we are allowed to on-board new members to the plans. Prior to enrollment, you will need to complete the Participating Employer Agreement found at www.BuildersHealthTrust.com {Step 3}. Once complete, please submit to scarlisle@cacgroup.com. After the agreement is executed, you will receive an email invitation to create a login to the SIMON portal. You will be able to make additions, terminations, and changes online.

What if an employee who elected the benefit gets fired or quits? How is the benefit offered to new hires?

Members will be responsible for submitting information of any participating and/or eligible employee{s} who were terminated or hired each month. This will ensure each group is billed the appropriate amount each pay period. These updates will be submitted online in the SIMON portal.

How do I pay my premium?

Each member company will need to register via the invitation email for the SIMON portal. Employers are responsible for remitting payment for their employees who participate on the plan. Invoices will be available on the 1st of each month. Payment will be due on the 15th and late on the 20th. After the second late payment, a \$100 late fee will be assessed.



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