

CUSTOMER SERVICE

Commerce Benefits Group's customer service phone bank is staffed with trained *Customer Service Specialists*. Our customer service is tailored to the individual needs of our clients. Commerce Benefits Group is dedicated to immediate response to customer questions by answering all calls directly. We believe that you deserve to speak with real people and not be passed through voice mail, which leads to delayed response. Our operators will personally forward your call to our Customer Service Department where you will be served promptly in the order that calls are received. Our call abandonment rate is negligible.

MANAGEMENT REPORTS

Our standard service includes the distribution of periodic management reports. This reporting package includes, but is not limited to, Aggregate Analysis Report, Claims Summary (Month/YTD), Large Claims Review, Paid Claims Summary and Monthly Claims Register. Other reports that are available upon request include Procedure Code by Zip, Diagnosis Summary, Plan Payment by Benefits, Length of Stay, Confinement Analysis, Non-covered Charges Summary, Benefits by Claimant, Paid Claims by Group, Major Diagnosis, Claims by Deductible, Census by Summary, Census by Detail, etc.

PRESCRIPTION DRUG PROGRAMS

We provide prescription drug benefits tailored to meet the needs of our clients. Commerce Benefits Group has secured contractual agreements with select vendors that maintain highly competitive net costs and access to practically all of the national pharmacy chain stores and countless regional and local pharmacies. Our Prescription Drug Program also includes a Mail Order provision for maintenance drugs up to a 90-day supply.

COBRA ADMINISTRATION

Commerce Benefits Group also provides comprehensive COBRA administration. Our COBRA administration includes all services from eligibility confirmation to enrollment periods, all employee notifications, premium calculations, accurate billing, tracking secondary qualifying events, late payment and termination notices, etc.

HIPAA ADMINISTRATION

The Health Insurance Portability and Accountability Act of 1996 is an employer mandated law. HIPAA restricts a plan's pre-existing condition limitations by reducing those limitations by the amount of an employee's or dependent's "creditable coverage" provided through prior coverage. Generally, there cannot be more than a 63 day break in coverage to receive prior coverage credit (more in some states). Creditable coverage is verified by issuing Certificates on a timely basis. Commerce Benefits Group will track all creditable prior coverage, issue timely certificates and record all related data in our system for future verification.