



An Amwins Company

CoPower SELECT™

PRODUCT & RATE GUIDE

For plans effective January 1, 2025 – December 31, 2025

Landmark: Chiropractic & Acupuncture

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Landmark: Chiropractic & Acupuncture

Did You Know?

Injured workers with similar injuries are 28 times less likely to have spinal surgery if the first point of contact is a Doctor of Chiropractic (DC) rather than a surgeon (MD).¹

¹ Keeney BJ; Fulton-Kehoe D; Turner JA; Wickizer TM; Chan KC; Franklin GM; Early Predictors of Lumbar Spinal Surgery After Occupational Back Injury; Results from a Prospective Study of Workers in Washington State. Spine, May 2013.

Stand out from the crowd by choosing to offer Landmark's fully insured chiropractic and acupuncture benefit plans through CoPower. Since 1985, Landmark has been providing affordable access to a high-quality network of over 1,800 providers. As healthcare costs continue to rise, many employers are recognizing the challenges associated with maintaining quality health benefit plans that support productivity and foster healthy, happy employees.

Chiropractic and acupuncture are the lowest cost alternatives for treating physical pain and discomfort, and employees return to work more quickly and/or continue treatment while staying on the job.

Landmark's Expanded Plans offer open access to providers, allowing members to be treated not only for acute conditions caused by injury or illness, but also for preventive, wellness and on-going maintenance care. Treatment never requires preauthorization and are not reviewed for medical necessity.

LANDMARK PLANS

| Benefit Plans | 2-50 | 51-199 |
|--|--------------|---------------------|
| Office Visit Copay Paid to provider at time of service | \$15 or \$20 | \$10, \$15, or \$20 |
| Office Visits Available Annual maximum per plan year | 20 | 20 or 30 |
| Durable Medical Equipment Annual maximum per plan year | \$50 | \$50 |
| X-Rays Annual maximum per plan year | \$75 | \$75 |

PROGRAM GUIDELINES

| | |
|--------------------------------|--|
| Group Eligibility | 2-199 enrolled employees, plan available based on group size. Groups currently enrolled with Landmark are not eligible for administration through CoPower. |
| Eligible Employees | Employees currently enrolled on a group's medical plan |
| Employer Contribution | Minimum 50% for employer paid |
| Participation | 100% enrollees with medical participation; must reside or work in CA |
| Carve-outs | Medical carve-outs only with minimum 5 enrolled. |
| Out of Network Benefits | Excluded, except for emergencies |

PLAN BENEFITS

| | |
|---|--|
| Covered Chiropractic Services <ul style="list-style-type: none"> • Examinations • Manipulation • Conjunctive Physiotherapy • X-Rays | Services within the scope of chiropractic care that are supportive or necessary to help patients achieve the physical state enjoyed before an injury or illness, and are generally furnished for the diagnosis and/or treatment of a neuromusculoskeletal condition associated with an injury or illness |
| Covered Acupuncture Services <ul style="list-style-type: none"> • Acupuncture • Electro-acupuncture • Moxibustion • Cupping • Acupressure, only when acupuncture is contraindicated | Services within the scope of acupuncture care that are for the treatment of neuromusculoskeletal pain resulting from an injury or illness, or for the treatment of uncomplicated asthma (that which is not effected by another condition or disease), allergies, post-operative or chemotherapy nausea and vomiting, nausea of pregnancy, post-operative (including dental) pain, fibromyalgia, headaches, and low-back pain |

Rates

All rates are based on number of enrolled employees.*

| LANDMARK PLAN RATES | | | | | 2-24 | | | | 25-50 | | | | 51-100 | | | | |
|------------------------------|--------------|----------|-------|--------|---------|---------|---------|---------|--------|---------|---------|---------|---------|---------|---------|---------|---------|
| Plan | Region | Type | Copay | Visits | EE | ES | EC | FA | EE | ES | EC | FA | EE | ES | EC | FA | |
| Chiropractic Only | Bay Area | Expanded | \$10 | 20 | | | | | | | | | \$6.02 | \$12.04 | \$9.18 | \$17.48 | |
| | | | | 30 | | | | | | | | | | | \$6.92 | \$13.87 | \$10.56 |
| | | | \$15 | 20 | \$4.98 | \$9.95 | \$7.68 | \$14.42 | \$3.92 | \$7.82 | \$6.07 | \$11.33 | \$3.82 | \$7.68 | \$5.92 | \$11.11 | |
| | | | | 30 | | | | | | | | | | | \$4.41 | \$8.82 | \$6.79 |
| | | | \$20 | 20 | \$4.24 | \$8.45 | \$6.54 | \$12.25 | \$3.32 | \$6.65 | \$5.15 | \$9.65 | \$3.27 | \$6.51 | \$5.02 | \$9.46 | |
| | | | | 30 | | | | | | | | | | | \$3.80 | \$7.57 | \$5.85 |
| | Non-Bay Area | Expanded | \$10 | 20 | | | | | | | | | | \$5.52 | \$11.08 | \$8.45 | \$16.07 |
| | | | | 30 | | | | | | | | | | | \$6.38 | \$12.74 | \$9.72 |
| | | | \$15 | 20 | \$4.57 | \$9.16 | \$7.06 | \$13.28 | \$3.59 | \$7.18 | \$5.57 | \$10.43 | \$3.50 | \$7.06 | \$5.46 | \$10.22 | |
| | | | | 30 | | | | | | | | | | | \$4.05 | \$8.13 | \$6.23 |
| | | | \$20 | 20 | \$3.90 | \$7.76 | \$6.01 | \$11.28 | \$3.06 | \$6.12 | \$4.74 | \$8.89 | \$3.02 | \$5.98 | \$4.64 | \$8.70 | |
| | | | | 30 | | | | | | | | | | | \$3.48 | \$6.98 | \$5.38 |
| Chiropractic and Acupuncture | Bay Area | Expanded | \$10 | 20 | | | | | | | | | \$12.24 | \$24.49 | \$18.50 | \$35.51 | |
| | | | | 30 | | | | | | | | | | | \$14.11 | \$28.17 | \$21.24 |
| | | | \$15 | 20 | \$10.14 | \$20.27 | \$15.44 | \$29.43 | \$7.96 | \$15.95 | \$12.11 | \$23.12 | \$7.63 | \$15.29 | \$11.63 | \$22.20 | |
| | | | | 30 | | | | | | | | | | | \$8.82 | \$17.66 | \$13.37 |
| | | | \$20 | 20 | \$8.55 | \$17.10 | \$13.00 | \$24.78 | \$6.71 | \$13.41 | \$10.22 | \$19.46 | \$6.42 | \$12.90 | \$9.81 | \$18.68 | |
| | | | | 30 | | | | | | | | | | | \$7.48 | \$14.90 | \$11.31 |
| | Non-Bay Area | Expanded | \$10 | 20 | | | | | | | | | | \$10.61 | \$21.18 | \$16.04 | \$30.71 |
| | | | | 30 | | | | | | | | | | | \$11.96 | \$23.87 | \$18.05 |
| | | | \$15 | 20 | \$8.63 | \$17.25 | \$13.16 | \$24.99 | \$6.76 | \$13.54 | \$10.32 | \$19.63 | \$6.63 | \$13.28 | \$10.12 | \$19.24 | |
| | | | | 30 | | | | | | | | | | | \$7.49 | \$15.01 | \$11.38 |
| | | | \$20 | 20 | \$7.27 | \$14.55 | \$11.12 | \$21.11 | \$5.72 | \$11.40 | \$8.72 | \$16.56 | \$5.60 | \$11.18 | \$8.54 | \$16.24 | |
| | | | | 30 | | | | | | | | | | | \$6.35 | \$12.69 | \$9.67 |

*FOR GROUP SIZES 101-199, PLEASE CONTACT YOUR SALES REP FOR LANDMARK RATES.

LANDMARK RATING REGIONS BY COUNTY

| | |
|---------------------|---|
| Bay Area | Alameda, Contra Costa, Marin, Santa Clara, San Francisco, San Mateo |
| Non-Bay Area | All CA counties not included in the Bay Area rating area |

Chiropractic & Acupuncture Voluntary Plans

Plan Benefits: Our chiropractic and acupuncture benefit plans have no utilization management and encompass both maintenance and wellness care for chronic conditions as well as treatment for acute illness or injuries. Pre-authorization is not required and utilization is not reviewed.

- No Medical carve-out
- Employer contribution is always 0 % (100 % employee paid).
- There is no single plan for voluntary that does Chiropractic and Acupuncture. Instead, an employee chooses to enroll on one or both voluntary plans. The only requirement from Landmark is there are minimum 2 employees enrolled on a voluntary chiro and voluntary acupuncture plan for an employer to offer both plans for voluntary.
- Note: An employer can choose to offer more than one Chiropractic voluntary plan, as long as 2 minimum employees are enrolled on each plan.

LANDMARK PLANS

| Benefit Plans | Chiropractic Access to our full panel of chiropractic providers | Acupuncture Access to our full panel of acupuncture providers |
|--|--|--|
| Office Visit Copay Paid to provider at time of service | \$25 | \$35 |
| Office Visits Available Annual maximum per plan year | 10, 15, or 20 | 10, 15, or 20 Annual Visits |
| Emergency Copay Annual maximum per plan year | \$25 | \$35 |
| X-Rays Annual maximum per plan year | \$75 | NA |

Rates

| Group Voluntary CHIROPRACTIC Plans and Monthly Rates | | | | | | |
|--|------------------------|----------------|-------------------|----------------------------|----------------|-------------------|
| | Bay Area Monthly Rates | | | Non-Bay Area Monthly Rates | | |
| Office Visits/Copayments | Employee Only | Employee + One | Employee + Family | Employee Only | Employee + One | Employee + Family |
| 10 visits/\$25 copay | \$35.78 | \$67.98 | \$103.75 | \$20.44 | \$38.85 | \$59.27 |
| 15 visits/\$25 copay | \$54.50 | \$103.56 | \$158.06 | \$27.26 | \$51.77 | \$79.03 |
| 20 visits/\$25 copay | \$71.55 | \$135.92 | \$207.46 | \$34.06 | \$64.73 | \$98.80 |

| Group Voluntary ACUPUNCTURE Plans and Monthly Rates | | | | | | |
|---|------------------------|----------------|-------------------|----------------------------|----------------|-------------------|
| | Bay Area Monthly Rates | | | Non-Bay Area Monthly Rates | | |
| Office Visits/Copayments | Employee Only | Employee + One | Employee + Family | Employee Only | Employee + One | Employee + Family |
| 10 visits/\$35 copay | \$47.69 | \$90.62 | \$138.31 | \$30.67 | \$58.25 | \$88.91 |
| 15 visits/\$35 copay | \$71.55 | \$135.92 | \$207.46 | \$46.00 | \$87.40 | \$133.39 |
| 20 visits/\$35 copay | \$95.38 | \$181.22 | \$276.60 | \$63.03 | \$119.75 | \$182.78 |

Underwriting Requirements:

1. Enrolled members must live or work in the Landmark service area; the state of California.
2. Enrolled members must have a major medical plan in-place to be eligible.
3. Employee and his/her dependents must enroll in the same plan if more than one plan is offered
4. More than one plan may be offered to a group, but a minimum of two employees must enroll per plan.



Enrollment Checklist

- CoPower SELECT Employer Application
- Enrolling employees may:
 - Use the CoPower Complete Census (All Carriers), **OR**
 - Complete the CoPower Employee Enrollment/Change Form - All Plans
- CoPower Producer Agreement (First CoPower group only)
- Current medical bill
- Company check for first month's coverage made payable to CoPower
- For carve-out groups: Designate medical plan type, and provide bill showing all enrollees on the designated plan.

Note: No DE-9C quarterly wage statement required.

Plan Administration

CoPower

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Santa Ana, CA 92705

T: 888.920.2322

E: copower.sales@amwins.com

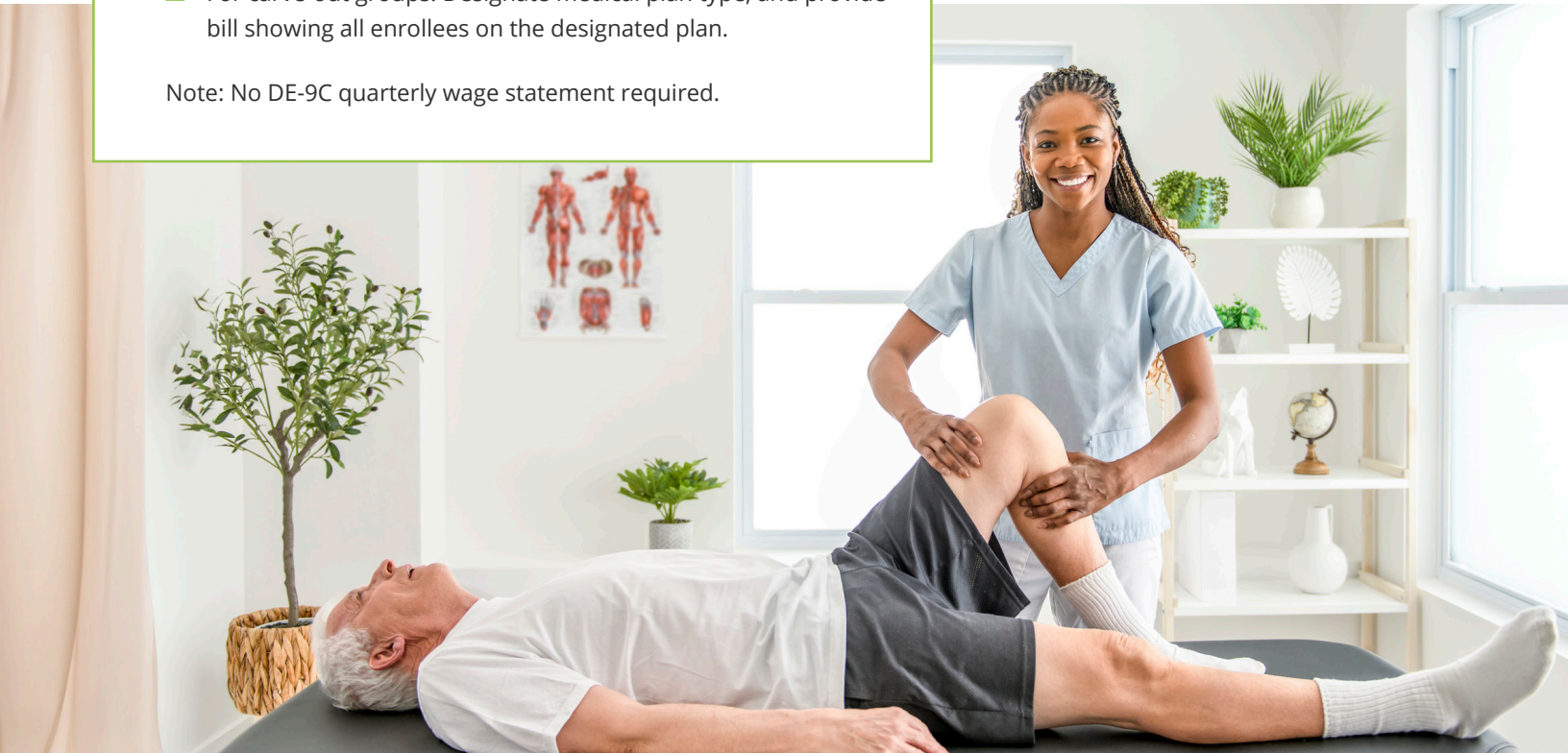
www.copower.com

Plan Administration:

Landmark

T: 800.298.4875

www.LHP-CA.com



While the information provided in this guide is believed to be accurate as of the print date, it is subject to change without notice. For the most up-to-date rates and information, contact CoPower. The benefit information contained in this booklet is summary in nature. It does not include all services, limitations or exclusions. Please refer to the carrier's Evidence of Coverage or Certificate of Insurance documents for terms and conditions of coverage.