

# health options plus

## A Health Assurance Plan

A Whole New Way  
of Thinking about  
Healthcare Benefits



Innovative Approach to  
Self-Funded Group Health Plans

Designed to

Reduce Costs  
Lower Risks  
Improve Health

**ARG** ALLIED RISK  
GROUP INC.

Mine ■ Manage ■ Mitigate

Administered by IMA, Inc.

Traditionally, when employers provide group health insurance benefits, employees receive little more than an insurance policy that pays certain medical expenses in the event of illness or injury. The so-called "health plan" is really nothing more than a process of treatment, claims, and payments. *Medical insurance is not a health plan.* Health Options Plus™ is not simply another insurance product, it is a comprehensive and integrated **Health Assurance Plan** that is designed to do what a health plan should do—keep employees healthy and lower health care costs for everyone.



## Health **Assurance** The Next-Generation

It is time to return to the essence of a health care plan — **Keep Our People Healthy.** That is the primary mission of Health Options Plus™.

The Health Options Plus™ Health Assurance Plan has been developed to integrate primary and specialist care, acute and chronic care with medication management and a comprehensive prevention program. This integration proactively identifies and works with employees and their families on an individual basis to help them achieve *More Good Years!\**



**Health Options Plus™** provides individualized concierge health care services to all employees and is focused on

- **Prevention**
- **Early Detection**
- **Care Management**

A whole new way of thinking about self-funded health plans. Based upon proven clinical and actuarial evidence, the plan designs are structured to provide comprehensive Affordable Care Act compliant health care services including coverage for Essential Health Benefits.

As with all self-funded health plans the employer, not an insurance company, bears the risk for paying claims. Stop-Loss insurance is used to limit the employer's risk so that **the maximum amount that an employer could be required to pay is always known in advance.**

A Health Option Plus™ plan is the employer's own plan, therefore, the amount paid by employers and employees does not include the taxes, fees and high administrative costs that are contained in fully insured plans. **An employer's total costs will typically be 10-30% lower than fully insured plans.**

*What really sets our plans apart from other self-funded plans is that employees are rewarded for staying healthy and helping keep health care costs low.*

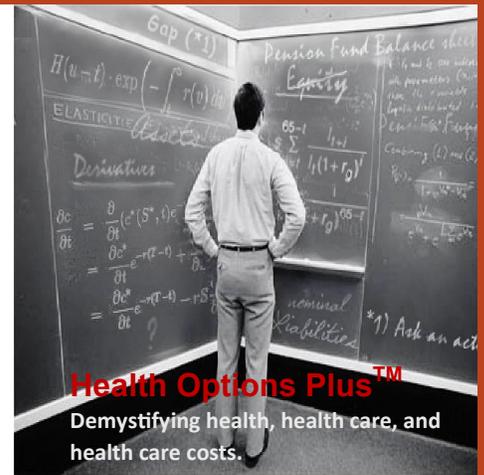
“ **Innovation** is the **Crossroads** between an **Observation** of what is and a **Vision** of what could be. ”

\*\*More Good Years™ is a registered trademark of US Preventive Medicine, Inc.

# What you don't **Know** can really cost you

Each year at renewal time employers are faced with rate increases that easily go into double digits. The typical explanation is that claims were higher and medical costs increased. But, whose claims? The employer's, or the insurance companies' entire pool of insured lives? Insurance companies have an unfair advantage over employers. They have data and data is power. The employer's lack of data makes it impossible to effectively bargain for a fair and appropriate premium rate. Most small employers don't receive any claims data from their insurance company. Larger employers receive only the information the insurance companies choose to provide. Many receive data and don't know how to interpret or use it.

**The right data in the right hands is critical to controlling costs year after year.**



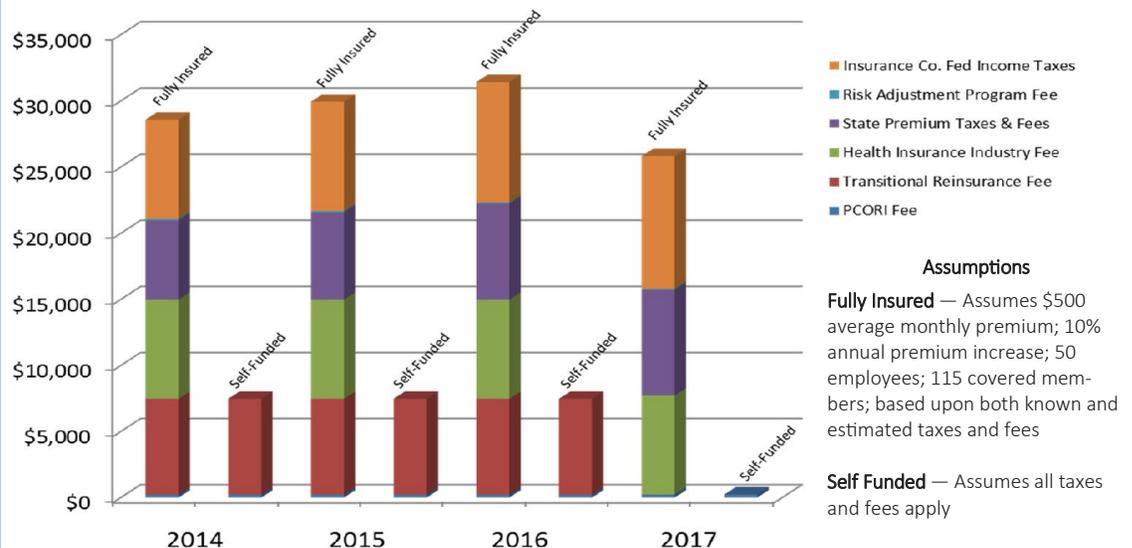
**MINE** Data Mining is essential to managing health care costs. We mine data from numerous sources in a HIPPA compliant manner. Data is collected regarding all claims and prescriptions and analyzed through algorithms and predictive modeling system to identify health risks and expenses **before they occur**. This data is essential to an employer's ability to make appropriate benefit plan decisions in future years.

**MANAGE** Health care and health care costs can only be managed by those of us who understand health care, and by those who have an incentive to stay healthy—employees! Health care management should not be confused with managed care. Employees remain free to make their own health care decisions with the resources we provide, including, access to a care management team of health coaches, registered nurses, and physicians, online and smartphone enabled information and monitoring systems, and access to Centers of Excellence at the top hospitals and medical facilities in the country.

**MITIGATE** Mitigation is the process of lessening the impact of something unpleasant—such as health care costs. Our risk mitigation model is premised in a sound understanding of what services are necessary and what those services should cost. All provider claims are scrubbed through a three tier review process prior to payment and in many circumstances they are paid at rates substantially below the amount billed. In other circumstances our consulting physicians will intervene to pre-negotiate the scope and cost of services. Mitigation is not about denying services it is all about paying the right price for the right care.



**As a result of new fees and taxes imposed under the Affordable Care Act, over the next four years an employer with 50 employees will save about \$93,115 in taxes and fees alone by self-funding health care costs.**





INNOVATIVE THINKING ■ COLLECTIVE WISDOM

**Health Options Plus™** is made available through the joint efforts of several firms working together to provide clients with best of class services. These firms have integrated systems and protocols to provide self-funded employers with a seamless comprehensive Health Assurance Plan that matches or exceeds what can be expected from a fully insured plan—at a fraction of the cost and with improved health and productivity for employees and their families.

**IMA, Inc.**, Bossier City, LA is a Third Party Administrator licensed in all fifty states that has for over 30 years assisted employers nationally in the design and administration of self-funded health plans. [www.IMALA.com](http://www.IMALA.com)

**Allied Risk Group, Inc.**, Roswell, GA is a national employee benefits, executive compensation and risk management firm that brings together legal, actuarial and financial professionals to design plans that help clients recruit, reward and retain employees. [www.AlliedRiskGroup.com](http://www.AlliedRiskGroup.com)

**Southern Scripts, Inc.**, Natchitoches, LA is a national Pharmacy Benefits Manger owned and managed by pharmacists who understand prescription pricing and the importance of medication management in self-funded health plans. [www.SouthernScripts.net](http://www.SouthernScripts.net)

**US Preventive Medicine, Inc.**, Jacksonville, FL is widely regarded as one of the country's foremost authorities and providers of workplace prevention and disease management programs and is the developer of The Prevention Plan™ and Macaw™ smartphone application. [www.USPM.com](http://www.USPM.com)

**HealthcarePays, Inc.**, Powhatan, VA is revolutionizing the healthcare payment system by creating transparency in health care pricing, payments and reporting. These systems are designed to help employers eliminate the nearly \$654 billion of estimated fraud and waste in the healthcare system.

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