

PLANS URCE

Spend less time managing employee benefits

Automate and simplify every aspect of your benefits program with PlanSource

Today's Speakers



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Product Marketing Manager
PlanSource



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Principal & Consulting Actuary
Milliman



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Senior Product Manager
PlanSource

TODAY'S AGENDA

Importance of the Benefit Hierarchy

Difference Between Individual vs Aggregate Claims Models

Live Interview with Milliman

DecisionIQ Demo

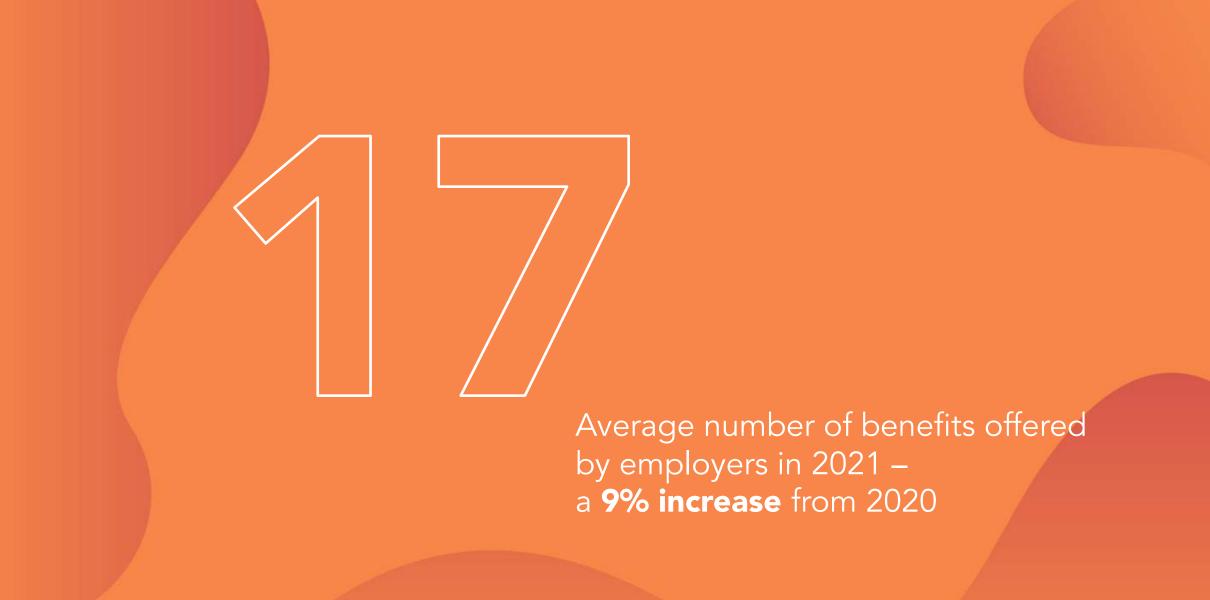
Q&A





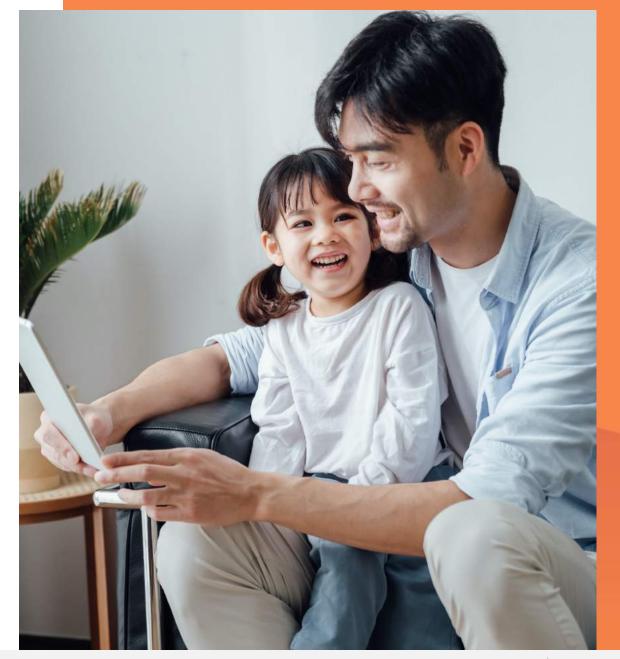


Of large employers believe **voluntary benefits** will be **more important** to their total rewards strategy going forward



EMPLOYEES WANT VOLUNTARY BENEFITS AND EMPLOYERS ARE LISTENING

It takes more than just compensation and traditional benefits to attract and retain talent. Employees are looking for additional perks, such as flexible work schedules or mental health resources that increase their satisfaction.



AUDIENCE FEEDBACK

How many of your employees take advantage of the perk benefits you offer?



SO WHY AREN'T MY EMPLOYEES ENROLLING IN THESE BENEFITS?

Voluntary and perk benefits are often employee paid – but if their core benefits are costing them too much, employees aren't able to include the benefits they really want. In the hierarchy of benefits, employees have to have their core benefits covered before they will consider other tiers.

PERK BENEFITS

Asset protection
Wealth
Lifestyle planning
Health

VOLUNTARY BENEFITS

Life
Disability
Benefit Accts
AD&D
Work Related Accident

CORE BENEFITS

Medical Dental Vision



HOW DOES DECISION SUPPORT HELP?



DRIVES
AWARENESS TO
NEW AND
UNIQUE PLANS



MATCHES
EMPLOYEES WITH
THEIR BEST-FIT
PLANS



INCREASES
UNDERSTANDING
OF BENEFIT
OPTIONS
AVAILABLE



PREMIUM COSTS

AUDIENCE FEEDBACK

What kind of decision support do you currently offer your employees?



Different Calculation Models

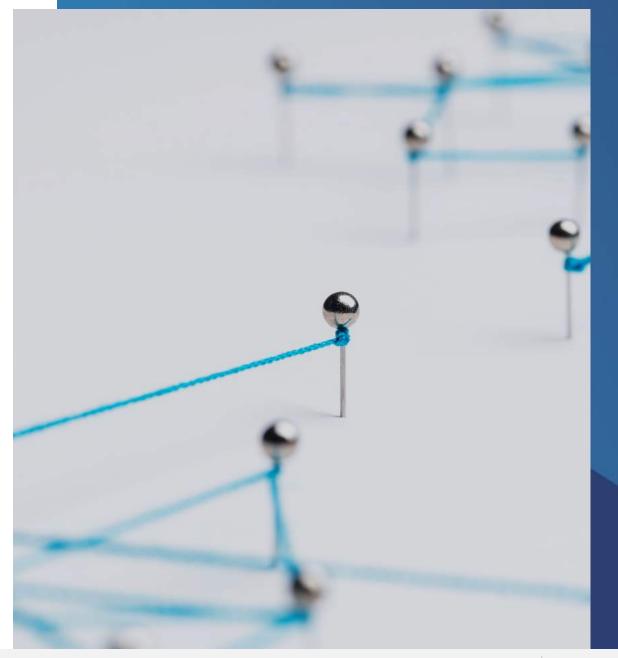
INDIVIDUAL CLAIMS MODEL

Only using the employee's personal past benefit plan and spend data to provide plan recommendations – only adjusting for chronic conditions and price inflation



AGGREGATE CLAIMS MODEL

With this approach the employee is matched by age, gender, and location to determine a cost estimate. Additionally, they can provide prescription and chronic condition information to personalize it.



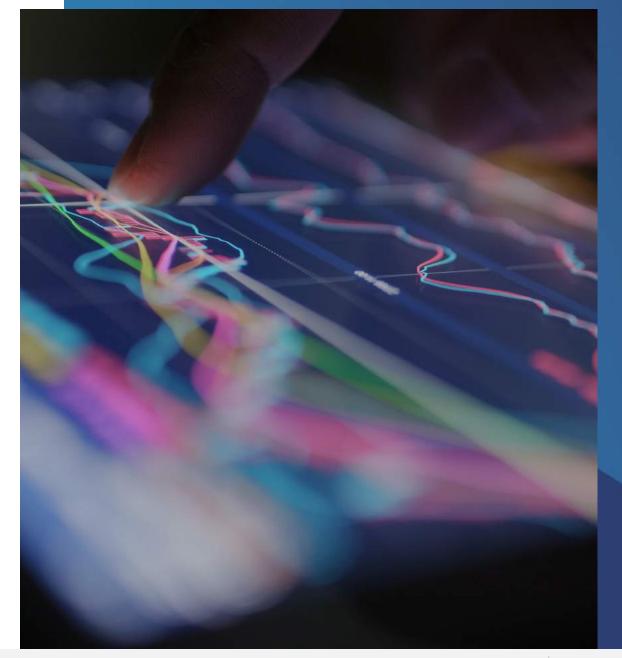
WHO IS MILLIMAN?

Milliman is among the world's largest providers of actuarial services focused on insurance and healthcare and their utilization and claims cost data models are considered the gold standard in the industry.



THE MILLIMAN DATA SET

Includes 100 million local cost benchmarks based on family demographics, plan design, and expected utilization. That's data on about 1 in 3 Americans.





Can you further explain the difference between individual claims versus aggregate claims approach?

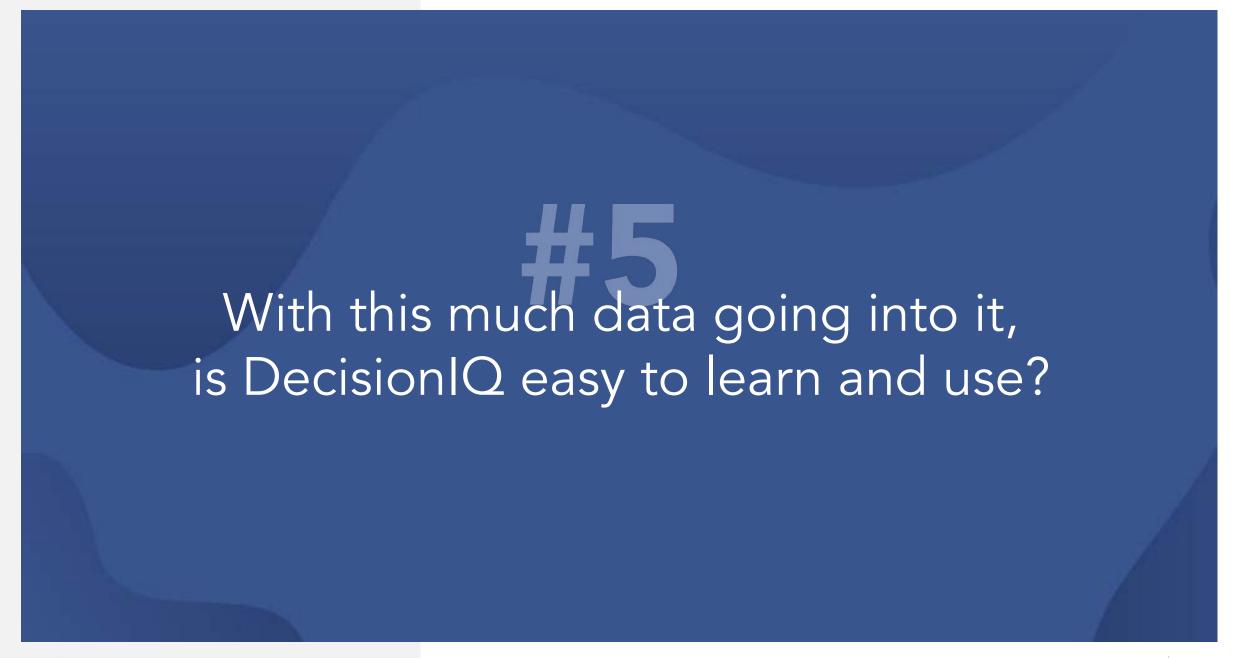
AUDIENCE FEEDBACK

Do your employees feel their benefits are affordable?

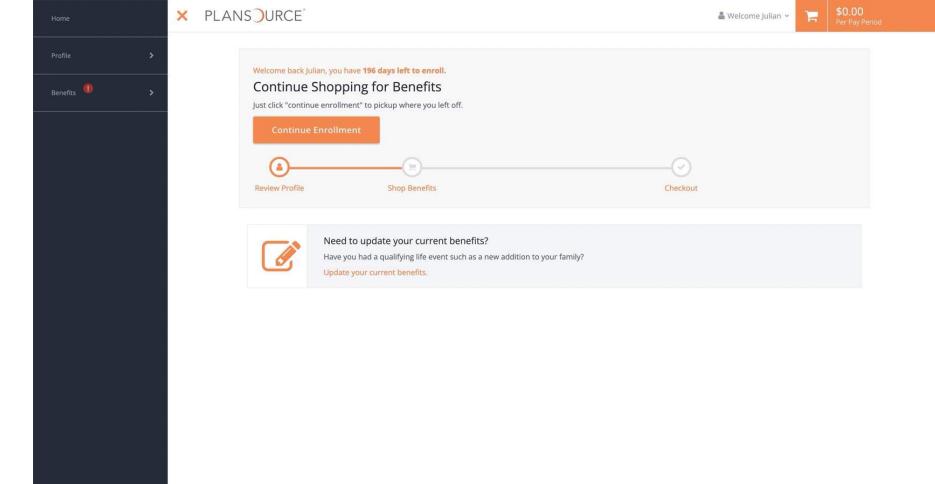




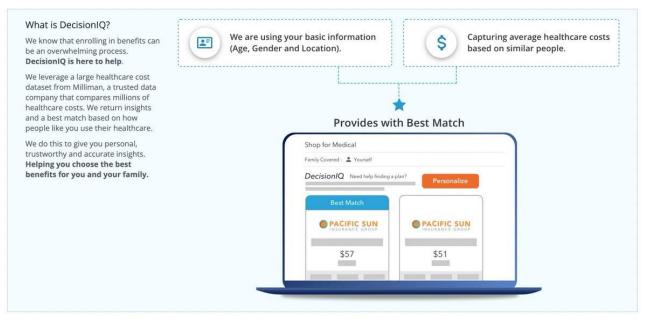












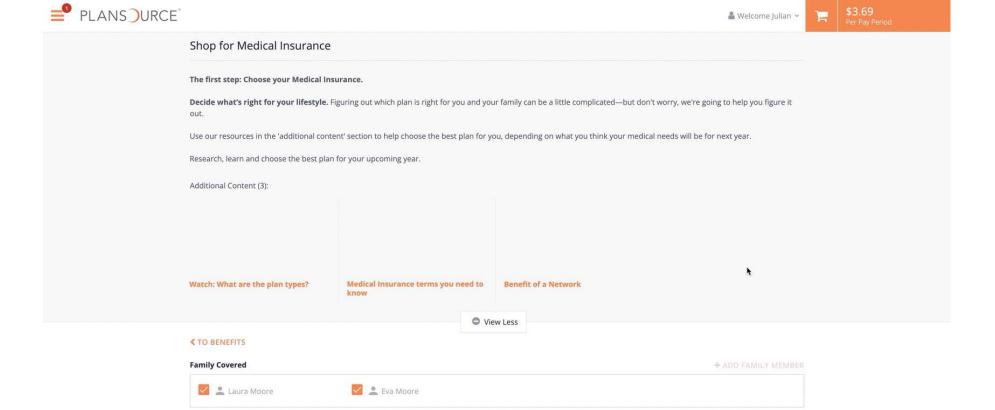
Terms of Use

Your Employer wants to give you access to a decision support tool to help you with your benefit selection process. This tool is a valuable resource in helping you determine which health plan offered by your employer best fits your particular situation.

However, you will first need to review the following Terms of Use and agree to them by checking the "I Agree" box below. If you do not agree to these Terms of Use, then do not check the "I Agree" box below, do not use or access the decision support tool, and return to the previous screen. READ MORE

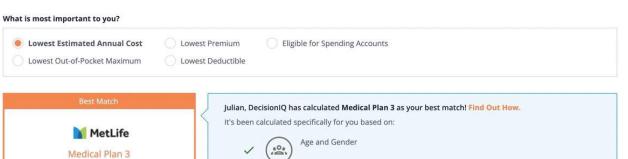


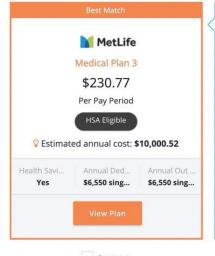
Contint





DecisionIQ is finding your best match...

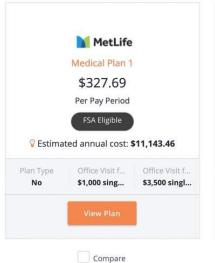


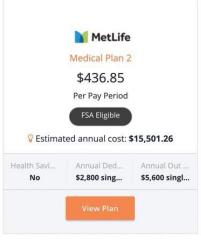




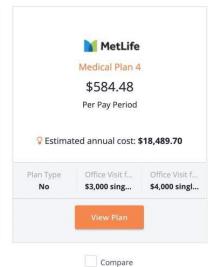
Compare

Select a Plan



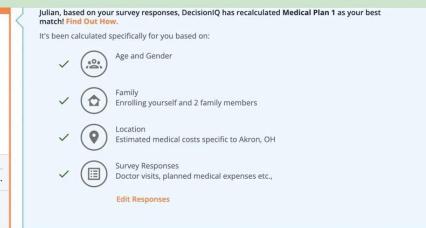


Compare



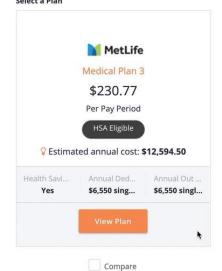


We have updated your best match based on the additional information you have provided. Your personalized best match is: Medical Plan 1



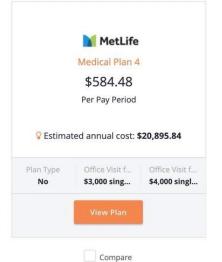
Compare

Select a Plan

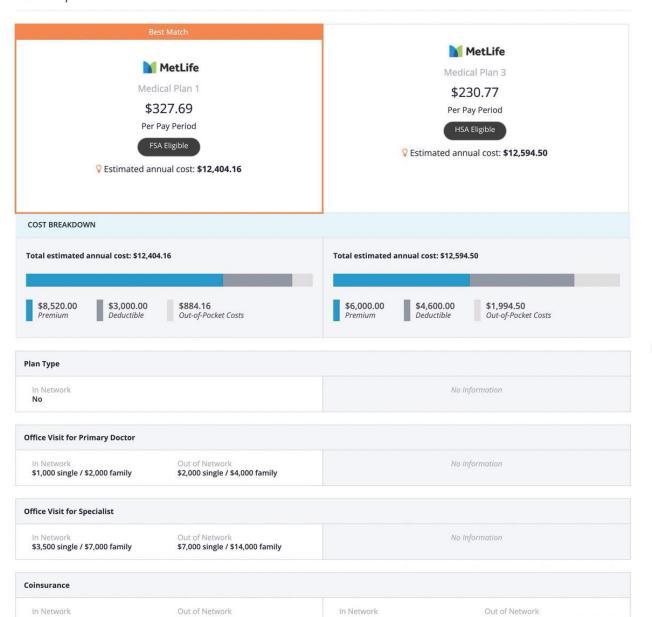




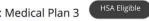
Compare



Plan Comparison



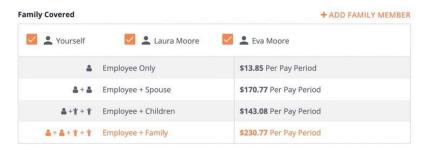




▼ TO AVAILABLE PLANS

Plan Overview



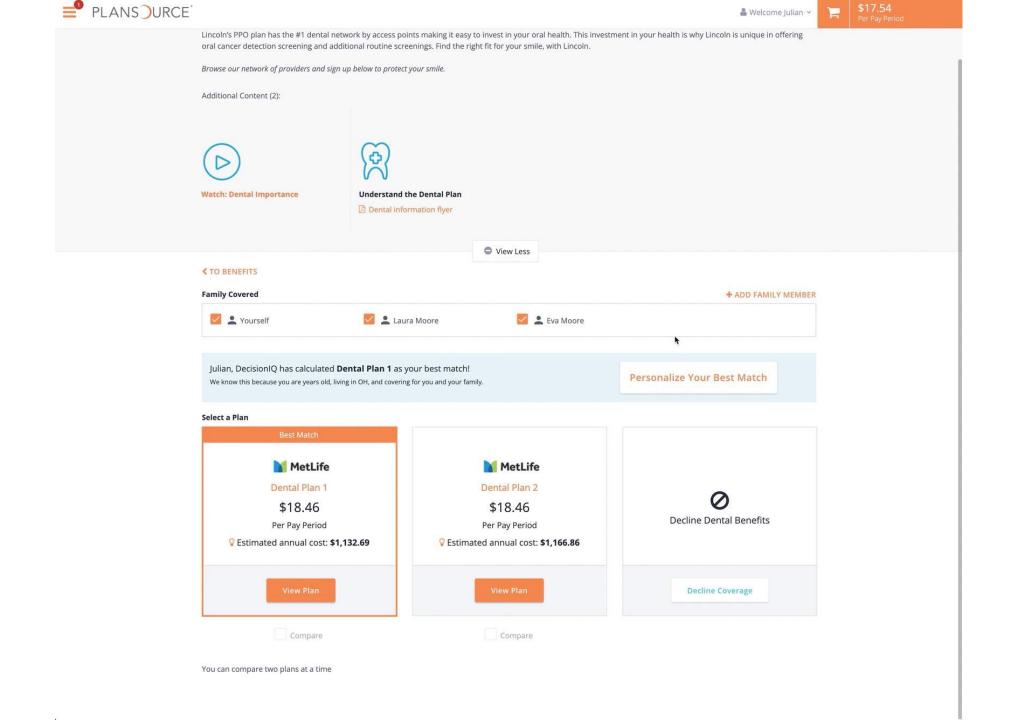


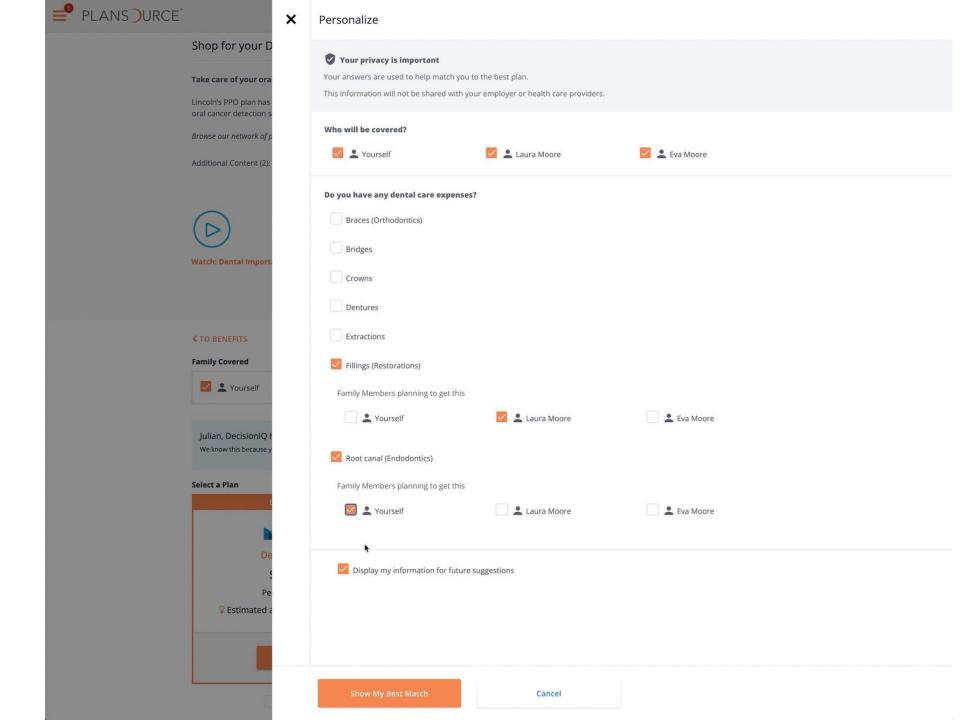
Plan Details

Description	In Network	Out of Network
Health Savings Account Eligible	Yes	
Annual Deductible	\$6,550 single / \$13,100 family	\$13,100 single / \$26,200 family
Annual Out of Pocket Limit	\$6,550 single / \$13,100 family	\$13,100 single / \$26,200 family
Preventative care/screening/immunization	No charge	Covered in full after deductible
Coinsurance	Covered in full after deductible	Covered in full after deductible
Primary Care Visit	Covered in full after deductible	Covered in full after deductible
Specialist Care Visit	Covered in full after deductible	Covered in full after deductible
Emergency Room	Covered in full after deductible	Covered in full after deductible
Urgent Care	Covered in full after deductible	Covered in full after deductible
Hospital Stay (all inpatient stays including maternity, mental / behavioral health, and substance abuse)	Covered in full after deductible	Covered in full after deductible







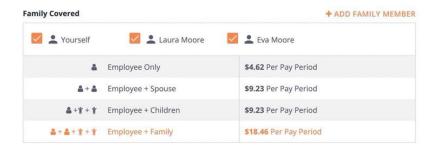


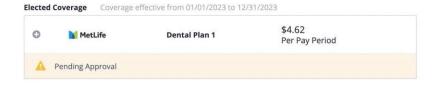


TO AVAILABLE PLANS

Plan Overview









PLANSOURCE IQ SUITE

Designed to deliver hyper-personalized experiences and greater HR efficiency







DECISIONIQ

Prescriptive, Al-based decisions engine

DEPENDENTIQ

Instant, Al-powered eligibility verification

INSIGHTSIQ

Powerful benefit insights at your fingertips



SHRM AND HRCI CODES

SHRM: 22-XFGDU

HRCI: 602328