

— EXEMPLAR —
ROYALTY SERIES
PLATINUM GROUP INSURANCE PLANS AT BRONZE LEVEL PRICES

LIFE[®]
University

it's in you.

OEP 2024

**FIXING
AMERICAN
HEALTHCARE**



RESTORING TRUST IN THE
U.S. HEALTHCARE SYSTEM FOR
PATIENTS, PHYSICIANS, & PAYERS

FEATURING
TIM HAWLEY
AND OTHER NEXTGEN BENEFITS ADVISERS
AND LEADING BUSINESS CONSULTANTS



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Industry Trends

- The cost of job-based health care coverage for 2024 is expected to rise at its fastest pace in years as inflation pervades insurance policies.
- Nearly one-quarter of employers are planning to or considering offering a narrow network of providers in the next two years, according to a WTW survey of 457 employers who have a total of 7.3 million workers.
- There has been a significant uptick in the use of specialty drugs, particularly those for diabetes and weight loss. The average monthly cost per member for this class of drugs roughly doubled between 2022 and this year, adding around 1 percentage point to next year's hike.
- According to analysts, group health insurance premiums are expected to see the largest rate increases for 2024 since 2018. More than likely double the rate increases from 2023.
- According to Newsweek, health care insurance costs are anticipated to hit a 10-year-high in 2024.

Conclusion, for most American employees, they will spend more money in premiums and have access to limited care.

2024 Life U Beat All Trends

No premium increase for 2024



Cost Containment

The goal of cost containment solutions is to keep premiums from rising at astronomical rates

It takes everyone to come together to enact change, and out perform the “Trends”

Roughly 70% of an insurance plan build is variable costs/claims

- Though Exemplar does a lot of these cost containment solutions behind the scenes, it is important to be a great consumer of healthcare (example – ER visits).
- It is very important that if you receive a call from our cost containment team and partners, we work together timely to limit your exposure to unneeded high costs claims and Rx's



STOP
Before You Go
CALL ISO!
330.551.5199

When to Call?

For Emergency Situations
Call 911

For ALL Non-Emergency Medical Related Issues Call ISO

VITALISTIC HEALTH CENTER

YOUR HEALTH STARTS HERE

Integrated Source One transforms the way employees, employers and individuals obtain healthcare. We deliver in a way that is transparent, affordable and robust. We embrace the patient centered care philosophy and align ourselves with those who have the same philosophy.

Your One Source for Healthcare!
24/7/365

Before you go call ISO! - 330.551.5199

HOW IT WORKS

Every visit begins with a call to ISO at 330.551.5199. If your call is not answered immediately, leave your name, number and a reason for your call. You will be contacted within the hour. If not minutes, and your visit will begin. The ISO Nurse Provider will design the right approach to determine if further in-person evaluation is needed by a Physician or Specialist. Otherwise your visit will be completed and any follow-up visits will be scheduled at that time.

OUR CARE

Integrated Source One provides Direct Primary Care that includes Acute Care - Cold, Flu, Allergies, etc. Annual Physicals, Blood work, Prescriptions, Mental Health Care.

Whether in-person or virtual, Integrated Source One offers 24/7/365 care providing the ability to accurately assess your condition and begin the process of getting you back to better health!

BEFORE YOU GO CALL ISO!
330.551.5199
24/7/365

NO CO-PAYS NO DEDUCTIBLES

Utilizing ISO as your first resource for medical care, you are charged \$0 outside of your monthly per member-per month fee

* Call 911 or visit the ER for emergencies

Integrated Source One Welcomes
LIFE UNIVERSITY

SCAN QR CODE TO ENROLL TODAY

www.intsourceone.com contact@intsourceone.com 330.551.5199

COST CONTAINMENT OPPORTUNITIES

Cost Opportunities Comparison

“Change is a process **NOT** an event!”

- Integrated Source One
- Rx
- Cancer
- Diabetes
- Hospital Bill Eraser
- Durable Medical Equipment
- Medical Management
- Utilization Management
- Labs
- Imaging



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Medical Plan Comparison

	GOLD PPO PLAN	LOW PLAN W/ HSA
In-Network Services		
Deductible Individual/Family	\$5,000 / \$10,000	\$5,500 / \$11,000
Out-of-Pocket Max Individual/Family	\$8,000 / \$16,000	\$7,500 / \$15,000
Coinsurance	Plan pays 80%	Plan pays 100%
Office Visit	\$25 / \$50 copay	\$35 copay after deductible
Specialist Visit	\$50 / \$75 copay	\$50 copay after deductible
Imaging / Diagnostic Test	Office: Physician Copay	Subject to deductible
	Other: Subject to ded. + 20%	
Inpatient Hospital/ Outpatient Surgery	Subject to deductible + 20%	Subject to deductible
Emergency Room	\$450 copay after deductible	\$450 copay after deductible
Urgent Care	\$100 copay	\$100 copay after deductible
Prescription Drugs • Tiers 1/2/3/4 • Mail Order	No deductible \$20/\$40/\$70/20% to \$500 \$40/\$100/\$190/ N/A	Subject to deductible then \$20/\$40/\$70/10% to \$350 \$45/\$105/\$195/ N/A
HSA/FSA Eligibility	FSA	HSA / LP FSA
Employee Rates per Pay Period		
Employee Only	\$280.91	\$112.90
Employee + Spouse	\$805.57	\$431.69
Employee + Child/ren	\$728.76	\$439.34
Employee + Family	\$825.08	\$508.98




Member Services & Claims Processing



Your Member ID Card (Front)

Provider Network

Member Group #
Cigna Group #

 **EXEMPLAR HEALTH**

CIGNA PPO

Exemplar Health Benefits Administrator


Group Name: Life University ID#:

Group#: 01 –

Cigna Group#: **0248282**

Effective Date: 11/1/2023

RxBin: 610748
RxPCN: PRORX
RxGroup: EXP100056



S

Member ID #

Member Sequence #
Member Name

Pharmacy Benefit Info

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Your Member ID Card (Back)

Prior Authorization for
procedures (provider use)

Member Services Contact #
Provider Claims Submission Info

Members: Carry this card at all times. Before hospital admission or surgery (outside the physician's office) or for the other services as specified in your plan your physician must call for pre-treatment authorization (precertification). Failure to comply may result in a reduction of benefits. Emergency hospital admissions must be reported within 48 hours or by the next regular working day following admission (72 hours in some states).

To find a Cigna provider please visit www.mycigna.com

Providers: Precertification must be obtained for services as specified in the member's plan. For precertification, call the number show on this card.

Notice: Possession of this card or obtaining precertification does not guarantee coverage or payment for the service or procedure reviewed. Please call the number on this card to verify eligibility.

Eligibility & Benefits: 855-826-3422 Pharmacy Help Desk: 833-656-1509
Medical Claims: P.O. Box 188061 Chattanooga, TN 37422-8061 Payer ID #62308
Benefits are not insured by Cigna or affiliates

AWAY FROM HOME CARE

Website to locate a provider

Pharmacy Customer Service

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Gateway Portal Registration

The Gateway Member Portal allows members to view Explanation of Benefits and send messages to member services. Please follow this process to register for portal access. Members will need to log in to this portal to obtain Explanation of Benefits documents for claims that have been processed. EOB's will not be mailed to Members.

If you have any questions or concerns, please contact Member Services at (855) 826-3422.

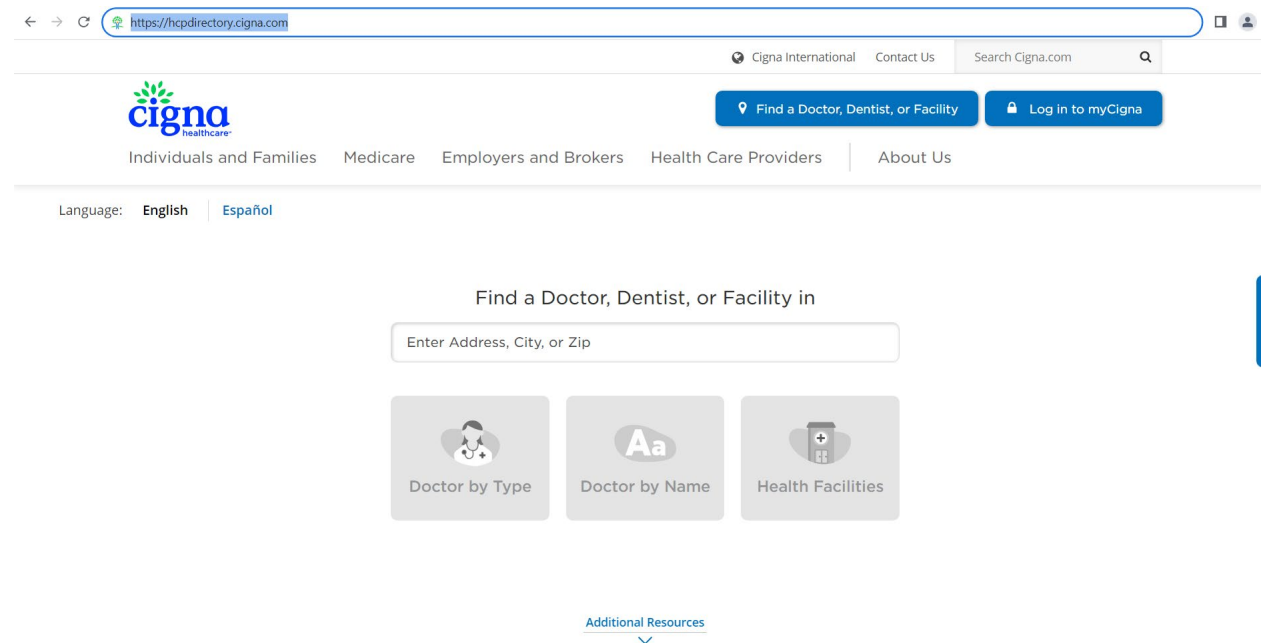
1. Go to [Exemplar Health Benefits Administrator \(exemplarhba.com\)](http://exemplarhba.com)
2. Click the Groups button
3. Click Members
4. Click Gateway Portal
5. Click Member Login
6. Click on the "Click here to register" button
7. Select "Member" in the portal drop down
8. Complete all other required fields.
9. Check your email to validate your registration.
10. Now you are ready to log in to access your information.



Visiting Your Provider

Please verify that your provider is in network prior to your visit if possible by visiting the website for Cigna (<https://hcpdirectory.cigna.com>) which is the network access for your plan. If you are unable to locate your provider or would like help, please contact Member Services at (855) 826-3422.

Please note that you do not have to create a log in to search for a provider.

A screenshot of the Cigna HCP Directory website. The browser address bar shows 'https://hcpdirectory.cigna.com'. The website header includes the Cigna logo, navigation links for 'Individuals and Families', 'Medicare', 'Employers and Brokers', 'Health Care Providers', and 'About Us'. There are buttons for 'Find a Doctor, Dentist, or Facility' and 'Log in to myCigna'. Below the header, there is a search bar with the placeholder text 'Enter Address, City, or Zip'. Underneath the search bar are three buttons: 'Doctor by Type' (with a doctor icon), 'Doctor by Name' (with 'Aa' text), and 'Health Facilities' (with a building icon). At the bottom of the search section, there is a link for 'Additional Resources' with a downward arrow.

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Visiting Your Provider

- Present your most recent Member ID card upon arrival
- Be sure to let the receptionist know that you have access to the Cigna network of providers. This is important.
- Claims will be billed by the provider to the payer ID or address on the back of your card.
- Claims will be priced by the network.
- Claims are then forwarded to EHBA for adjudication and processing.
- Once processed, you will be able to view the EOB within your Gateway portal.
- Please contact Member Services regarding any claims or provider issues.

Claim Submission

- If you do not see an EOB in the system within 30 days of your appointment, your provider's claim has not been received by EHBA. Please contact your provider and request the claim to be submitted.
- Member Services can also assist in obtaining the claim from the provider if necessary.

Member Services = Your Best Resource

Please contact Member Services by email, portal message or phone should you have any issues or concerns throughout the plan year. The team is more than happy to assist you in any way possible.

