KNOW BEFORE YOU GO, GO, GO!



GREENWOOD VILLAGE

OCTOBER 4, 2023

1:00 - 4:00 PM







Market Observations with Lars

Fully Insured

- Down to 3 carrier options
- > Expecting less migration than Q5 '22-'23 for group 5+
- Migration to individual coverage for micro groups (under 5)

Level-Funded and Self-Insured

- Tightening of underwriting requirements
- Less "street" rate quotes More underwritten
- Clean up of Terminal Liability contract language

Large Group

- Continued growth of broker owned "Captive" re-insurance plans
- More exploration of outside the box solutions (DPC, Virtual, etc.)

Ancillary

- > PFML huge impact on Life and DI product sales
- Less bundling with medical carriers/TPAs

Individual and Medicare

- Explosive growth
- 30% price point difference when compared to small group plans driving migration there, with or without ICHRA support







Warner Pacific: By the Numbers

Market leadership.

Our teams bring decades of experience and a wealth of knowledge.

Consultative operating model.

We have 400+ employees ready to serve you as your back office and advisory team.

PRO Suite technology.

Our innovative technology allows you to service your clients from quote to card, while delivering administrative savings to you.

Agent development.

We take a hands-on approach in helping you succeed.

Trust and integrity.

We do more than just transact business — we build lasting relationships.

400+

Seasoned professional team members. Local solutions with Statewide & National force \$4B+

Annualized premium

8000+

Broker / Producer Trusted Advisor relationships served in CA, CO and TX. Support agents in multi-states.

70,000+

In-force groups

60+

Expansive panel of Carrier, Vendor and TPA partners across the country



Warner Pacific Colorado Sales Operations Teams







Small Group Fully-Insured Medical Market Team



Large Group and Alternative Funding Market Team



Enhanced Service Model Team

What's New at Warner Pacific this Q4

- Warner Pacific National Growth
 - > Florida
 - Additional GA growth in Texas
- Large Group and Alternative Funding Operations Team Growth
 - > Shahram Homami Senior Director of Operations
- Updated LFP, LG and PEO Underwriting Matrix
- Updated Client Profile Questionnaires
- Updated LFP, LG and PEO RFP Submission Document
- Updated and enhanced Broker Dashboard
- New custom open enrollment and new hire onboarding benefits videos (in English and Spanish)
- Updates to ProQuote, Carrier 411, Document Toolkit, Resource Center
 - Includes compliance updates CAA Gag Prohibition info





I told my cat that I'm going to teach him to speak English.

He looked at me and said, "Me? How?"

I didn't last very long in my last job as a human cannonball.

I was fired.

In my last job my wages were paid in vegetables.

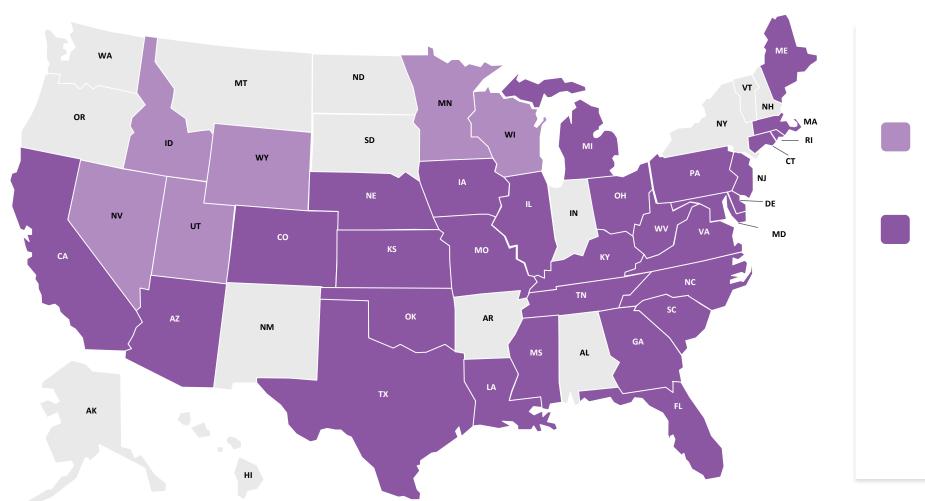
I left because I was unhappy with the celery.







Small group Aetna Funding AdvantagesM markets



Eligibility

Up to 50 employees

2–50: ID, MN, NV, UT, WI and WY

Up to 100 employees

2–100: AZ, CO, CT, FL, GA, IA, IL, KS, LA, MA, MD, MI, MO, MS, NE, NJ, OH, OK, PA, SC,

TN, TX, VA and WV

5–100: DE and KY

6-100: NC

10-100: CA and RI

11-100: ME



Colorado Front Range

ESTABLISHED: 2015

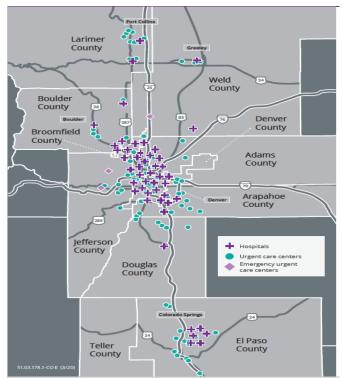
Network composition

 Participating health systems: Banner, Colorado Health Neighborhoods/Centura, New West Physicians, Physician Health Partners, Colorado Innovative Physician Solutions

• Network coverage area: Northern CO, Denver Metro to Southern CO

Insurance type: Fully and self insured

• **Structure:** Concentric





2,300+
Primary care doctors



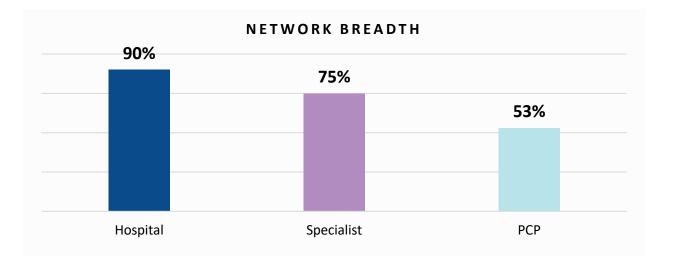
19,000+ Specialists

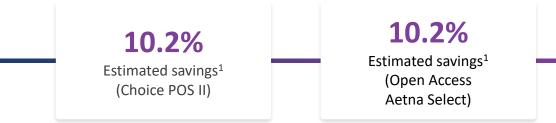


45 Hospitals



Urgent care centers





¹ Represents 2022 estimate of medical cost savings compared to Aetna's broad network and assumes 100% migration to Aetna Premier Care Network Plus providers and facilities. Actual plan sponsor savings will vary based on utilization, plan design and migration assumptions

Over-the-Counter Health Solution®

Up to \$100 annual allowance for health and wellness products*



\$25

Allowance every quarter for select CVS Health® brand health support products.

Hundreds

Of eligible products

\$400

Amount a family of four could save each year

HOW MEMBERS CAN USE IT

In-store

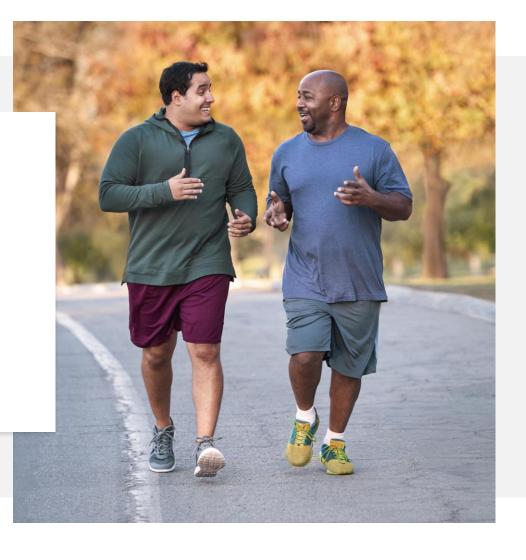
Members can pick up eligible items at any CVS Pharmacy® retail location**

Online

Members can place an order 24/7 at https://www.cvs.com/otchs/aetcommercialotc

Over the phone

Members call **1-888-628-2770**. They'll need their member ID and order ready when they call.



^{*}The \$100 allowance is provided in \$25 increments per quarter with no rollover

^{**}Does not include CVS Pharmacy locations inside Target stores.

How OTC Health Solution works



Using OTC Health Solution benefit in a CVS location

- 1. The member goes to a participating location
 - They can use the catalog to find products that work with their benefit
- 2. At the register, they give the cashier their ID card and date of birth.*
- 3. The cashier will apply the allowance to their total.
- 4. If there's a remaining balance, they can use another form of payment to complete the purchase.**



Marie's daughter's run-in with the flu

Marie's daughter, Sofia, has the flu. While at CVS Pharmacy picking up her prescription, she decides to grab some other items.

Marie's cart	
DIGITAL THERMOMETER	\$17
NASAL DECONGESTANT TABLETS - 18 CT	\$4
SORE THROAT SPRAY - 6 OZ	\$4
Total	\$25

Marie gives Sofia's Aetna ID card to the cashier. They scan it, ask her to confirm Sofie's date of birth, and tells her she's all set.

^{*}The benefit can only be used at a staffed register, not a self checkout station.

^{**} Purchases made online or over the phone can't exceed the \$25 quarterly allowance.

Diabetes care offerings









Diabetic Meter Program

Members with Diabetes can order a new blood glucose meter* from Aetna.com for **\$0**

\$0 Preferred Diabetic Benefit

\$0 cost share and waives the deductible (if applicable)*

To find eligible products:

- 1. Use the Advanced Control Plan drug list.
- 2. Look under the categories:
 - ANTIDIABETICS, INSULIN
 - DIABETIC SUPPLIES
- 3. Look for "PG" (preferred generic) and "PB" (preferred brand)

Pharmacy Advisor®

Helps drive adherence through proactive **1:1 connections** with specially trained CVS

Pharmacists

Simple Steps to a Healthier Life®

Uses a health assessment to match members to care management "Journeys"

Diabetes-specific journeys:

- Live healthy: Diabetes
- Eat well to manage blood sugar

*Not available in Oklahoma.

Optimizing benefits with Maintenance Choice® with opt out*



How it works:

- After two retail fills, the member will need to fill the 90-day supply at CVS Pharmacy® or CVS Caremark® Mail Service Pharmacy.
- If the member fills a 90-day supply, they'll get three months for the cost of two copays.**
- Members can call to opt out and pay the retail cost sharing for each 30-day supply.
- If they don't fill their 90-day prescriptions at CVS
 Pharmacy or CVS Caremark Mail Service
 Pharmacy or call us to opt out, they'll pay the full cost of the medication.

90-DAY OPTION

- 92 percent of members are more likely to take their medications after using mail service for one vear.***
- This ensures members have their daily medicine on hand when they need it.

Delivery

Program proof points:

No extra cost for 1 to 2 day delivery from a CVS Pharmacy and a discounted fee for on-demand delivery.[†]

^{*}Does not apply to groups based in Oklahoma, Tennessee or West Virginia

^{**}Eligible members enrolled in high-deductible health or Value plans must first meet their deductible before copay cost-sharing applies. Eligible members enrolled in IntRx plans must first meet their deductible before copay cost-sharing applies on brand and specialty drugs.

^{***}Based on 2017 CVS Caremark Mail Service Pharmacy mail-order pharmacy users.

[†]Delivery fees from CVS Pharmacy are discounted for mandatory with opt-out version of Maintenance Choice only.

A convenient way to access quality virtual care

CVS HEALTH VIRTUAL PRIMARY CARE™



PRIMARY CARE Dedicated physician-led care team including a nurse practitioner and registered nurse, available to contact with questions anytime via secure messaging

Ability to see selected physician within days of scheduling an appointment

Coordination of in-person care, when needed, to in-network provider clinics, including nearby MinuteClinic® locations



CVS HEALTH VIRTUAL CARE™



ON-DEMAND CARE Access to 24/7 quick care with licensed providers

Care for common illnesses, infections and one-time medication refill



MENTAL HEALTH Licensed therapist by appointment seven days a week including evenings Counseling for needs like anxiety, stress, depression and grief Psychiatry services for prescriptions and medication management



Savings now, surplus later

Save with credits

If the group is new to AFA, they can get each credit below that applies to them. You just can't use the "51-100 new business" credit with the "Level-funded incumbent" credits.*

Credit name	Amount per enrolled employee	Eligible employees	Credit requirements	Available effective dates
General new business	\$300	2–100	Meet standard underwriting requirements.	Through 1/1/2024
51-100 new business	\$200	51–100	Meet standard underwriting requirements.	Through 1/1/2024
Pre-ACA grandfathered	\$200	2-50	Have had the same plan since before the ACA.**	Through 1/1/2024
Level-funded incumbent	\$200	2–100	Be on a level funded plan with a non-Aetna carrier AND be in a surplus position with that carrier.	Through 1/1/2024

Save with surplus

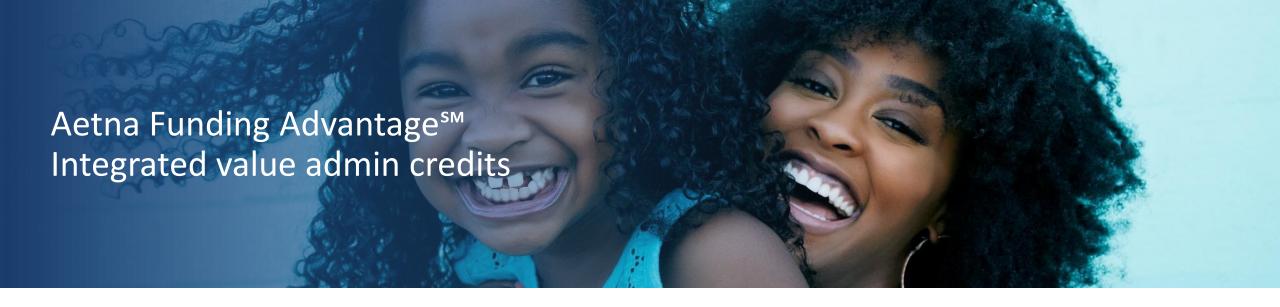
Your clients are guaranteed a surplus when they renew with us for the first time. The surplus amount is based on the number of enrolled employees.*** See the details below:

They enroll	They get back
2–4	\$500
5–9	\$1,000
10–14	\$1,500
15–24	\$2,000
25–50	\$5,000
51–100	\$7,500

^{*} Excludes groups based in California. A group can only be eligible for an administrative fee credit at their effective date based on the number of enrolled employees at the time the case is sold. This material is for informational purposes only and does not constitute a contract. The offer is provided at the sole discretion of Aetna and can be terminated at any time and without notice.

^{**}We must be notified that the group is on a pre-ACA grandfathered plan and receive the current plan designs when a quote request is submitted for the group.

^{***}Applies to first renewal only. The offer is valid through December 1, 2023. Only groups that renew are eligible for a one-time surplus guarantee. Guaranteed surplus tiers are calculated based on number of enrolled subscribers at the time the case is sold.



Get an admin credit when your group adds Aetna Dental® or Aetna Dental and Aetna Vision for the first time.

Group buys	\$200 credit
medical + dental	per enrolled
Group buys medical + dental + vision	\$225 credit per enrolled

See how the savings add up**

Example for illustrative purposes

Enrolled	Savings with dental	Savings with dental & vision
10	\$2,000	\$2,250
30	\$6,000	\$6,750
55	\$11,000	\$12,375
80	\$16,000	\$13,500

^{*}Eligibility is limited to new groups and renewing groups adding a dental or dental and vision plan for the first time at time of new sale or annual renewal. The Dental and Dental/Vision credit is provided at the sole discretion of Aetna® and can be terminated or modified by Aetna at any time and without notice.

^{**}Aetna Funding Advantage must still follow stop loss regulations. Therefore, the discount may not be available if the stop loss premium cannot be reduced sufficiently.



IMQ Elite

Free concierge service for collecting and submitting Digital IMQs in 4 easy steps.



Step 1:

Email
AFAHealthAppSupport@aetna.com
with request form and census



Step 2:

Create your FREE FormFire account at:
www.FormFire.com/aetna



Step 3:

We'll invite and remind members to complete a digital IMQ through our secure portal



Step 4:

Once all IMQs are complete, we'll release the underwritten quote

We support you like no one else can



You can rely on our Aetna AnswersM Team:

They know the business
Our AAT reps have an average
of 17.5 years of experience

Communicate with peopleThey are real people, not an IVR

Bring a human touch
They understand the needs
of small businesses

We can support you and your clients

Assist with member ID cards by providing virtual copies members who need a virtual card for upcoming services. They are also able to provide member ID and group numbers. A quick phone call to our team and we will have this information in your hands.

Claims and benefit support to help brokers and plan sponsors who need to obtain claims information on a specific employee.

Billing assistance by answering questions on billed charges, dates or need new invoices? Our team supports all your billing needs.

Other areas including Springboard help desk, urgent/access to care enrollment, enrollment inquiries, password reset, Producer World® help desk, employee member website group support and SBC plan document inquiries





Never go it alone. That's our Anthem.

2024 Small Group Updates



Small Group - ACA plans

Wide variety of fully insured plans with no medical underwriting

What your clients get:

- Fully insured, no medical questions, competitive plans and rates
- Pharmacy network that includes Walgreens[®]
- Great option for virgin groups with poor health, non-ERISA groups that don't qualify for level funding, and groups with medical conditions



Discover Local Network and Coverage

PPO	Pathway EPO + STD	Pathway Essentials + STD	Mountain Enhanced + STD
PPO Broad, statewide access with 42K doctors	Pathway EPO Statewide access with 76% of the PPO doctors and hospital s	Pathway Essentials 10 counties across Denver- Metro and Boulder	Mountain Enhanced Community based, 9 counties
88 hospitals plus National BlueCard®	68 hospitals, contracting with UCHealth, HCA and Rocky Mountain Hospital for Children	10 hospitals, contracting with HCA and Rocky Mountain Hospital for Children	8 Hospitals
>4,000 Primary >6,500 Specialty >8,700 BH/SA	>2,900 Primary >4,700 Specialty >8,140 BH/SA	975 Primary 1,700 Specialists 5,970 BH/SA	261 Primary 576 Specialists 380 BH/SA
PCP Selection			
73% of members	21% of members	3% of members	3% of members

2024 SG Marketed Plans Non-Public Option & Public Option – Fully Insured

No new plan designs in 2024

Anthem PPO	Pathway EPO	Mountain Enhanced HMO	Pathway Essentials
19	26	26	10
	Pathway STD	Mountain Enhanced STD	Pathway Essentials STD
	3	3	3

ACA plans

A wide variety of fully insured plans with no medical underwriting

2024 Takeaways

8 Whole Health Plans
Enhanced Embedded Dental & Vision.
Indicated by WH in the plan name

Affordable, local network options:

- Pathway EPO
 - Pathway Essentials
 - Mountain Enhanced

Pharmacy Network –
Base Network with R90
Formulary – Select
Home Delivery – Optional

ACA underwriting and administrative updates

Rate Position	At parity with competitors, with rate advantage in some markets
Simplified Application Requirements	Group Application and Census EnrollmentUpdated EFT Process
Requirements for groups =/<2 employees	• UITR
Ability to offer multiple plans and networks in small group	 Available to groups with 4 or more employees Select up to 5 plans across 4 network options CO Public Option Standard Plans can only be offered with other Anthem CO Public Option Standard Plans

Small Group ACA and Standard Plan Broker Commissions

Tier	Total medical contracts	Commission per contract per month
1	0-99	\$25
2	100-199	\$27
3	200-499	\$29
4	500-999	\$31
5	1,000-1,499	\$33
6	1,500+	\$35



Anthem Balanced Funding

Predictable monthly payment with the opportunity to share in claims savings

Highlights:

- Surplus sharing potential
- Fixed monthly payment
- Detailed reporting with insights
- No impact on member experience including benefits, networks and programs

To learn more, check out the new ABF Broker Playbook on Anthem Broker Hub!



Enhanced Existing Anthem Balanced Funding Plans - 2024

- Diagnostic Lab and X-Ray included in OVC Copay
- \$300 ER Copay

Existing Plan Changes			
Plan Name	Network	Enhanced E	Benefits
Anthem Balanced 500/10%/2500 Rx Copay DXL&ER			
Anthem Balanced 1500/20%/8250 Rx Copay DXL&ER	Anthem PPO Pathway EPO	Diagnostic X-ray and Lab	ER \$300 Copay
Anthem Balanced 2500/30%/6000 Rx Copay DXL&ER		covered as part of office visit copay, no costs	
Anthem Balanced 5500/30%/9450 Rx Copay DXL&ER			

New Anthem Balanced Funding Plans - 2024

New Plan Highlights				
Plan Name	Network	Enhanced E	Benefits	
Anthem Balanced 1000/10%/4000 Rx Copay DXL&ER				
Anthem Balanced 2000/20%/4500 Rx Copay DXL&ER	Anthem PPO Pathway EPO	Diagnostic X-ray and Lab	ER \$300 Copay	
Anthem Balanced 3000/20%/6000 Rx Copay DXL&ER		covered as part of office visit copay, no costs		
Anthem Balanced 3000/20%/6500 Rx Copay DXL&ER				

Discontinued Existing Anthem Balanced Funding Plans - 2024

Discontinue Plans	
Plan Name	Contract Code
Anthem Balanced PPO 1500/0%/1500 w/HSA	6V0P
Anthem Balanced Pathway EPO 1500/0%/1500 w/HSA	77JC
Anthem Balanced Mountain Enhanced HMO 1500/0%/1500 w/HSA	6V15

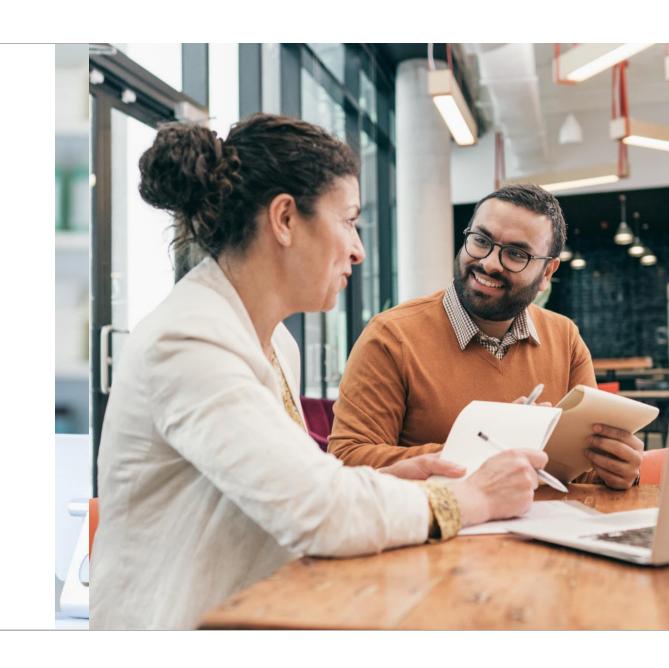
Mandated benefits excluded from ABF plans

- Pediatric Dental/Vision
- Adult Vision
- 2021 HB 1140 Elimination of Living Organ
- Bariatric Surgery
- Infertility
- Hearing Aids

Small Group ABF Broker Commissions and Bonuses

Commission will remain a pass through.

Group Size	Bonus Eligibility	Multiplier *		
10-25	\$3,000	+\$1,000		
26-50	\$5,000	+\$1,000		
51-100	\$7,500	+\$1,000		



^{*}If Pathway EPO or Pathway Essentials are included.

Add Anthem Dental & Vision to save your client 5% when they buy or renew Medical

	Group savings based on enrolled subscribers						
ABF Medical Plans	10-25	26-50	51-75	76-100	101-150	151-200	201+
+Dental	\$1,500	\$3,000	\$4,500	\$6,000	\$9,000	\$12,000	\$18,000
+Vision	\$750	\$1,500	\$2,250	\$3,000	\$4,500	\$6,000	\$9,000
+Life	\$750	\$1,500	\$2,250	\$3,000	\$4,500	\$6,000	\$9,000
+Short term disability	\$500	\$1,000	\$1,500	\$2,000	\$3,000	\$4,500	\$6,000
+Long term disability	\$500	\$1,000	\$1,500	\$2,000	\$3,000	\$4,500	\$6,000
Total Savings	\$4,000	\$8,000	\$12,000	\$16,000	\$24,000	\$33,000	\$48,000

Gym Reimbursements

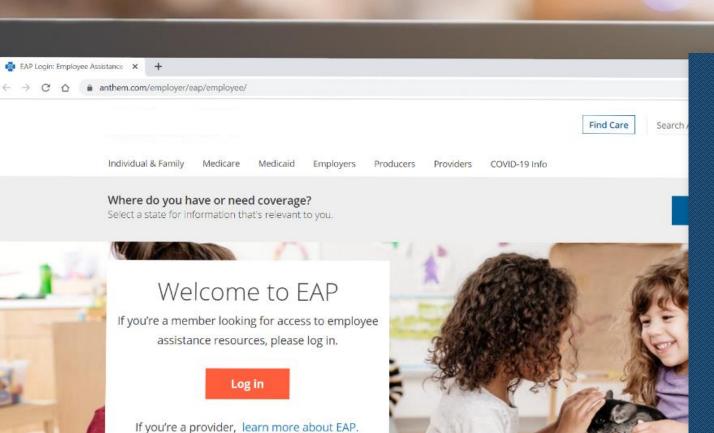
in Partnership with American Specialty Health (ASH)

- Subscriber + spouse + dependent(s) age 18-26
- Reimbursed up to \$400 per year
- Must visit gym 50+ times per 6 months

How to get reimbursed:

- Track workouts at qualified fitness center, send in completed forms + proof of payment
- Enroll through anthem.com or Sydney and automatically track visits + manage reimbursement.





If you're an employer, broker or producer, visit

your EAP page.

EAP Basic

EAP Basic

When you are faced with personal, money, legal, or family issues, the Employee Assistance Program (EAP) can support you with resources and programs to help. You have access to programs and services including:

- Three face-to-face or video counseling sessions per employee/household member per issue
- Legal/financial and ID monitoring
- Work/life services

Engagement Package 200

Employees can earn up to \$200 by engaging in programs designed to meet their specific needs — whether they are already healthy or looking for more support managing a condition.

Reward type	Ways to earn	Dollar value
Preventive care	Adult wellness annual exam, including well-woman exam	\$25
	Cholesterol exam (once a year)	\$20
	Colorectal cancer screening (once a year)	\$25
	Eye exam (once a year)	\$25
	Flu shot (once a year)	\$20
	Mammogram (once a year)	\$25
Condition management	ConditionCare	Up to \$50
	Building Healthy Families — 4 levels \$10, \$10, \$10, \$10 each (once/year)	\$40
	Well-being Coach Telephonic – weight — achieve goal	\$25
	Well-being Coach Telephonic – tobacco — achieve goal	\$25
Wellness	Action plans (\$5 each; max 5 a year)	\$25
	Anthem login (web or mobile) (once a year)	\$5
	Connecting a device (once a year)	\$5
	Health assessment (once a year)	\$20
	Steps tracking (at every 50,000 = \$2; max 30 times a year)	\$60
	Update contact information (once a year)	\$10
	Well-being Coach Digital (daily mission check-ins)	\$20

You never go it alone.

That's our Anthem.

Questions?





CIGNA UPDATES

Presented by: Amy Kirkland (New Business Manager)



Agenda

- Product spectrum
- Quoting
- Credits
- Why Cigna?



Funding Spectrum

- Funding options designed around you
 - because we want you to win.

30+

years self-funding solutions have been working for small to medium sized businesses.

85%

of our clients are in an alternate funding arrangement in CO

Reward

Protection

Fully Insured

Fully Insured Plus

Level FundingSM

Graded FundingSM

- · Savings increase as employees get healthier
- · Aided by our expert Engagement Consultants
- Opportunities to save money if claims are lower than predicted
- Colorado 100+ Eligible Employees

- Set monthly premium takes guesswork out of health benefit costs
- Consistent year over year results
- No risk if claims are higher than expected
- 25-499 Eligible Employees



Quoting

Required information:

- Needed for PRS, member/dependent level census:
 - Last Name, First Name, DOB, Zip, Gender, and whether they are an employee or dependent
- Enrollment by plan (if multiple plans)
- SBCs
- Current and Renewal rates (if available)
- Claims if they will be experience rated
- Requested Commission
- Business Address

Process:

- Send RFP's 20 enrolled or more to WP
 - Can get exceptions sometimes down to 15 enrolled
 - Sales office follows Broker Location
- Our pre-sale team will scrub and reach out for missing information
- Turnaround time 7-10 business days



Credits

Transition Credit:

• The credit will show on the first bill, but for the purposes of your analysis it can be shown as a direct financial decrement to the annual premium.

Dental/Vision Bundling Credit:

• Up to 2% of premium as a one time credit

Surplus Guarantee:

 We will give the group surplus guaranteed amount at the first year renewal if by chance the group should run in a deficit in year one. They get 100% of those funds.

Wellness Fund:

 Cigna will provide a single point of contact Health Improvement Specialist, to encourage continued efforts in improving the health and wellbeing of their workforce.



Why Self-Funding with Cigna?

- 30 years of Self-Funded experience
 - 15+ years of Level Funding with Great West acquisition & first to market with product
- Fixed to Claims Ratio
 - More money goes into claims fund with us than competition
 - 67% of clients get a surplus
- Reporting
 - Allows groups to have control of their health care spend, and adjust as needed
- Flexibility in Plan Design
 - Not shelf rated, can totally customize benefits. No state mandates
- Bundling Credits for Dental and Vision
 - Claims funding add to same claims bucket as medical
- One Guide Pre & Post Enrollment Support
 - Can be set-up prior to the effective date to assist members in enrollment
- Dedicated Local Account Team
 - Client Manager, Client Service Consultant, Gold & Platinum Service Leads



On our first date my now Wife told me that she was in the honey business.

I knew then that she was a keeper.

I gave our handyman a to-do list but when I got home only items 1, 3 and 5 got done.

Turns out he only does odd jobs.

My Wife looked surprised when I told her that she had drawn her eyebrows too high.







CoADVANTAGE® Business Driven Solutions for WARNER



CoAdvantage Partnership

About CoAdvantage

CoAdvantage is your trusted HR partner, dedicated to helping small businesses succeed nationwide. Our team of experts provides outstanding service from a network of nationwide offices to administer payroll, benefits, workers' compensation, and core HR management.

With CoAdQuantum®, our Next-Generation HR Platform featuring a first-in-its-class fully integrated payroll processing engine, we're proud to serve approximately 110,000 worksite employees in all 50 states. Whether you're an entrepreneurial startup or a mid-sized company in a mature industry, we're here to help your business thrive.



CoAdvantage's SOC Certification demonstrates our strong commitment to protecting your data with strict controls and procedures, ensuring the security, availability, processing integrity, and confidentiality of our clients' information.

AWARDS AND RECOGNITION









CoAdvantage At-A-Glance



6.6B payrolls processed annually



110K worksite employees



30+ offices nationwide



payroll processing capacity with CoAdQuantum®



1997 year founded



Member of the National Association of Professional Organizations

CoAdvantage Services

Dedicated Service Team

- Expert in State/National Law
- Certified HR Professionals
- Employee Benefits Education
- Easy to Access Proactive Partner

Benefits

- Fortune 500 Ancillary Benefits Available
- Multi-Employer 401K Plan
- Flexibility in Choice (Aetna and Kaiser Dual Option)
- Strategy to Attract and Retain Talent!

Most robust combination of people and technology in the market

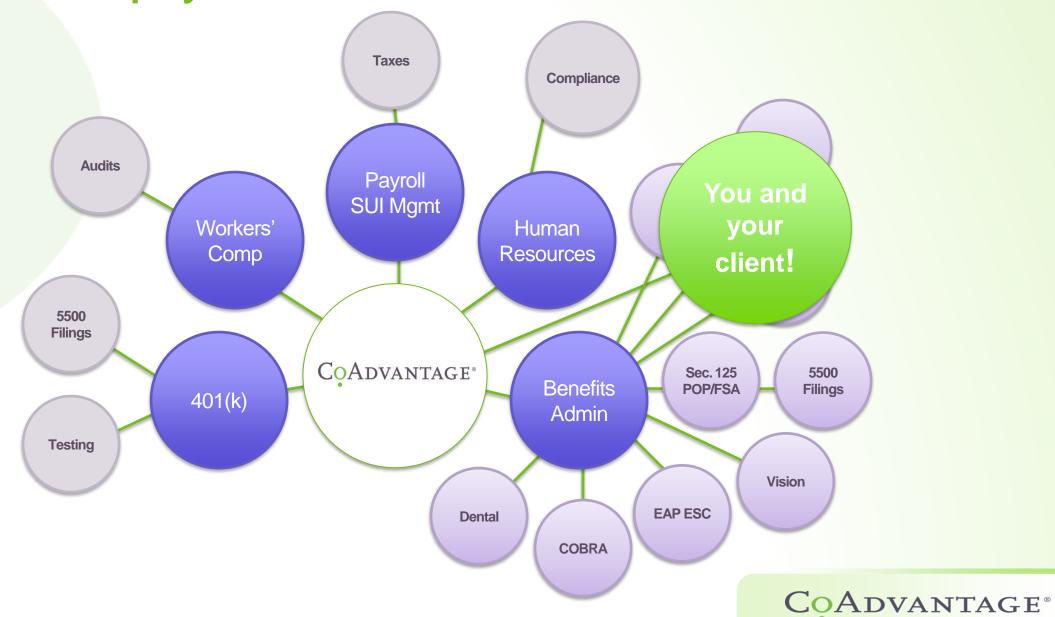
Payroll/Technology

- Turnkey Onboarding for new locations
- Proprietary HRIS Single Sign-On Platform
- Robust Reporting
- Integrated Add-Ons Available
 - Time and Labor
 - Learning Management
 - Performance Management
 - Applicant Tracking

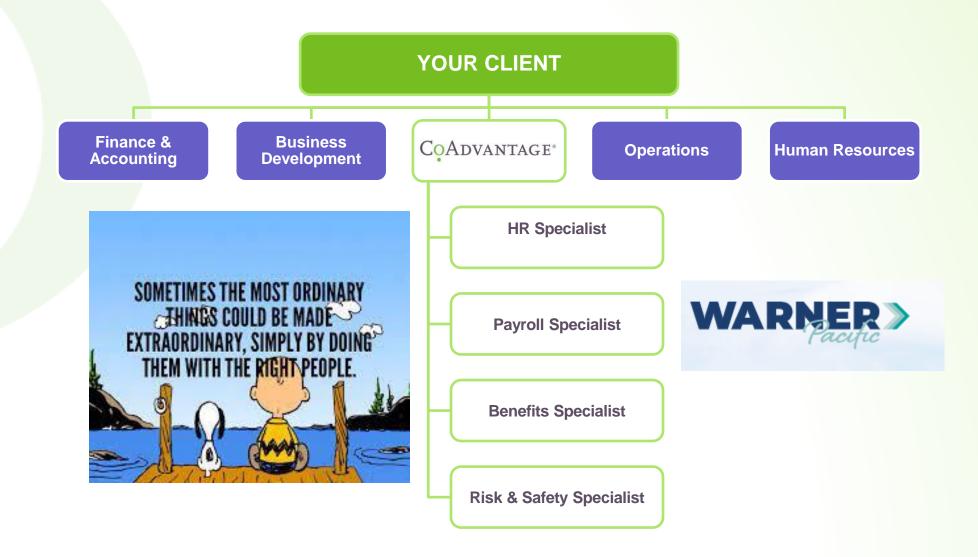
Risk/Compliance

- Continual Updates on Changes in Law
- Pay-As-You-Go Workers Comp
- Best Practice Policies
- Fiduciary Responsibility Shifted to PEO

Traditional Madel oyment Model



Dedicated Contacts for Your Clients



Colorado and National Benefits

Master Benefit Offering

MEDICAL

- Multiple Aetna Plans, Nationwide networks include MCPOS and EPO
- Kaiser Plans available to offer alongside Aetna

ANCILLARY – No Participation or Employer Contribution Required

- Multiple MetLife Dental plans up to \$5,000 annual benefit
- MetLife Vision Plans Using VSP Network
- Health Advocate 24/7 Medical Concierge Service
- Life, STD, LTD through MetLife
- Accident, Hospital Indemnity, Cancer, Critical Illness
- Legal and ID Theft Protection
- Pet Wellness
- Corporate Perks and EAP Program Included for ALL Employees on Payroll

Benefits: 401(k) Administration

- Customized Consultation for each Employer
- Employers Select their Contribution Level & Waiting Periods for New Hires
 - Traditional, Safe Harbor, Roth, Profit Sharing
- No Fiduciary Responsibility!
- Personalized Service, Website Access and Telephone Support 24/7
- No need for a Third-Party Record-keeper
- Full administration: 5500 filing, compliance, IRS testing, loans, distribution requests, etc.





Human Resources Management

HR Documents and Articles

HR Best Practices

HR Policy Development

Knowledgeable HR Consultants

Employees Assessment Tools

Current HR Legislation News

HR Action Forms

Employee Handbooks

Training and Development Tools

Employee Assistance Program (EAP)

Business Impact

- Performance management and measurement tools
- Guidance in employee satisfaction and retention
- Access to a certified HR expert to help navigate complex HR issues
- Reduced liability
- Access to customized policies and procedures

Risk Management



Workers' Compensation Coverage

Workers' Comp Renewal Management

Workers' Comp Claims Management

Safety and Loss Control

Unemployment Claims Management

Drug and Background Checks

EPLI Coverage

Payroll Tax Compliance

Business Impact

- Pay as you go Program with No Deposits or Audit
- Access to a team of compliance experts for unemployment claims, workers' compensation claims, benefits & payroll tax compliance
- Capped exposure for workers' compensation claims
- Protection under EPLI policy
- Volume discounted pricing for drug and background check services

CoAdvantage Solutions & Technology





HR Data Management. Easily manage employeerelated tasks and requests including areas such as hiring, onboarding, salary and status changes, PTO tracking, and training requirements



Time & Labor Management. Streamline timekeeping and payroll processes while aiding compliance with labor laws



Reporting & Analytics. Access over 70 reports including Payroll Register, and support real-time decision-making using customizable Business Intelligence Payroll and Invoice Allocation Dashboards that display metrics in visual, easy-to-interpret charts



Applicant Tracking. Reduce time and effort in the recruiting process with tools that automate job posts, filter applicants, manage files and provide compliance reporting



Talent Management. Online module facilitates a coaching and mentoring culture through team and peer appraisals, goal setting and talent matching



Online Learning. Dozens of online courses aid knowledge and skill development in key areas like compliance, customer service, leadership, safety and more



Pre-Hire Screening. Our extensive background screening services include credit, criminal, driving, social security, as well as substance abuse



Compensation Management. Manage salary administration, merit pay, and compensation ranges with our fully automated system!



Online New Hire Onboarding

Complete Online Onboarding

- Personal Information
- State and Federal Forms
- Electronic Signatures
- W-4 Access
- Direct Deposit
- HR Handbook
- Customized to Company
- Fully Integrated Add-ons
- PTO Tracking
- Online Benefits Enrollment

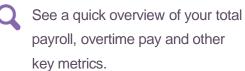


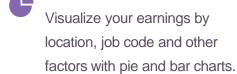
CoAdQUANTUM®

Payroll Dashboard

Gain Access to Real Time **Business Data**







Analyze your earnings by department using easy-tointerpret graphs.

Assess gross pay, taxes and other deductions.







Simplifying Payroll Processing



Thanks for your time!

Rod Clift

Business Consultant

303-507-1221

rclift@coadvantage.com

Michelle Johnston

Regional Sales Manager 720-272-2138

mjohnston@coadvantage.com

CoAdvantage 6455 S. Yosemite St., Ste.725 Greenwood Village, CO 80111 Telephone: 303-225-0400 Tatiana Jafari Licensed Benefits Consultant 720-253-5757 tjafari @coadvantage.com



gravie

Introducing Comfort®



100% coverage on most common, in-network healthcare services



No-cost services include:

- Primary care
- Preventive care
- Specialist care
- Urgent care visits

- · Labs & imaging
- Generic prescriptions
- Online care
- Mental health care

Employees choose their out-of-pocket maximum.

More choice. More satisfaction.

Other services:

- Emergency room \$250 copay
- Brand name prescriptions \$75 copay
- Non-preferred brand name prescriptions Varies per plan
- Specialty prescriptions Varies per plan
- Hospital surgery/procedure No cost after out-of-pocket max

Comfort with a Traditional Plan



	Traditional silver plan	Comfort — \$6,000 OOPM
Deductible	\$3,000 deductible / \$6,000 OOPM	\$6,000 OOPM / deductible*
Coinsurance	25% after deductible	No coinsurance
Preventive care	No cost	No cost
Primary care	\$30 copay	No cost
Specialist care	\$30 copay	No cost
Urgent care	\$30 copay	No cost
Labs & imaging	25% coinsurance after deductible	No cost
Generic prescriptions	\$25 copay	No cost
Emergency room visit	25% coinsurance after deductible	\$250 copay
Brand name prescriptions	25% coinsurance after deductible	\$75 copay
Non-preferred brand name prescriptions	50% coinsurance after deductible	Varies per plan
Specialty prescriptions	25% coinsurance after deductible	Varies per plan



One-stop, industry-leading solution*





The Gravie Care[™] team makes it easy for employees to navigate Comfort.

Virtual services

Gravie health plan members get access to a suite of digital services that aim to enhance their health and wellness journey at no additional cost.



Virtual care, including general medicine, dermatology, and clinical and non-clinical mental health.*



30K+ virtual classes as well as nutrition guides, meal plans, and more. In-person fitness perks are available as a buy-up.



Clinical-grade digital physical therapy that helps members overcome musculoskeletal (MSK) pain.



Simple, streamlined, flexible.

- No cost to the member
- No interest
- No credit check
- Available through Gravie's member site
- Powered by Paytient
- Supported by Gravie Care[™]

Gravie Pay improves access to healthcare by allowing members to pay for out-of-pocket medical expenses at their own pace.

One-stop shop

Turnkey solution

Including TPA services, national network and PBM access, stop-loss protection, benefit management & employee enrollment platforms, account management support, and more

Implementation support

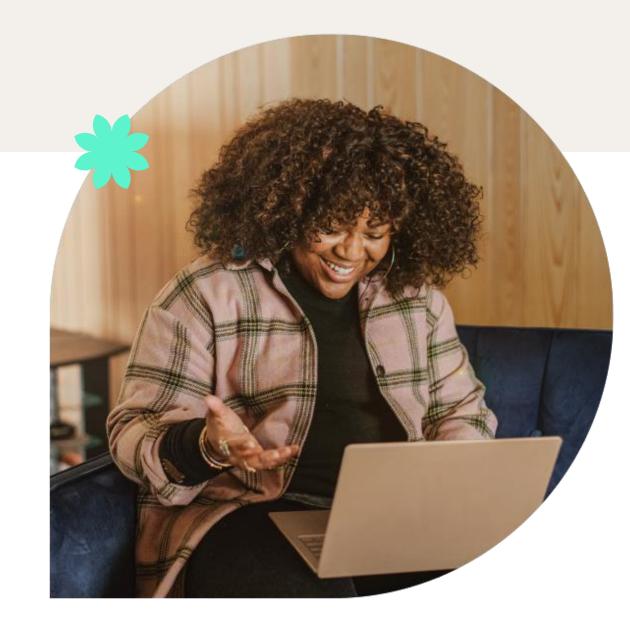
Including help collecting all necessary information, census, and plan design data

Year-round account management

Including regular personalized check-ins, comprehensive reporting, and renewal support

Employee support, aka Gravie Care®

Including access to licensed advisors available to help them choose and enroll in coverage, get care when they need it, and answer their benefits questions throughout the year



Comfort is performing as expected

6.8%

Average annual renewal rate increase to date (national average is 8 - 12%)

93%

Of employers renew with Gravie each year (national average is 66 – 75%)

An even higher 99% for groups 100+

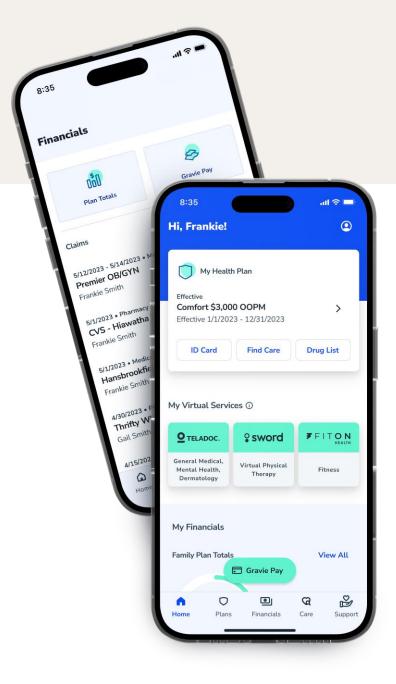


The Gravie Mobile App

Gravie health plan members can use the Gravie app from anywhere to get the care they need, when they need it.

App features enable members & their dependents to:

- Access their digital ID card on the spot
- See what's covered by their plan
- Find in-network providers, clinics, pharmacies, and more near them
- Review claims and track expenses throughout the year
- Connect with Gravie Care®, a team of licensed experts available to answer all their health benefits questions





About HealthEZ



HealthEZ by the numbers

40 years in business

1st PPO in the country

Members in 50 states

Clients in 32 states

91% CLIENT RETENTION PAST 2 YEARS

22%

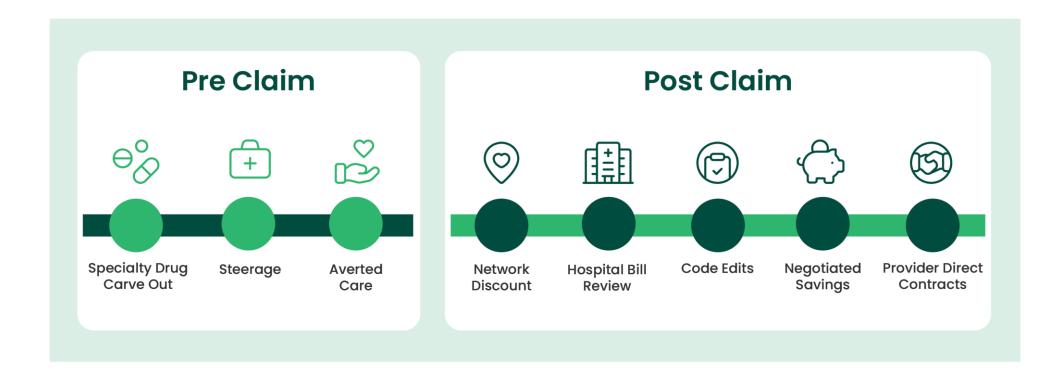
MEMBER GROWTH
IN 2022

21+%
BELOW COST
BENCHMARK



Managing Plan Assets

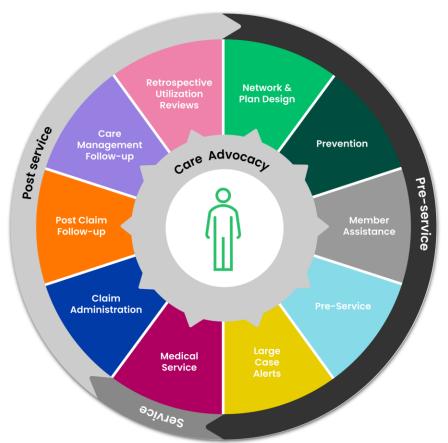
HealthEZ Client PMPM Plan Spend is 21 % below benchmark





HealthEZ Approach to Cost Containment

Advocacy & Care Navigation Follow the Continuum of Care





- · Network/PBM Discounts
- · Plan Design: Deductible, Co-pays, Exclusions
- · Stop Loss Protection



Medical Service

Care Mat Engagement:

- Complex Conditions
- · Monitors Inpatient Stays
- · Disease Management
- Service Coordination



- · LivEZ- Onsite Biometrics
- Boost Your Baby
- · Livongo Disease Mgmt



Claim Administration

- · High Dollar Claim Review
- Itemized Bill Review
- · Review for covered benefits,
- · COB, Subrogation, Stop Loss Payment Integrity Routing
- · Claim Negotiations
- Out-of-Network Discounts



- **HEZ Advocate:**
- Advises options for providers/RX
- Service Coordination
- Wellness advice



Post Claim Follow-up

- · Stop Loss funding
- · Subrogation Settlements
- · Post Payment Audits

- **Pre-Service**
 - EZChoice Provider Pricing
 - · Choice of Teladoc
 - Prior authorization
 - Site-of-Care Review
 - · Medical necessity
 - · High-cost drugs & funding



Care Management Follow-up

- · Monitor high risk patients
- · Monitor high-cost drugs
- · Disease Management
- Wellness



Large Case Alerts

Team of HEZ specialists are notified and work on intervention & cost mitigation.



Retrospective **Utilization Reviews**

• Trends in Utilization (e.g., Unnecessary ER Visits)



Beyond traditional care management

Proactive engagement

- Timely assistance
- Caring guidance
- A helpful nudge
- Better outcomes

It's all part of the advocacy services available to our members.





It's a hotline, not a call center

- Great member service is a choice
- Dedicated branded number
- Live service 7am—7pm CT, Monday–Friday
- No phone trees
- Email support
- Translation services available
- 24/7/365 helpline

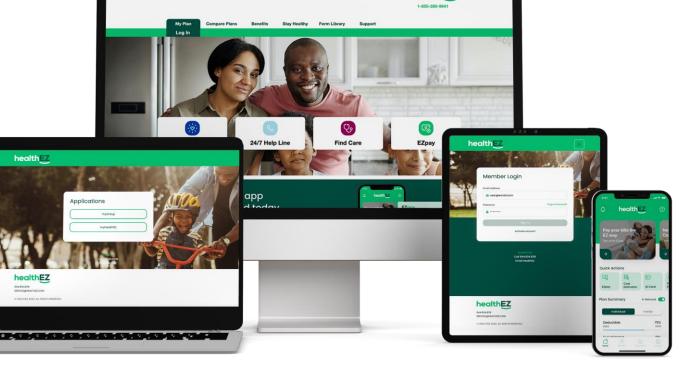






Member Engagement

Simple. Modern. Mobile.

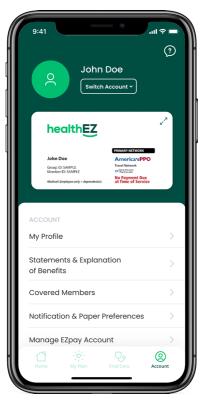


healthEZ

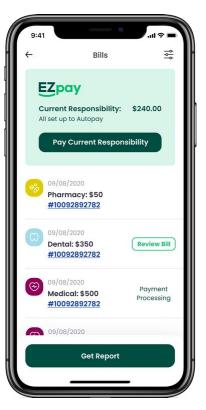


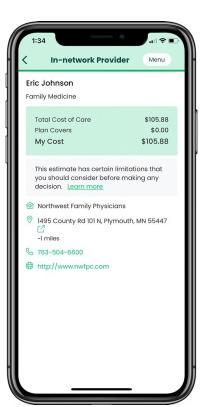
Everything in one easy to use app











Digital ID Card

Provider Locator

EZpay

EZchoice





Kayne Anderson

Capital Advisors, L.P.

THIS IS NOT A BULL DO NOT DAY

INIS IS NOT A BILL. L	JU NUI PAI
Statement Summary	
Member ID	.XXXXXXXXX456
Statement Date	2/21/1
New Transactions This Period Paid by your health plan Paid by your HealthEZpay accounts. You owe providers	\$301.84
Paid by Your Employer YTD: Medical Dental	\$117.30
Pharmacy	\$ 65.24

Your Resouces for Help Benefit Questions: <custom phone #.</pre>

OBs Available Onlin

The Explanation of Benefits that corresponds to this statement is available by logging in at ccustomwebsite.com>. If you have questions, call ccustom phone #>.

Flexible Spending Account (FSA)	
Claims Paid Year-to-date	\$0.00 \$500.00
Health Savings Account (HSA)	
	\$223.93 \$275.07
Health Reimbursement Account (i	HRA)
Claims Paid This Period Current Balance	NA
Credit/Debit Card Accounts	

Medical In-Network Deductible	
Met Year-to-Date	\$301.84
Medical In-Network Out-of-Pocket	
Met Year-to-Date	\$301.84
Dental Benefit	
Used Year-to-Date	\$117.30

MEDICAL							
Service Date	Patient	Provider	Billed Amount	Network Discount	Employer Payment	You Have Paid*	You Owe Provider
01/15/2011	Jane	Care Clinic	\$248.00	\$24.07	\$0.00	\$223.93	\$0.00
01/15/2011	Alex	County Hospital	\$911.00	\$391.60	\$441.49	\$77.91	\$0.00

Service Date	Patient	Provider	Billed Amount	Network Discount	Employer Payment	You Have Paid	You Ov Provide
01/12/2011	Jane	Family DentalCare	\$138.00	\$20.70	\$117.30	\$0.00	\$0.0

Service Date	Patient	Pharmacy	Drug Name	Retail Amount	You
01/16/2011	Jane	Corner Pharmacy	AZITHROMYCIN TAB 250MG	\$48.00	\$8.00
01/21/2011	Alex	Corner Pharmacy	NUTRINATE CHW	\$48.00	\$8.00

For a copy of your detailed Explanation of Benefits (EOB), log in at <customsite.com> and click on "Statements" in the left sidebar.

One Simple Statement

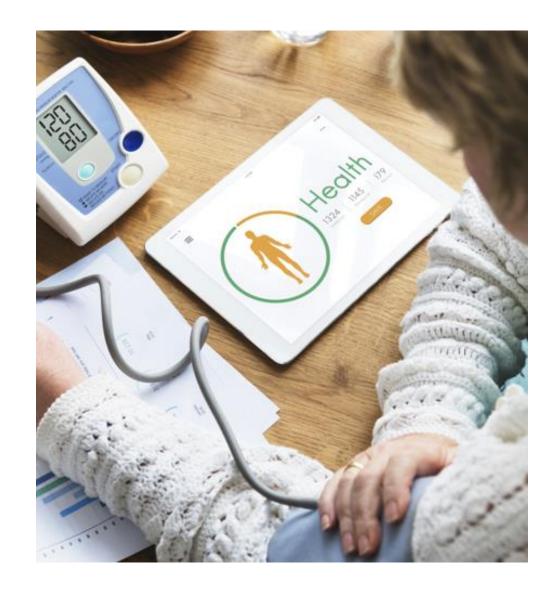
Easy to read summary

Convenient, monthly statement ensures members have insight into claims activity at a glance.

LiveZ

Health and wellbeing program completely customized to employer's needs

- Health Risk Assessments and On-site biometric screenings
- Chronic Care Management
- Personalized wellness plan
- Livongo







Boost Your Baby Maternity Support

Expectant mothers and fathers will have a dedicated one point of contact throughout their pregnancy journey.

Core Benefits:

- Referrals to internal programs for additional support.
- Providing tips on how to stay happy and healthy during and post pregnancy.
- Maternity support offered through pregnancy till 6 months postpartum.

"It was the best surprise at the beginning, and it was so convenient throughout the pregnancy and early weeks. Thank you for helping me with random questions, easing my mind and helping me navigate this new season of life."

- Bre, previous BYB participant



Our personal approach leads to higher engagement





EZfundingTM New level-funding product overview





Serving size	25-250 live
	% Daily Value
Surplus returned to group	100%
12 fixed payments	100%
Access to plan data	100%
5-star member service	100%
Built-in stop-loss coverage	100%
Proactive care management	100%
Al underwriting (No IHQs)	100%
Flexible commission structure	e 100%
Surprises	0%
Minimum attachment point	0%

INGREDIENTS

National TPA: HealthEZ

Network: Cigna®, America's PPO

PBM: Magellan®

Stop loss: Nationwide®

MGU: AccuRisk D³

*This product contains no cost surprises or minimum attachment point



A self-funded health plan that empowers employers

EZfunding™ from HealthEZ offers small to midsize employers control of a top two business expense. With all of the elements of a comprehensive medical plan, EZfunding features competitive network options, proactive care management, 5-star service and Nationwide's medical stop loss protection.



An all-in-one plan with flexibility

Eliminates the need to piece together each element of your own self-funded plan. It brings together flexible plan design, great networks with flexible pricing, a top third-party administrator, and comprehensive stop loss protection in one turnkey solution



Data that keeps you informed

Provides transparency into your medical and pharmacy expenses, so you know exactly where your health care dollars are going and why. This can help you make the most informed decisions about your plan now and in the future



A proactive approach

Includes integrated solutions such as Center of Excellence programs, comprehensive care management, transparent pharmacy data and competitive network pricing. Plus, stop loss protection from Nationwide®, so you're protected against the unexpected.



	Major Carrier Fully Insured	Major Carrier Level Funded	EZfunding from HealthEZ
Market	National	National	National
Group Size	2-250	2-250	25+
Primary Network	Aetna, Cigna, UHC, BCBS	Aetna, Cigna, UHC, BCBS	APPO / Cigna
Stop Loss Carrier	Carrier	Carrier	Nationwide
Pharmacy Benefit Manager	Carrier	Carrier	Magellan
Limited plan design	Yes	Yes	No
Customized Plan Exclusions	No	No	Yes
Custom Employer Benefits Website	No	No	Yes
Custom Employer Member Service Phone Number	No	No	Yes
Dedicated Account Manager	No	No	Yes
Specialty Drug Carve Out	No	No	Optional
Minimum Attachment Point	NA	No	No
100% of Surplus Returned to Employer	No	No	Yes
Premier Disease Mgmt Program and Engagement	No	No	Yes
Medical trend review	No	No	Yes
Care advocacy	No	No	Yes
Al Underwriting	NA	Yes	Yes
Participation Requirements	Yes	Yes	No
Renewal Required to Receive Surplus	NA	Yes	No
Access to claims data	No	No	Yes
5-star Member Service	No	No	Yes



Growing your business doesn't get any easier



Commissions
Flexible
commission
structure





Incentives
New Group:
\$75 Per subscriber*
(One-time
payment)

Renewal: \$30.00 Per subscriber* (One-time payment)



MAKE LIFE

My daughter and I have an appointment to get new glasses tomorrow.

After that?

We'll see.

NASA is about to launch a new mission to say sorry to the aliens for our pollution in space.

Mission Apollo G.

I sued the airline for losing my luggage. I lost my case.









Why Companies Use PEOs



To reduce cost of healthcare & benefits



To free up time to focus on core business competencies

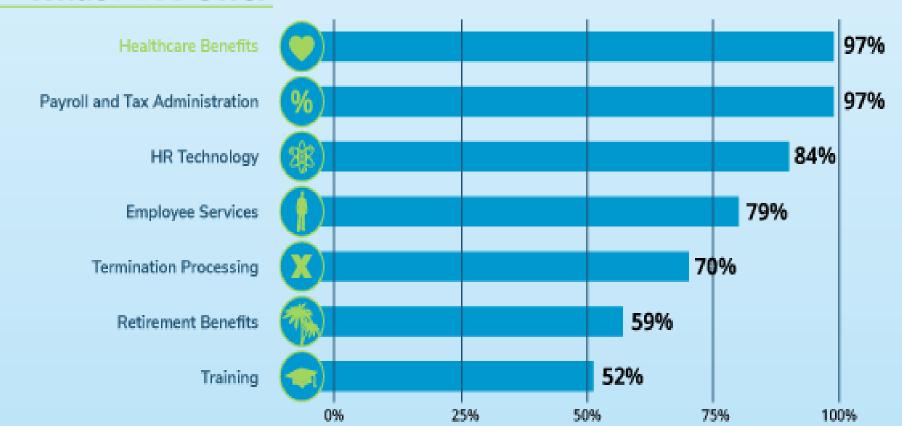


To reduce cost of HR administration



To improve recruitment & retention

What PEOs Offer



Businesses in a PEO arrangement



Grow 7-9% Faster



Have 10-14% lower turnover.



Are 50% less likely to go out of business.























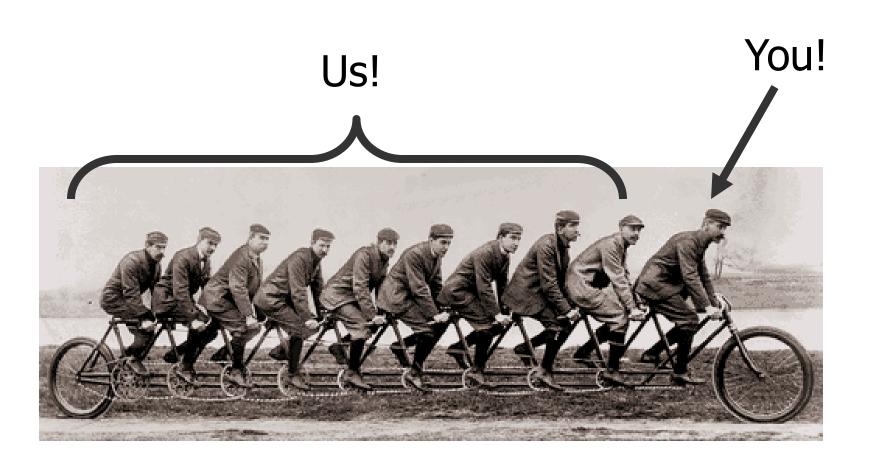






- **►** Local Plans and Local Control
- > Exclusive Arrangements
- **≻**Active Strategic Management
- **≻**Active Risk Management

Employee Administration and compliance just got easier.





Health Carrier

- Billing
- Claims
- Adds/Deletes

Vendors

- Ancillary Carriers
- FSA Admin
- COBRA/State Cont.
- Payroll
- 401k
- Workers' Comp

Compliance/HR Advice

- Notifications
- Discrimination Test
- Terminations







Is here to support you. We value our Broker Relationship's





Justworks

Warner Pacific Q4 Partner Update

October 4th, 2023

Presentors

Dylan Fitzsimmons

[Senior Account Executive]



Dedicated Broker Channel Support Expert



Phone

+1 646.893.7561

Email



dylan@justworks.com

Agenda:

- 1) Overview / Refresher of Justworks
- 2) Our differentiators in the space
- 3) Approach to benefits
- 4) Updates and broker comp

Justworks Mission:

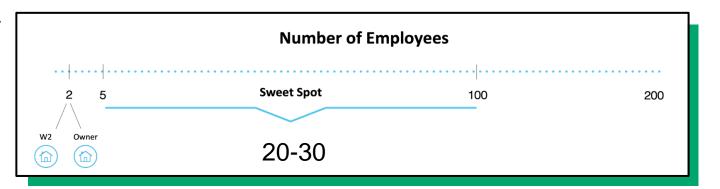
"To help entrepreneurs and small businesses grow with confidence."

Overview

States of Operation	All 50 States	
Number of companies	~ 10,000+	
Number of employees	~200,000+	
Average company size	20 employees	
Customer retention rate	~ 98% YOY	
Renewal date	November 1st	
Master Medical Carriers	Aetna, Kaiser, UHC	
Ancillary Carriers	Aetna, MetLife	
Workers Compensation Carrier	Zurich	
Medical Carve out?	Available	
Workers Comp Carve out?	Only for 50+ employee companies and will need to consult with sales before	

Target Customers

- Industries: White & Light Gray Collar
- Companies with growth agendas.
- Multi-state locations.
- Remote & distributed workforces.
- Need for HR Support & Compliance.
- Wants to explore access to rich large group benefits.



The PEO Difference



Quality Benefits

Provide your team access to bigcompany benefits and perks they deserve.

- Medical, dental, and vision insurance
- 401(k) retirement
- Life insurance
- **HSAs & FSAs**
- Pre-tax commuter benefits
- Fitness memberships



Automated Payroll

Schedule payroll seamlessly and make any payments you need to — at no extra cost.

- Full-time and part-time employees
- Contractors and vendors
- Bonuses, commissions, and expense reimbursements



HR Tools

Ditch the spreadsheets and manage your team from one place.

- Company calendar and directory
- Paid time off tracking
- Online employee onboarding
- Document center to store all your essential employment docs
- Pre-built reports to track business metrics



Compliance Support

Don't sweat the small stuff. Lean on us for employment-related compliance support.

- Payroll taxes (940/941s)
- Tax forms (W-2s & 1099s)
- Workers' compensation
- Multi-state employee management
- Unemployment insurance management
- Disability insurance
- Harassment Prevention and **Inclusion Trainings**













Minimum Participation

Basic Only (no medical)

- 1 W2 / 1 unpaid owner
 - o 2 person company, with at least 1 W2 EE and 1 K1 (unpaid owners)

Plus - medical

- Minimum group is 2 EEs from two separate households
- If the company has 2 or more employees, then 50% of the eligible employees must enroll
- No more than 10% of enrolled employees on COBRA

Pricing

- Basic \$99 PEPM with benefits through Justworks
- Plus \$59 PEPM carving out medical dental and vision benefits

HR Consulting & Support

Access to in-house HR Consultants, tools, and resources to help manage your client's most important asset — their people.

24/7 365 Customer Support for all employees and admins





Phone 888-534-1711

Email support@justworks.com







Chat

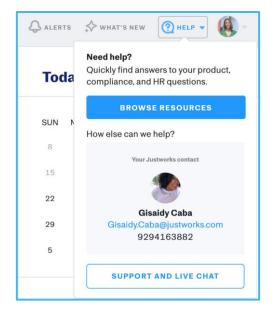
Slack

SMS

(858) 247-0005

Justworks.com

1:1 Account Management for all customers 15 employees and larger



Certified HR Consultants available to all admins





Just Thrive Program

The Just Thrive program is a mission-based program that helps support minority and women-owned businesses

\$6k credit towards admin fees for newly formed businesses

For newly-formed prospects/customers that have at least 50% ownership by someone who is a member of an underrepresented group OR are a 501(c)3 nonprofit eradicating racism.

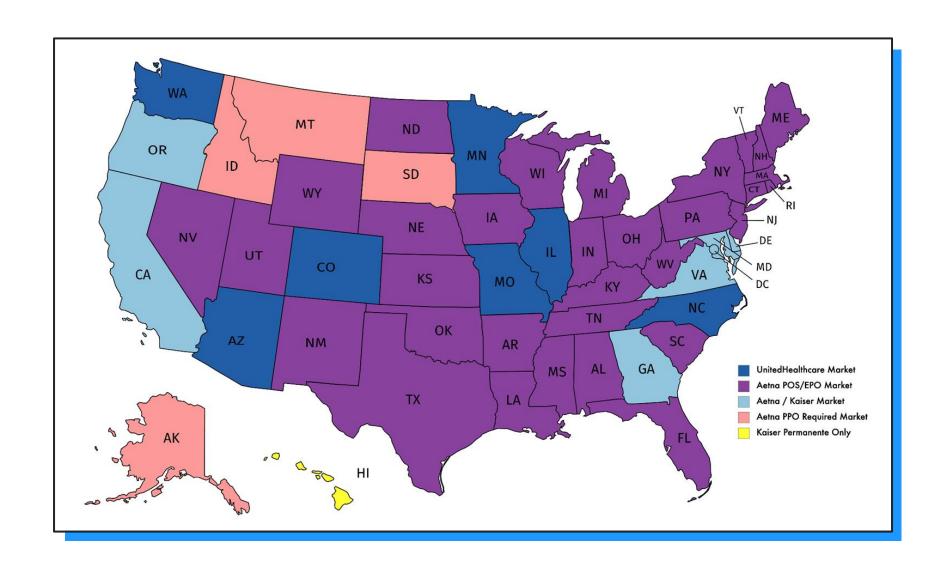
\$2k credit towards admin fees businesses past their first year of formation

For prospects/customers that have at least 50% ownership by someone who is a member of an underrepresented group or are a 501(c)3 nonprofit focused on eradicating racism.

Solution Provider	PEO Renewal Date	Notes	One-pager
ADP Total Source	June 1st	Payroll,PEO,ASO	<u>Comparison</u>
Paychex	September 1st	Payroll,PEO,ASO	<u>Comparison</u>
Insperity	Whenever the client starts	PEO only	<u>Comparison</u>
TriNet	Jan 1st, April 1st, July 1st, Oct 1st	PEO only	Comparison
Rippling	December 1st	Payroll only & PEO Solution	Comparison
Gusto	N/A	Payroll only	<u>Comparison</u>

Medical Carrier Overview

- 3 medical carriers
 - Aetna
 - Kaiser
 - United Healthcare
- Admins will select up to ~4-6 medical plans to offer to their employees
 - If Aetna paired with Kaiser opportunity to offer to 9 plans
- Plans range from PPO, POS, EPO, HMO, & HDHP / HSA



Medical application

- Census with dependent info
- Most recent invoice
- Summary of benefits, plan details
- If invoice and census does not match, will need explanation, e.g. new hire
- If renewal is within 90 days, it is required to collect their renewal packet: renewal premiums and SBCs
- If claims or experience information is available we will require it for underwriting.

Ancillary Benefits:

Short Term Disability
Long Term Disability
Basic Life + AD&D
Supplemental Life
Commuter



Perks:

kindbody















November 1st, 2023 Renewal Cap

How were renewals this year?

85% < 10%

78% < 5%

5%

United Healthcare

6%

Aetna

Monthly Residual Broker Referral Compensation

Tier	Medically-Enrolled PEPM	Non-Enrolled One Time
1. 1-99 Lives / EE's	\$30.00	\$100.00
2. 100-499 Lives / EE's	\$35.00	\$100.00
3. 500+ Lives / EE's	\$40.00	\$100.00

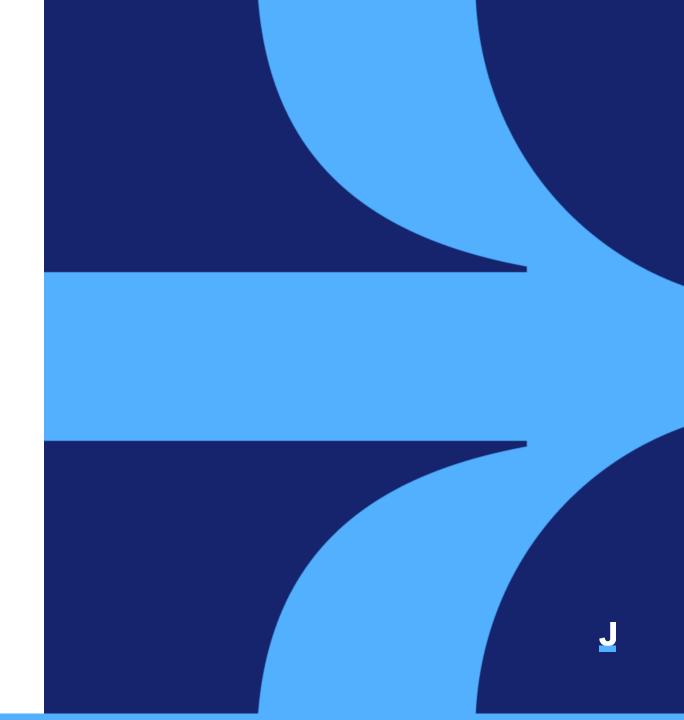
^{*} Enrolled employees are those on a Justworks master medical plan.

- Compensation on all W2 employees of a Group.
- Aggregation of Lives for a higher payout tier.
- No Broker of Record Changes (BORS), we don't honor BOR's.
- We will not upsell services without your knowledge or involvement.
- Monthly payout for the lifetime of the account.

Broker Partner Guide

Exciting Announcements

- Updated Broker Compensation
- Productization & Expansion
 - Expense Management
 - Greenhouse Integration
 - International Contractor Payments
 - Kindbody Partnership
 - Stand alone Payroll Only
 - Benefit Market Optionality
 - Employer of Record Solution
 - Enhanced Reporting & Analytics



Thank you!

Dylan Fitzsimmons

[Senior Account Executive]



Dedicated Broker Channel Support Expert



Phone

+1 646.893.7561



dylan@justworks.com







KAISER PERMANENTE®

Why Kaiser Permanente?

Sheena Downing





97%

Group retention

15 years Average tenure



Research facilities

\$100M+

Community investment annually

#1 health plan

insurance.com

Most **5-star** plans





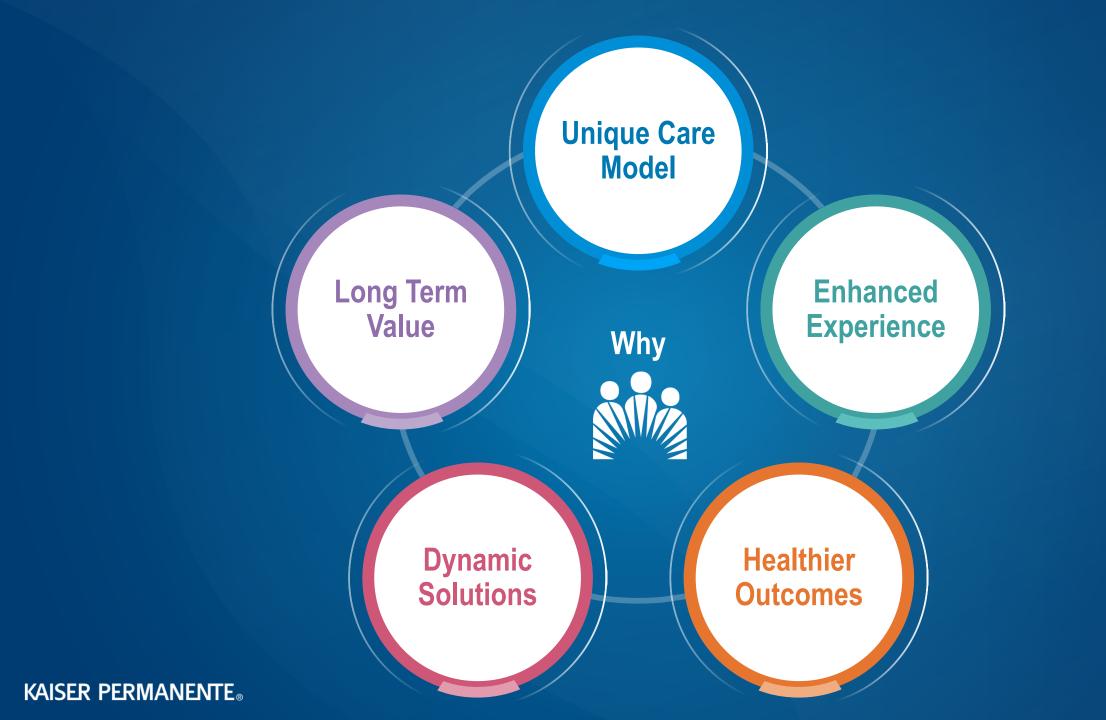
People's Voice Winner

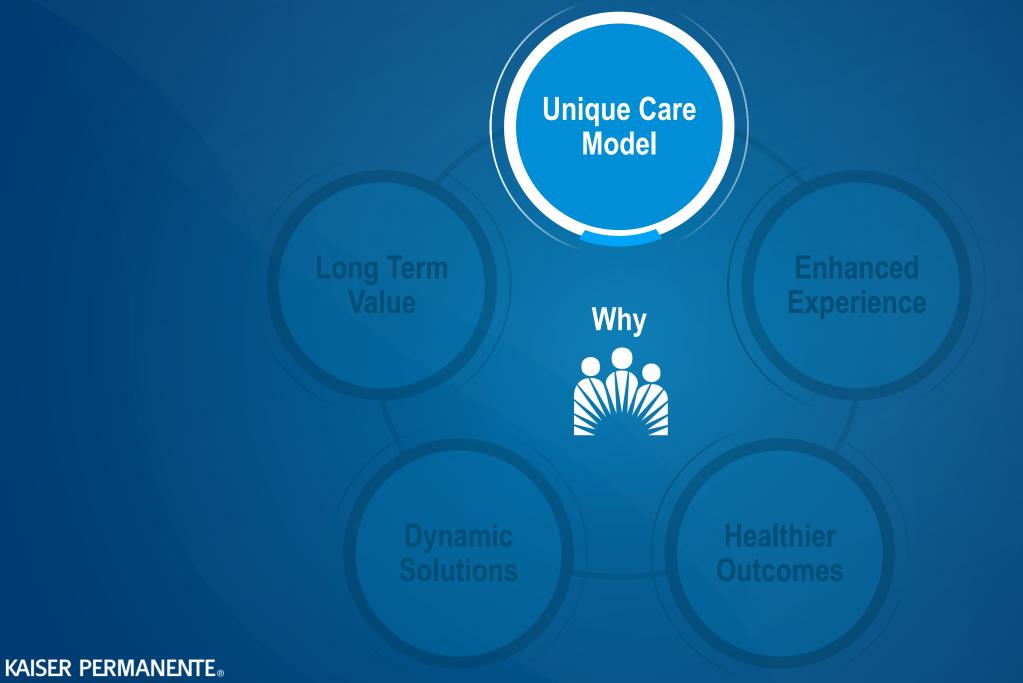
Most ethical companies







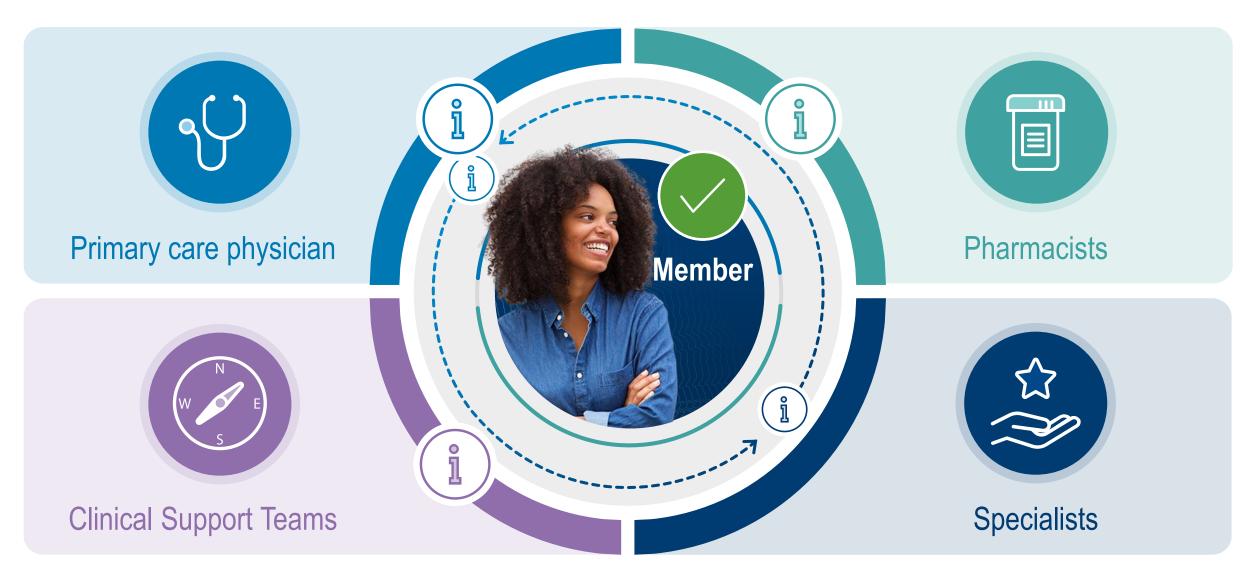




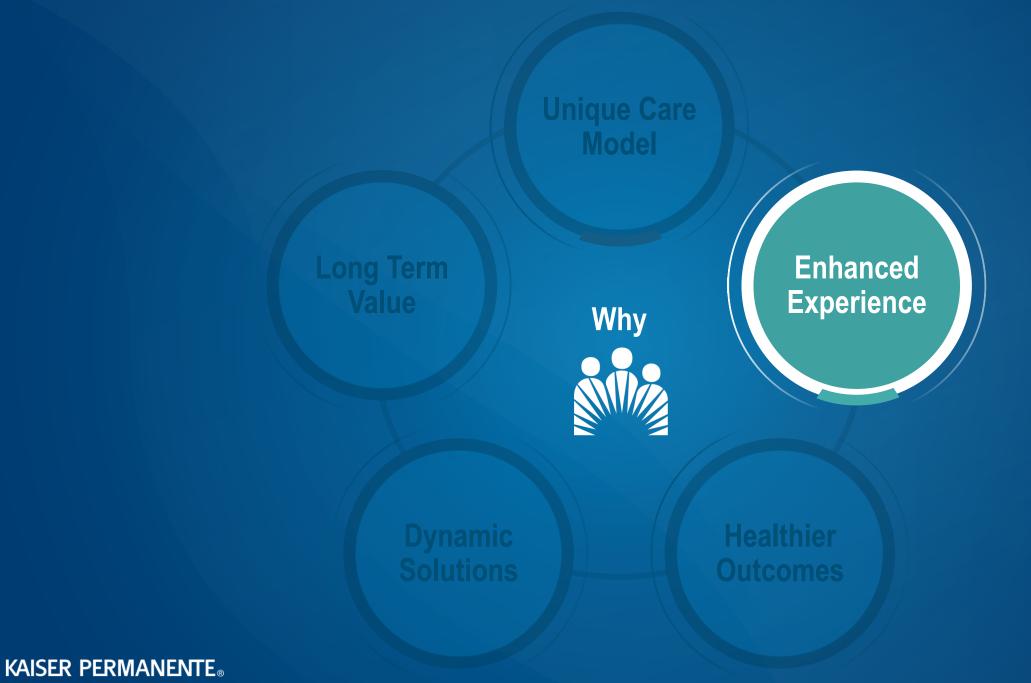


Unique Care Model





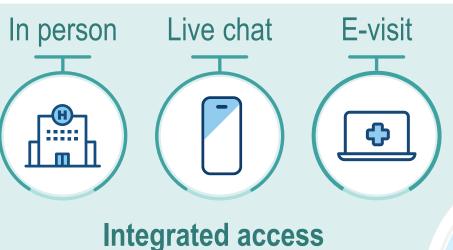






Enhanced Experience









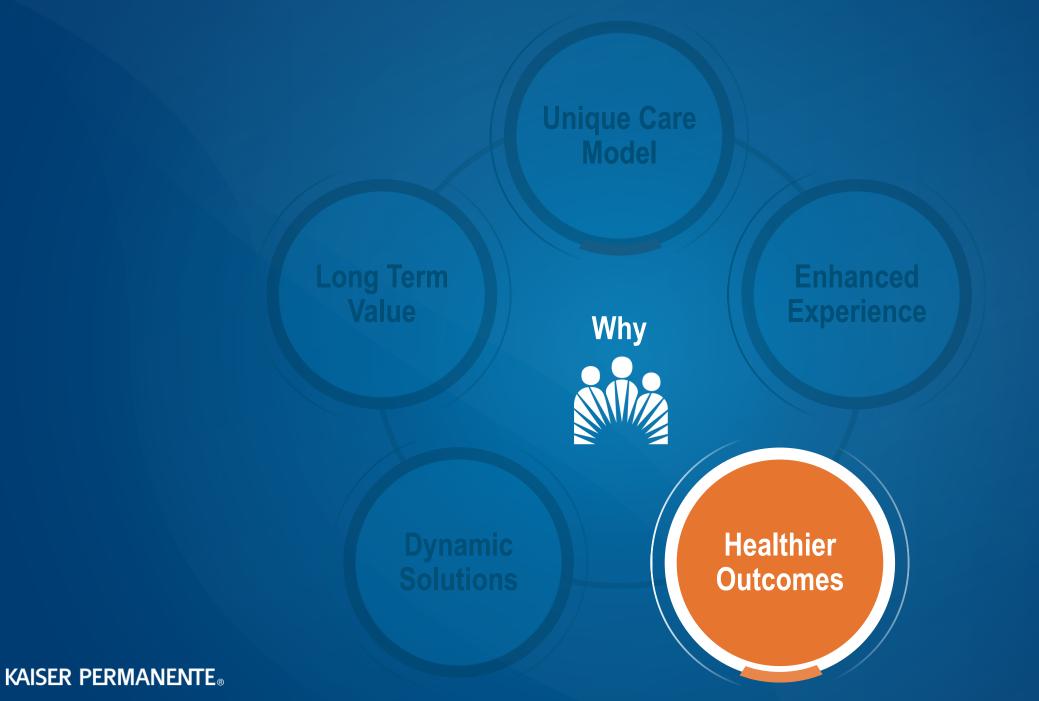
Provider care choice



One mobile app



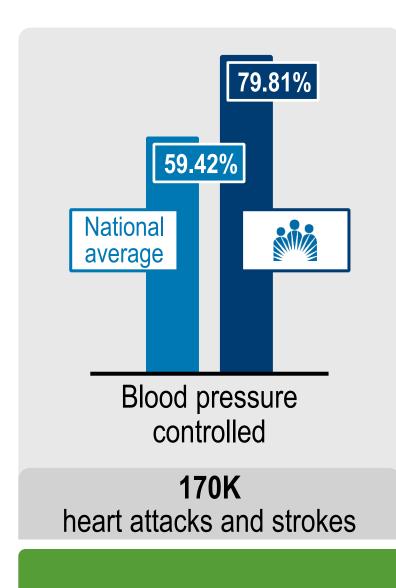


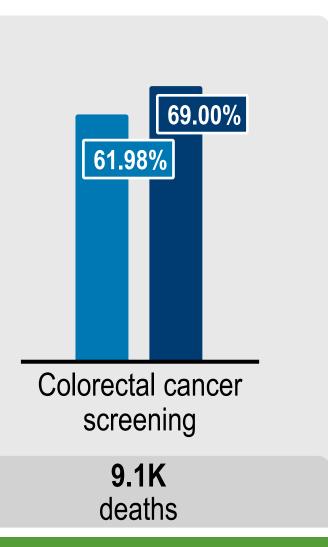


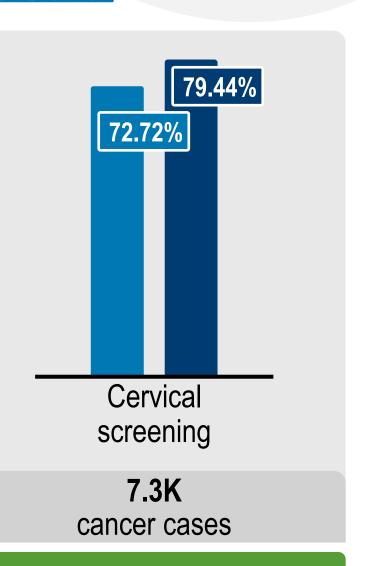


Clinical Results

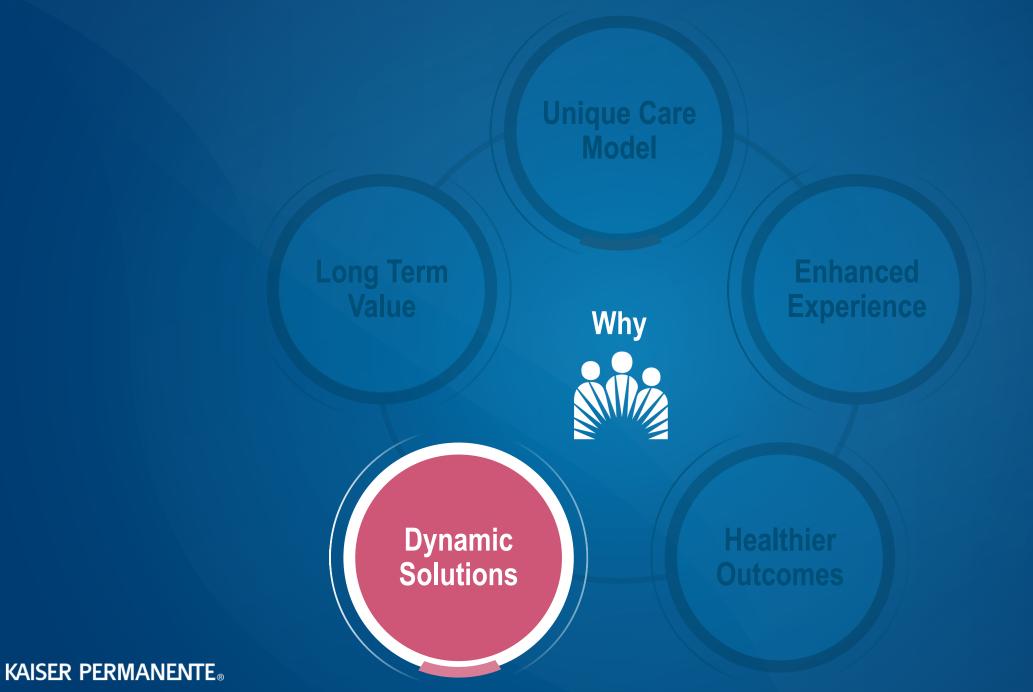








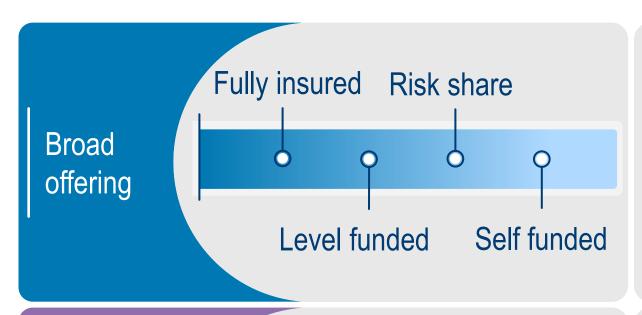
Prevented annually





Dynamic Solutions





Out of network visits

Member choice





Strength by Teladoc Health



Innovation partners



Choice PPO: Introduction

Why is KP pursuing a new PPO?

PPO Dominance



Sole Carrier Market



Improve Choice Product Portfolio



Why should groups choose the Choice PPO?



Meeting your needs and those of your employees

The new Kaiser Permanente Choice PPO plan gives you more ways to offer affordable, high-quality health plans for your employees — no matter where they live.

More choice

- More than 1,100 Kaiser Permanente doctors in Colorado, one of the state's largest multispecialty physician groups
- An extended network of Colorado's leading doctors and hospitals, including a state-wide network with access to providers in all 64 counties in Colorado
- Out-of-network coverage available

More flexibility

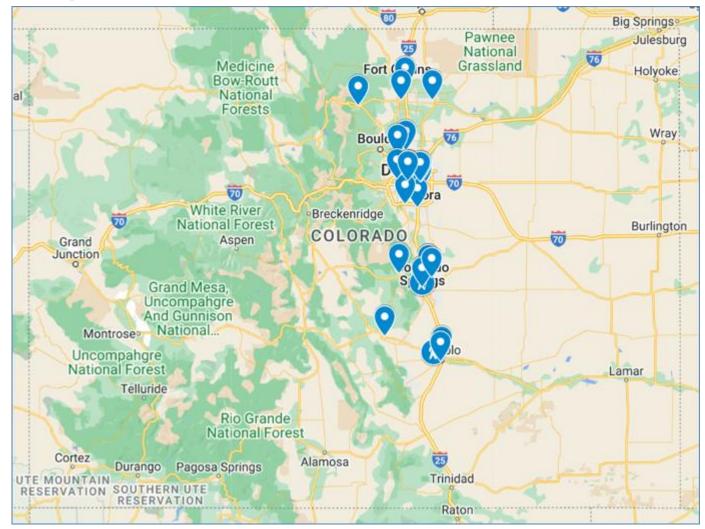
- Statewide and nationwide in-network coverage for employees who:
 - Live inside or outside the Kaiser Permanente Colorado service area
 - Live outside of Colorado

More simplicity

- Plan administration made easier with one carrier managing care and coverage for all your employees
- A range of health plan options to meet the needs of your growing and evolving workforce

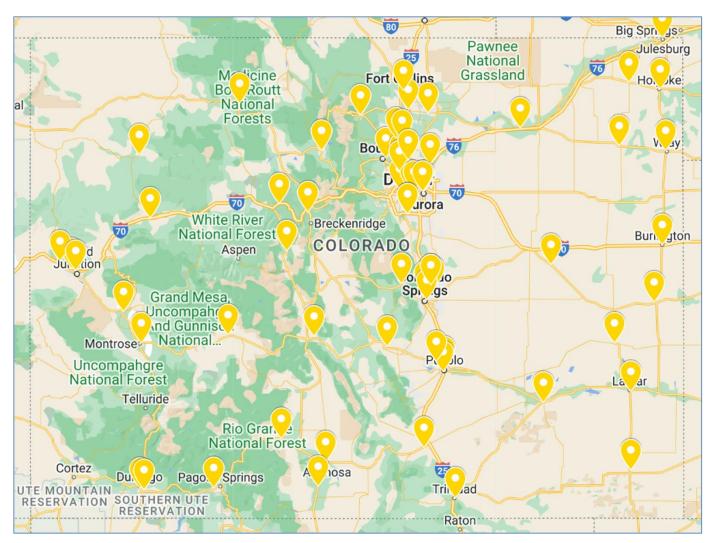


Current HMO network: hospitals and health systems across the Front Range





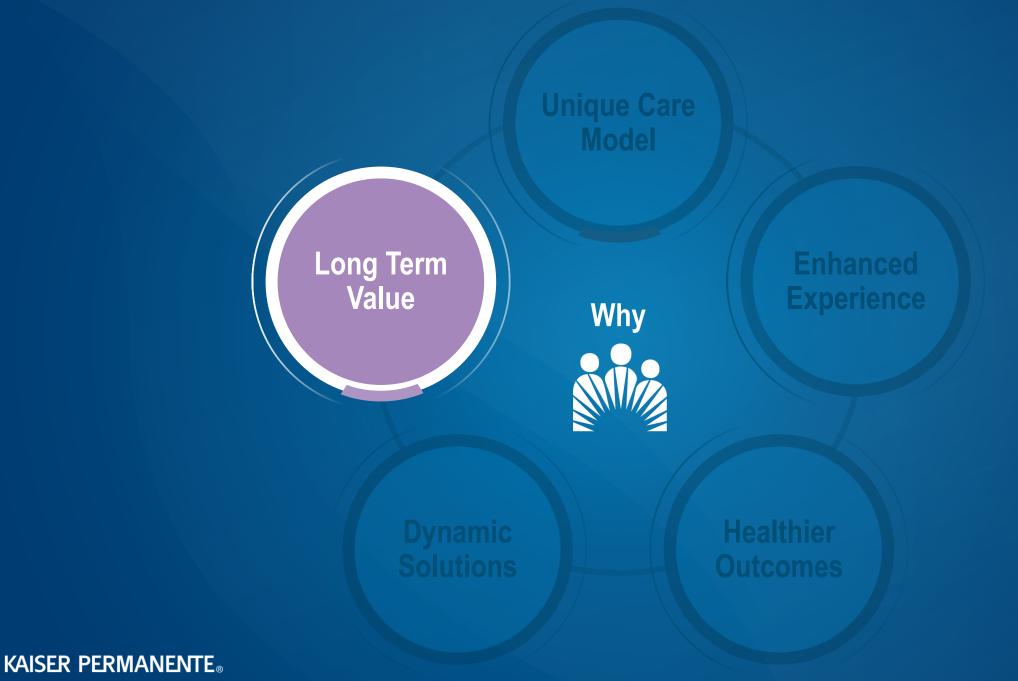
Choice PPO: new statewide PPO network



In-network care from **Kaiser Permanente**, plus providers from hospitals and health systems **across Colorado**, including:

- Boulder Community Health / Boulder Community Health Medical Group
- Craig Hospital
- Parkview Medical Center
- Rio Grande Hospital / Rio Grande Medical Group
- SCL Intermountain Good Samaritan, Lutheran, Platte Valley, Saint Joseph, St. Mary's / SCL Intermountain Medical Group
- Spanish Peaks Regional Health Center / Spanish Peaks Medical Group
- UCHealth all hospital assets
- And more!





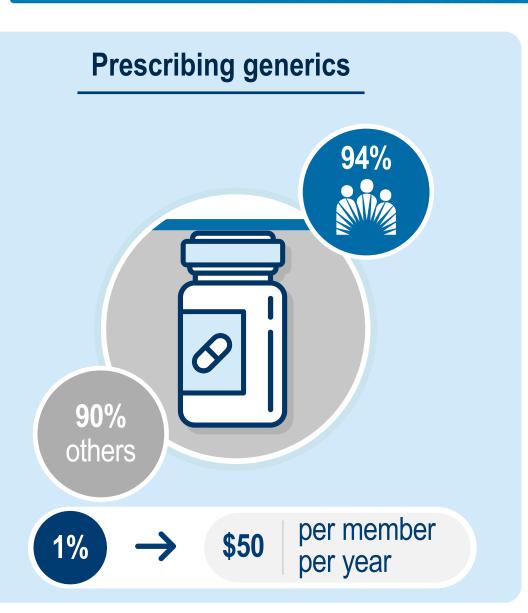


Controlling Costs



\$140M

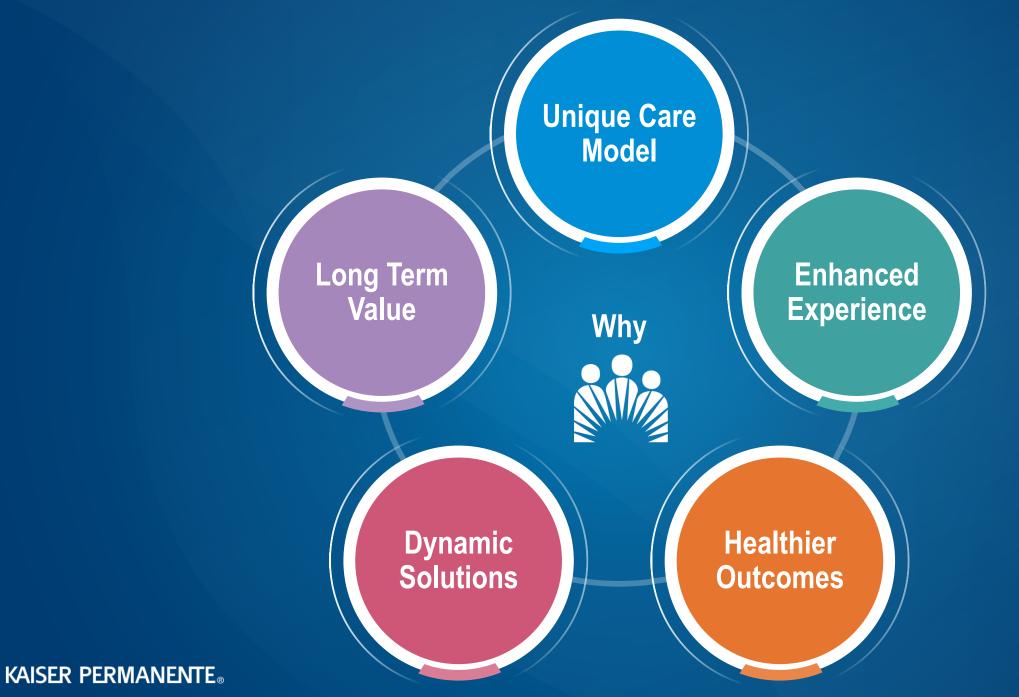
savings



Adoption of cancer biosimilars 90% Year 1

70%







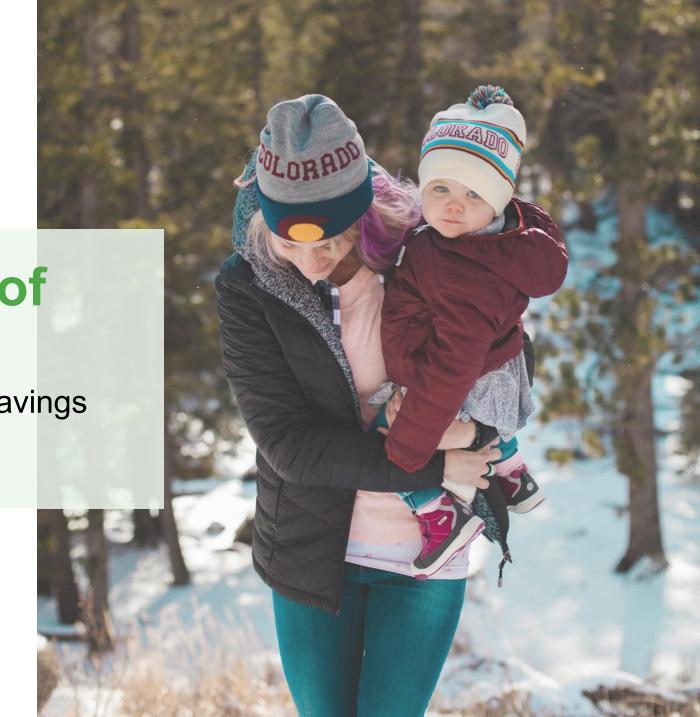




Our Mission

"To create the future of health benefits

by delivering consistently better cost savings and clinical value to the people and businesses of Colorado."







 70% of services have no- or low-cost options for members

• One-Call Concierge experience for network navigation

- 25-40% Discounts
 compared to market at direct contracted providers
- \$1,254 PEPY
 Savings for current sold groups



Post-CAA Health Plan

Curated, High-Performance Health Plan

- Full Transparency
- Full Access to your Data
- CAA Compliant Agreements
- No Hidden Fees
- More Control

Outcome:

Activated FIDUCIARIES pay less for healthcare





39North Ecosystem

Unlimited Primary Care Virtually or
At-Home

Steers to **High-Performance Networks** of

Providers



Supported by Concierge-Level

Care Coordination

Finds
Low- or No-Cost
Services for Members

ID's Opportunities for **Advanced Rx Sourcing**



∩ice is the Quarterback to Care

70% of day-to-day healthcare services are now free to members



Unlimited Primary Care Wellness, Acute, & Chronic



Virtual Physical Therapy
Diagnosis & Treatment



Virtual Mental Health
Preventive Therapy



Formulary
550+ Meds & Delivery



Specialist Referrals
In-Network Referrals



No-Cost Labs 35+ Labs



Imaging
X-Rays & Ultrasound



Care Coordination

Medical Record Exchange



Total Knee Arthroplasty

CPT: 27447

	AMB SURG CENTER	CENTURA HEALTH	BANNER HEALTH	UCHEALTH	
Ave. Large Carrier		\$45,996.48	\$42,481.47	\$54,188.62	
39North	\$18,049. 00*	\$26,796.00	\$11,480.00	\$61,476.90	
Differenc e		\$19,200.48	\$31,001.47	\$(7,288.28)	
%		41.7% savings	72.9% *Bur	d(13.75%)g include increase	s fac al ser

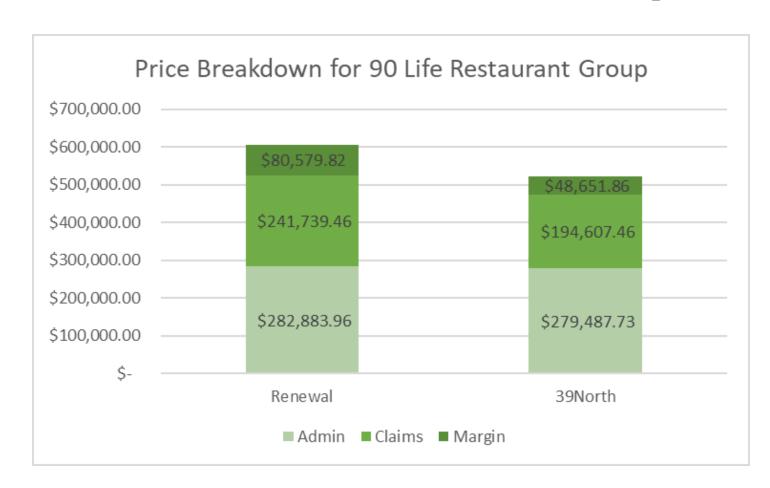


Savings Analysis: Real World Examples

"The only way to pay less for healthcare is to pay less for healthcare" – Drew

Represents 13.6% savings, level-funded with plan mirroring

\$82,500 savings (not including surplus)





Rx Reprice Mid-Sized CT^{rx} HVAC Company

\$166,779
savings
opportunity
(43% of total
spend)

Direct Rx Solutions						
Incumbent Total	\$389,087					
Direct Rx Solutions Total Cost	\$222,308					
Total Savings	\$166,779					

Direct Rx PBM					
Network Total	\$359,397				
Clinical Savings	\$61,490				
Manufacturer Coupons	\$28,106				
Total Direct Rx PBM Cost	\$269,801				

Intercept Rx					
Direct Rx PBM Total	\$269,801				
Intercept Rx Savings	\$47,494				
Direct Rx Solutions Total Cost	\$222,308				







39N Core: 3 Tier Plan Design

Disappearing Deductibles for Using our Centers of Excellence	Tier 1: HPN Banner Health	Tier 2: In-Network First Health.	Tier 3: Out-of- Network Direc - CARE	1
Network for seeing doctors	Centura Health.		Fair Market Network	S
PCP Copay	\$0	\$35	\$50	
Specialty Copay	\$0	\$75	\$125	
Deductible (Bronze/Gold)	\$1,000/\$500*	\$4,000/\$1,000	\$8,000/\$6,000	
Out of Pocket Max (Bronze/Gold)	\$2,000/\$1000*	\$8,000/\$4,000	Unlimited	
Disappearing Copays/Deductibles	✓	X	х	
Centers of Excellence	✓	х	х	
Unlimited Direct Primary Care	✓	х	х	he
Patient Steerage	✓	x	х	V
Quality Vetted Providers	✓	X	X	

11% average savings

*Over 70% of daily ealth services offered with no out-of-pocket expenses



Why Now: A New Era in Healthcare



CAA Identifies the Health Plan Sponsor as a Fiduciary



Transparency results in more savings and better outcomes



Potential Exposures for your clients:

- Government action for non-compliance
- Penalties up to \$100/day/EE



Groups that Fit Well with 39North

Frustrated with Carriers

Wants more transparency into pricing & data

Wants more Control

Implement custom solutions based on their unique needs

Wants a Better Experience

Especially with easy access and incentives for good behavior

If you have a CO employer, this should be a 39North Quote!

- Groups comfortable with meeting in person
- 25+ Employee Life Groups
- Is currently or wants to be Self- or Level-Funded
- Network options available for out of state members

Quote your groups with 39North

Send Submissions to WP
Sales Exec or to
Quotes@39N.co
25-100 (Level Funded)
100+ (Self Funded)

Hello@39N.co | (720) 402-7773 | www.39N.co



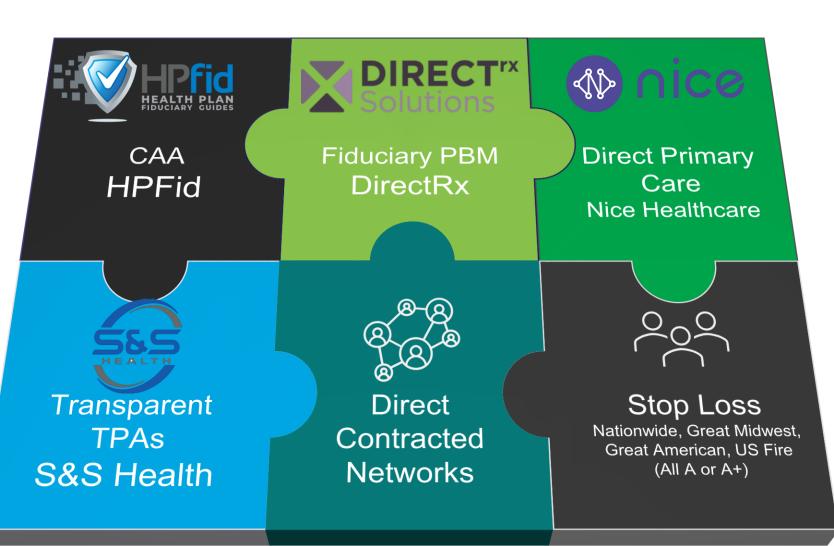


39North Health Plans

Curated, High-Performance Health Plan

Bundled Self-Funded Health Plans

- S&S Health (200k lives)
- DirectRx (40k lives)
- Nice (70k lives)
- Only A and A+ rated carriers







UnitedHealthcare – Small Group & Level Funded

Small Group

- Boulder Community Hospital has re-contracted for 3 years
- CDP has long term contacts with 3 hospital and also provider systems
- CDP is going from 8 counties to 11 counties (Centura-based)
 - NOW expanding Larimer, Weld, Ft. Morgan and will include Banner Heath
- SelectCO is in 14 counties –UCHealth-based (can't combine with CDP)
- If approved by the DOI- <u>Care Cash</u> will be available on Premier/Premium Designation Choice Plus plans only. First \$200/\$500 to offset member cost and reloads each year + any left over funds. Up to \$2k max
- \$29 PEPM (new business and upon renewal)

☐ Motion is available on LF all plans now until 1/1/24. Then it switches to Premium Rewards. (Motion is not available on FI.)

Level Funded

Select Colorado is now available for 9/1 /23 effective dates

- Service area includes Front Range & Western Slope
- Provider systems include UC Health

- (Rewards are just for the subscriber and spouse)
- Available for groups located in a 14 county service area: Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, El Paso, Jefferson, Larimer, Mesa, Pueblo, Routt, Teller, Weld
- Cannot be sold with Doctor's Plans (same for UHC-FI)
- Benefits are tiered: \$0 copay for tier 1 PCPs, Virtual Visit & UR care, higher co pays, deductibles and out of pockets for tier 2 providers
- New Product G rid available
- > Navigate is available to ee's who reside in other states (where Navigate is available...contact your UHC Sales Rep to confirm availability)
- ➤ Participation requirement of 50% excluding valid waivers for 10-50 enrolled ee's.
- ➤ 2024 Product Grid in Excel

UHC Premium Rewards Fully insured COPAY plans still get the "core" benefit of \$300. HSA plans get the \$1000

My favorite teacher back in school was Mrs. Turtle.

Funny name, but she tortoise well.



My math teacher called me average. How mean!





We hope you enjoyed this presentation!

