



# Applied Benefits Designer

## Overview

# Applied Benefits Designer

- Stronger connection to the C-Suite
- Delivering a Better and Safer Client Renewal / Proposal Experience
- Supporting greater Efficiency, Growth, Differentiation, & Client Retention
- Greatly impacting Small Group Profitability

# ABD eliminates traditional “spreadsheets”

Sample Company Spreadsheet - Excel

File Home Insert Page Layout Formulas Data Review View Help Tell me what you want to do

Clipboard Font Alignment Number Styles Cells Editing

Medical Cost Analysis for Sample C  
Effective Date: 12.1.2016

			Current Plan Anthem BA Option22 with Rx Option W	Renewal Anthem BA Option22 with Rx Option W	Option 1 UHC Gold Choice 500 Traditional - Plan ADVY	Option 2 UHC Gold Choice Plus 2000 Balanced - Plan ADVZ	
7 Rates	Counts			(Based on 13 month rate guarantee)			
8 Single	20		\$684.70	\$630.84	\$621.73	\$600.43	
9 Employee + Spouse	2		\$1,437.87	\$1,324.76	\$1,243.46	\$1,200.86	
10 Employee + Child(ren)	4		\$1,232.46	\$1,135.51	\$1,150.20	\$1,110.80	
11 Family	3		\$1,385.63	\$1,829.43	1771.93	\$1,711.23	
12 <b>Estimated Monthly Premium</b>			<b>\$27,456.47</b>	<b>\$25,296.65</b>	<b>\$24,838.11</b>	<b>\$23,987.21</b>	
13 <b>Estimated Annual Premium</b>			<b>\$329,477.64</b>	<b>\$303,559.80</b>	<b>\$298,057.32</b>	<b>\$287,846.52</b>	
14 Deductible (Embedded or Non)			Embedded	Embedded	Embedded	Embedded	
15 Individual			\$2,000 / \$6,000	\$2,000 / \$6,000	\$500 / N/A	\$2,000 / \$6,000	
16 Family			\$4,000 / \$12,000	\$4,000 / \$12,000	\$1,000 / N/A	\$4,000 / \$12,000	
17 Coinsurance (paid by member after ded)			20% / 40%	20% / 40%	20% / 100%	20% / 45%	
18 Out-of-Pocket Maximum (including ded)							
19 Individual			\$5,000 / \$10,000	\$5,000 / \$10,000	\$4,500 / N/A	\$3,500 / \$10,000	\$6,250 / \$12,500 / \$6,250 / \$18,750 / \$6,450 / \$18,000
20 Family			\$10,000 / \$20,000	\$10,000 / \$20,000	\$9,000 / N/A	\$7,000 / \$20,000	\$12,500 / \$25,000 / \$12,500 / \$37,500 / \$12,900 / \$37,000
21 Hospitalization (In / Out Patient)			20% Coins / 40% Coins	20% Coins / 40% Coins	Ded + 20% Coins / N/A	Ded + 20% Coins / Ded + 45% Coins	Ded + 20% Coins / Ded + 50% Coins / Ded + 20% Coins / Ded + 50% Coins / Ded + 20% Coins / Ded + 30%
22 Emergency Room Facility Services			\$250 Copay + 20% Coins / \$250 Copay + 20% Coins	\$250 Copay + 20% Coins / \$250 Copay + 20% Coins	\$300 Copay + 20% Coins / \$300 Copay + 20% Coins	\$300 Copay + 20% Coins / \$300 Copay + 20% Coins	\$300 Copay + 20% Coins / \$300 Copay + 20% Coins / \$300 Copay + 20% Coins / \$300 Copay + 20% Coins / \$300 Copay + 20% Coins / \$300 Copay + 20% Coins
23 Urgent Care			\$75 Copay / 40% Coins	\$75 Copay / 40% Coins	\$100 Copay / N/A	\$100 Copay / Ded + 45% Coins	\$100 Copay / Ded + 50% Coins / \$100 Copay / Ded + 50% Coins / \$100 Copay / Ded + 50% Coins / \$100 Copay / Ded + 30%
24 Office Visit (PCP/ SCP)			\$25 / \$25 Copay / 40% Coins	\$25 / \$25 Copay / 40% Coins	\$25 / \$50 Copay / N/A	\$25 / \$50 Copay / Ded + 45% Coins	\$30 / \$60 Copay / Ded + 50% Coins / \$35 / \$70 Copay / Ded + 50% Coins / \$35 / \$70 Copay / Ded + 30%
Prescription Care			Covered at 100% / 40% Coins	Covered at 100% / 40% Coins	Covered at 100% / N/A	Covered at 100% / N/A	Covered at 100% / N/A / Covered at 100% / N/A / Covered at 100% / N/A

- And everything about them:
- Time and effort to build
  - Time and effort to re-build
  - Data entry and Calculation errors
  - Crowded information
  - Confused clients & prospects

- Home
- Employer
- Coverage Period Setup
- Goals + Assumptions
- Plan Designs

Plan Groups / Reports

Jan 1, 2016 - Dec 31, 2016 Total Cost: Employer Cost

Current: Dual Choice Humana	\$698,325
-----------------------------	-----------

Jan 1, 2017 - Dec 31, 2017 (2017 Renewal)

Renewal: 18% Increase	\$824,016
Renewal At Budget: 5% Target	\$733,241
Proposed: Humana HSA 4000	\$730,555
Proposed: Humana HSA HRA Combo	\$748,801

Show Combined Enrollment  View Notes

NPOS AG 4000 100% HDHP \$251,606

NPOS 1000/80/3000 \$497,195

Community Rated Add Notes

Medical Plan and Rx					Funding			Premium Share		Premium
Count	Enrollment Type	Doc	EE CoIns	MaxDoP	Net CoP	EE \$	%	ER \$	Monthly	
28	Employee Only	4,000	0%	4,000	2,000	94.07	30% 70%	219.49	313.56	
7	Employee + Spouse	8,000	0%	8,000	4,000	207.28	30% 70%	483.64	690.92	
3	Employee + 1 CH	8,000	0%	8,000	4,000	179.01	30% 70%	417.69	596.70	
8	Family	8,000	0%	8,000	4,000	282.65	30% 70%	659.52	942.17	

**Employee Only**

And moves it to the web, to instantly create and model:

- Plan Options
- Budget Targets
- HSA/HRA Funding alternatives
- Premium Share
- Results & Reporting

ABD helps build your plan library so plan exhibits are done in minutes instead of hours...

## Edit Medical Plan

Save As..

Agency DB

Employer DB

NPOS 1000/80/3000

Traditional

Qualified HDHP

Humana

1000/80/3000

Enter a Network

In Network

Copays

Select a Metal Grade

Max Out of Pocket includes Deductible

Benefit Tier

Deductible

Carrier Colors %

Max. CoPocket

Employee

Employee + 1

Employee + 2 or more

AV = 83.5%

## Edit Medical Plan

Save As..

Agency DB

Employer DB

NPOS 1000/80/3000

Traditional

Qualified HDHP

Humana

1000/80/3000

Enter a Network

In Network

Copays

Select a Metal Grade

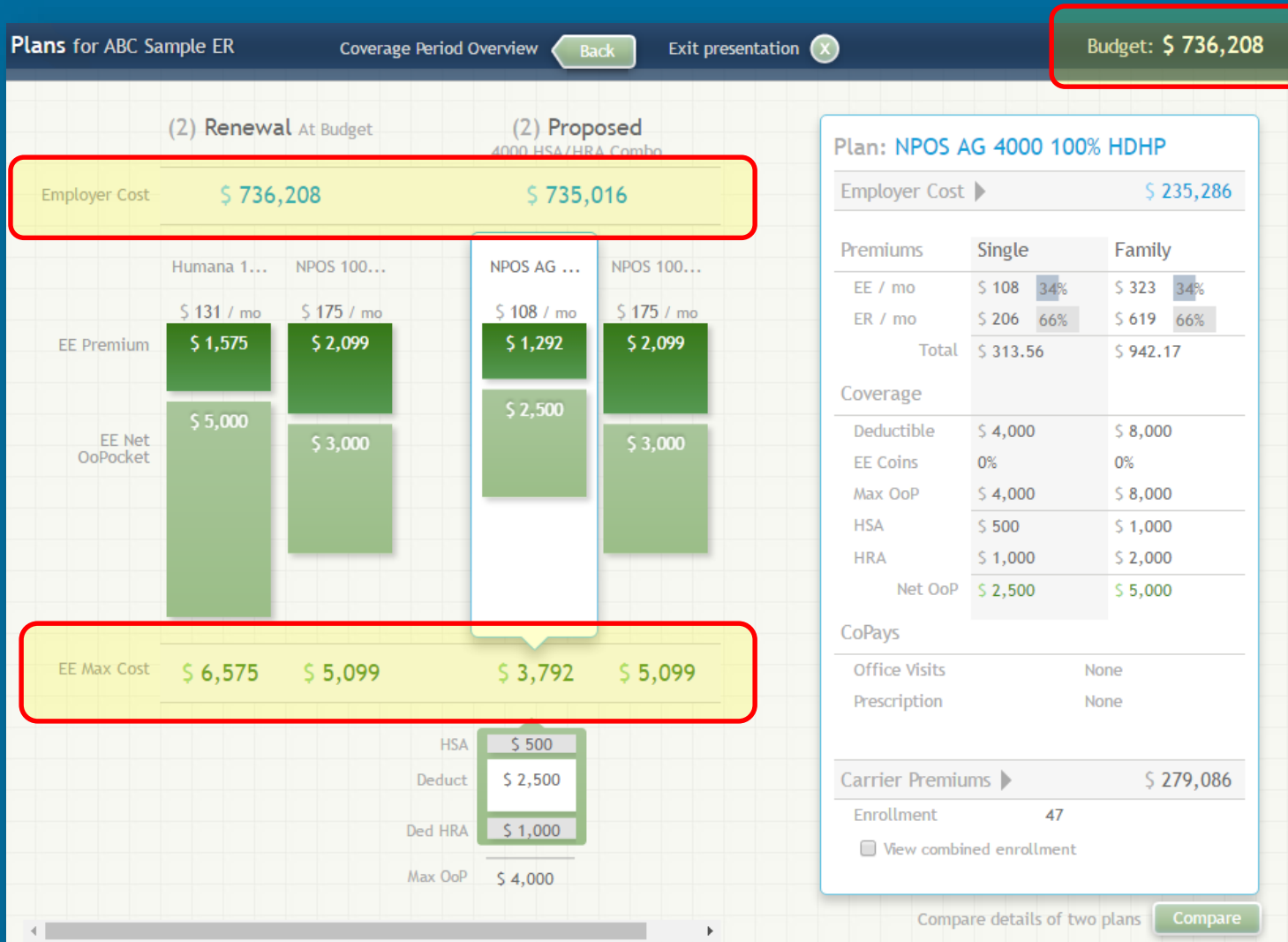
Primary Care	\$ 40	100% for Preventative Services
Specialty Care	\$ 50	Lab & X-ray differentials...
Urgent Care	\$ 100	Enter notes here
Emergency	\$ 150	Waived if admitted
Out-Patient Hospital	\$ 200	80% thereafter
In-Patient Hospital	\$ 500	Enter notes here

AV = 83.5%

Cancel

Update

Automatically build plan comparisons to help the client visualize budget, bottom line, employee impact, and plan parity.



# Instantly model any premium share strategies

HSA/HRA Combo    1000 Buy Up

\$257,110    \$497,195    +

Community Rated    Notes

Back to Plan Design

### Premium Share

All Employees

Premium Share Strategy:

- Employer % of Premium
- Employer % of Premium**
- Employee % of Premium
- Employer Fixed \$
- Employee Fixed \$
- % of Employee and Dependents
- From another Plan Design

70 %

	EE \$	%	ER \$
	94.07	30% 70%	219.49
	207.28	30% 70%	483.64
	179.01	30% 70%	417.69
	282.65	30% 70%	659.52

Premium	EE \$	EE %
\$ 314	\$ 94.07	30.00 %
\$ 691	\$ 207.28	30.00 %
\$ 597	\$ 179.01	30.00 %
\$ 942	\$ 282.65	30.00 %

	EE \$	ER \$
70	\$ 659.52	

# Including HSA and HRA Funding and Modeling

HSA/HRA Combo: \$257,110 | 1000 Buy Up: \$497,195

Community Rated

Back to Plan Design

### Funding Vehicles

Employee Only

Legend:  Employee  Employer  Carrier

### Health Savings Account

Count	Employment Type	Annual HSA Contribution	Monthly HSA Contribution	Net Oo Pocket
29	Employee Only	500	\$ 41.67	\$ 2,000
7	Employee + Spouse	1000	\$ 83.33	\$ 4,000
3	Employee + 1 CH	1000	\$ 83.33	\$ 4,000
8	Family	1000	\$ 83.33	\$ 4,000

Remove

HSA/HRA Combo: \$257,110 | 1000 Buy Up: \$497,195

Community Rated

Back to Plan Design

### Funding Vehicles

Employee Only

Legend:  Employee  Employer  Carrier

### Deductible HRA

Deductible HRA Name: \$0

Override HRA ranges

Count	Employment Type	From	To	Net Oo Pocket
29	Employee Only	\$ 2,500	\$ 4,000	\$ 2,000
7	Employee + Spouse	\$ 5,000	\$ 8,000	\$ 4,000
3	Employee + 1 CH	\$ 5,000	\$ 8,000	\$ 4,000
8	Family	\$ 5,000	\$ 8,000	\$ 4,000

Budgeted Liability: \$ 29,250  
Max Liability: \$ 97,500

Reimbursement %: 100%  
Budgeted Utilization %: 30%

Remove | Close



# And reconcile directly to the CFO's financial goal

HSA/HRA Combo

1000 Buy Up

**\$736,208**    \$732,473    +

Budget: \$ 736,208

Community Rated

[Back to Plan Design](#)

## Premium Share

All Employees

Premium Share Strategy:

Employer % of Premium    62.1    %    [Apply to All Enrollment Types](#)

Count	Enrollment Type	Premium	EE \$	EE %	ER %	ER \$
97	Employee Only	\$ 314	\$ 118.84	37.90 %	62.1	\$ 194.72
24	Employee + Spouse	\$ 691	\$ 261.86	37.90 %	62.1	\$ 429.06
11	Employee + 1 CH	\$ 597	\$ 226.15	37.90 %	62.1	\$ 370.55
20	Family	\$ 942	\$ 357.08	37.90 %	62.1	\$ 585.09

# Then create up-to-date finished deliverables before, during or after the meeting – no more updating excel.

Pete's Agency ABC Sample ER  
Report as of 30 January 2018, page 1 of 1  
Combined Total Cost Summary --  
For illustrative purposes, refer to carrier proposal for full details.

Plan Group	Coverage Dates	Total Cost	Employee Cost	Employer Cost	% of Employer Cost
Medical Renewal 18% Increase	1/1/2017 - 12/31/2017	\$1,177,166	\$353,150	\$824,016	68.7%
Dental Renewal Guardian	1/1/2018 - 12/31/2018	\$180,837	\$36,167	\$144,670	12.1%
Vision Renewal Guardian Vision	1/1/2018 - 12/31/2018	\$9,410	\$0	\$9,410	0.8%
Life Renewal Principal Life	1/1/2018 - 12/31/2018	\$16,848	\$0	\$16,848	1.4%
STD Renewal Principal STD	1/1/2018 - 12/31/2018	\$95,477	\$0	\$95,477	8.0%
LTD Renewal Principal LTD	1/1/2018 - 12/31/2018				
<b>Combined Total Cost</b>					

18% due in large part to cancer claim. Trend at 10.0%. Both plans received the same 18% increase. With same plans and same 70% contribution, XYZ cost increases of \$129,000. Employees see increases as well. Market Study Revealed no other carrier options due to ongoing claim.

Pete's Agency ABC Sample ER  
Report as of 30 January 2018, page 1 of 3  
Plan Group Comparison - 1/1/17 - 12/31/17  
For illustrative purposes, refer to carrier proposal for full details  
\* Additional details available

**Current**  
Dual Choice Humana  
Employer Cost (2 plans)  
**\$698,325**

**Medical Plan Design**

	NPOS 1000/80/3000 Sample Carrier		NPOS 1000/80/3000 Humana	
	SINGLE	FAMILY	SINGLE	FAMILY
Deductible	\$2,000	\$4,000	\$1,000	\$3,000
Employee Coinsurance	80%	80%	20%	20%
Out-of-Pocket Max	\$5,000	\$10,000	\$3,000	\$6,000
Employer Funding	\$0	\$0	\$0	\$0
Net Out-of-Pocket Max	\$5,000	\$10,000	\$3,000	\$6,000
Employee Annual Prem	\$1,211	\$3,038	\$1,344	\$4,039
Employee Max Am. Cost	\$6,211	\$13,038	\$4,344	\$10,039

Medical Copays  
Rx: \$80 / \$120 / \$50 / \$110 / \$250 / \$500  
No Deductible  
\$10 / \$25 / \$50 / --

Enrollment  
Employee Only: 46 Prem, 28 Employee, 7 Spouse, 3 Employee + 1 CH  
Employee EE \$: \$101, \$102, \$192, \$303

**Renewal**  
18% Increase  
Employer Cost (2 plans)  
**\$824,016 +18.0%**

	NPOS 2000/80/5000 Sample Carrier		NPOS 1000/80/3000 Humana	
	SINGLE	FAMILY	SINGLE	FAMILY
Deductible	\$2,000	\$4,000	\$1,000	\$3,000
Employee Coinsurance	80%	80%	20%	20%
Out-of-Pocket Max	\$5,000	\$10,000	\$3,000	\$6,000
Employer Funding	\$0	\$0	\$0	\$0
Net Out-of-Pocket Max	\$5,000	\$10,000	\$3,000	\$6,000
Employee Annual Prem	\$1,429	\$4,293	\$1,429	\$4,293
Employee Max Am. Cost	\$4,596	\$14,093	\$4,596	\$10,765

Medical Copays  
Rx: \$80 / \$120 / \$50 / \$110 / \$250 / \$500  
No Deductible  
\$10 / \$25 / \$50 / --

Enrollment  
Employee Only: 46 Prem, 28 Employee, 7 Spouse, 3 Employee + 1 CH  
Employee EE \$: \$110, \$112, \$192, \$307

Annual Insurance Premium: \$628,258  
Employer Premium Contributions: \$497,195  
HRA Contribution: \$0  
HRA Budgeted Liability: \$0  
**Employer Annual Cost: \$497,195**  
Additional HRA Liability: \$0

206,744      \$491,581      \$243,956      \$580,060

Pete's Agency ABC Sample ER  
Report as of 30 January 2018, page 1 of 1  
Plan Design Detail - 1/1/17 - 12/31/17  
For illustrative purposes, refer to carrier proposal for full details

NPOS 1000/80/3000  
Proposed: Humana HSA HRA Combo  
Humana 1000803000

ENROLLMENT	MEDICAL CLAIMS				PREMIUM SHARE - MONTHLY			ANNUAL COST	
105 Enrollment Type	Deductible	EE Coins.	Max OoP	Funding	Net OoP	Premium	Employer Contribution	Employee	Employee Max Cost
68 Employee Only	\$1,000	20%	\$3,000	\$0	\$3,000	\$440.57	\$284	\$176.23	\$5,115
17 Employee + Spouse	\$2,000	20%	\$4,000	\$0	\$6,000	\$979.76	\$583	\$368.31	\$10,660
4 Employee + 1 CH	\$2,000	20%	\$4,000	\$0	\$6,000	\$979.49	\$583	\$355.36	\$10,504
12 Family	\$3,000	20%	\$5,000	\$0	\$8,000	\$1,353.80	\$794	\$509.52	\$12,354

**MEDICAL**

Medical Copays	Copay	Notes
Primary Care	\$50	100% for Preventative Services, first 3 visits
Specialty Care	\$50	Labs & X-ray subject a \$250 deduct then 80% to OoP
Urgent Care	\$225	Notes
Emergency	\$250	Waived if admitted
Out-Patient Hospital	\$200	80% thereafter, including surgeries
In-Patient Hospital	\$500	

**NOTES**

Plan is not offered to out-of-state employees. Actuarial Equivalent = 94.8

**RX**

Rx Plan Code	No Deductible	Notes
Rx Tier 1	\$10	
Rx Tier 2	\$25	
Rx Tier 3	\$50	
Rx Tier 4	--	

**PLAN DESIGN NOTES**

None

**AFFORDABILITY ANALYSIS**

Affordability Contribution: 9.33%  
Employee Income Threshold: \$22,120.67

Pete's Agency Agency Admin | Help

Coverage Period Setup: Chiro Management Inc

Jan 1, 2018 - Dec 31, 2018 (2018)

Information Enrollment Types Census **Quoting** Carrier Plans

Automatic Quoting Manual Quoting

Office Location

Request Quote

Please select one or more carrier plans from the list below, then click Import Rates to capture the associated member rates into the Plan Designer.

Available Carrier Plans

Carrier	Plan Name	Deductible	Coins	Max OoP	Monthly Premium
<input type="checkbox"/>	Anthem Anthem Bronze Blue Priority POS 55...	5500/11000	60 %	6550/13100	\$19,133.60
<input type="checkbox"/>	Anthem Anthem Gold Blue Preferred POS 20...	2000/4000	100 %	2500/5000	\$26,066.08
<input type="checkbox"/>	Anthem Anthem Gold Blue Preferred POS 20...	2000/4000	80 %	4250/8500	\$26,261.44
<input type="checkbox"/>	Anthem Anthem Gold Blue Priority POS 2000...	2000/4000	100 %	2500/5000	\$24,036.22
<input type="checkbox"/>	Anthem Anthem Gold Blue Priority POS 2500...	2500/5000	100 %	3500/7000	\$24,628.10
<input type="checkbox"/>	Anthem Anthem Silver Blue Access PPO 420...	4200/8400	100 %	4800/9600	\$27,557.19
<input type="checkbox"/>	Anthem Anthem Silver Blue Preferred POS 2...	2700/5400	80 %	5000/10000	\$24,518.70
<input type="checkbox"/>	Anthem Anthem Silver Blue Priority POS 270...	2700/5400	80 %	5000/10000	\$22,608.41
<input type="checkbox"/>	Anthem Anthem Silver Blue Priority POS 300...	3000/6000	80 %	7350/14700	\$22,789.89
<input type="checkbox"/>	Anthem Anthem Silver Blue Priority POS 320...	3200/6400	100 %	6550/13100	\$21,299.40
<input type="checkbox"/>	Anthem Anthem Silver Blue Priority POS 330...	3300/6600	100 %	5000/10000	\$22,751.34
<input type="checkbox"/>	Anthem Anthem Silver Blue Priority POS 420...	4200/8400	100 %	4800/9600	\$21,834.46

Instantly quote your small group business with our real-time, integrated rating engine.

Pete's Agency Agency Admin | Help

Coverage Period Setup: Chiro Management Inc

Jan 1, 2018 - Dec 31, 2018 (2018)

Information Enrollment Types Census **Quoting** Carrier Plans

Carrier Plans Select for Import

Carrier	Plan Name	Deductible	Coins	Max OoP	Monthly Premium
<input checked="" type="checkbox"/>	Anthem Anthem Bronze Blue Priority POS 55...	5500/11000	60 %	6550/13100	\$19,133.60
<input checked="" type="checkbox"/>	Anthem Anthem Gold Blue Preferred POS 20...	2000/4000	100 %	2500/5000	\$26,066.08
<input checked="" type="checkbox"/>	Anthem Anthem Gold Blue Preferred POS 20...	2000/4000	80 %	4250/8500	\$26,261.44
<input checked="" type="checkbox"/>	Humana WI 100 HMO 18 COPAY WI VALUE OV ...	2000/4000	100 %	5500/11000	\$24,599.21
<input checked="" type="checkbox"/>	Humana WI 100/70 EHDHP 18 PPO COINSURA...	6500/13000	100 %	6500/13000	\$27,189.03
<input checked="" type="checkbox"/>	Humana WI 100/70 EHDHP 18 PPO COINSURA...	2700/5400	100 %	2700/5400	\$28,266.13

Import Rates

And treat your small groups like the big ones with modelling of plan design, contributions, budgets, & funding strategies.

# ABD works perfectly for:

- Large Group
- Small Group
- Age (Member) Rating
- Composite Rating
- Fully Insured, Level or Self Funding
- Medical Dental Life Vision STD & LTD

# ABD – EPIC Integration

- Final Plan Design, Rates, Contributions, Premium are pushed to from ABD to EPIC
- Save time by eliminating duplicative data entry
- Improve data quality by reducing manual entry across systems

Anticipated release mid 2020

# Applied Benefits Designer

**Efficiency. Innovation. Better Client Experiences.**