

Benefits Resource Group

Case Study: Health Policy Audit Summary



Health Policy Audit Summary

Background

- Prospective client using third party administrator for Health Reimbursement.

Issues

- Third Party Administrator charges fees for claims processing.
- Current agent not providing unique solutions to managing health plan costs.

Solution

- Intense audit of current plan, sought favorable offers from competing carriers.
- Discussion of pain points of current plan with prospective client, focused efforts on change in those areas.
- Negotiations with both current and competing carriers to obtain the most competitive offers.

Existing Coverage
\$4,000 single deductible.
No prescription drug copays.
Renewal increased cost by 9%.
Eligibility maintenance via fax.
Delayed claims flow due to third party processing.
Free cobra administration, employer sends out initial notices.

New Coverage
\$3,000 single deductible.
Prescription drug copays included.
Premiums maintained at current level.
Online, real time eligibility maintenance.
Streamlined claims with no third party processing.
Free cobra administration, carrier takes care of all steps in the process.

Results

- New carrier offers expanded provider network.
- Costs kept very close to current – a top goal of the firm (saved 9% over proposal renewal).
- Streamlined administration offers time and expense savings in human resources processes.
- Prescription drug card addition and reduced deductible for single employees, offers more ability to afford the prescriptions needed to maintain a healthy quality of life.
- Kept free preventative care benefits allowed under previous plan to encourage regular physicals and health maintenance.