



Collective Health

Buyer's Guide



A **step-by-step** guide to understanding Collective Health's pricing and packaging

Collective Health is not a better health plan. We are a fundamentally different (and we believe fundamentally better) approach to managing your health benefits program through modern technology designed specifically for self-funded employers and their people.

We know that buying Collective Health is a bit different than legacy benefits buying decisions, so this guide walks through our pricing and packaging step-by-step.

We designed our pricing to give you the flexibility to buy the set of products and services that best match your strategic needs, and to grow with you as those needs evolve over time.

What's included in this guide:

01.

**Where Collective
Health Fits**

02.

**How Our
Packaging Works**

03.

**Typical Buying
Timeline**



01.

Where Collective Health Fits

Evaluating Collective Health's Functionality

Collective Health represents a new, technology driven approach to managing self-funded health benefits. As a result, our functionality is not totally equivalent to any other existing solutions. The table below summarizes how Collective Health's core functionality can typically be evaluated in comparison to other solutions and approaches.

		Collective Health	Traditional ASO	Advocacy Vendor	Engagement Hub	3rd Party BenAdmin
Plan Administration	Medical Administration	✓	✓	X	X	X
	Pharmacy Administration	✓	Only their products	X	X	X
	Dental Administration	✓	Only their products	X	X	X
	Vision Administration	✓	Only their products	X	X	X
Member Experience	Cross-benefits experience	✓	Only their products	X	Optional use portals	X
	Concierge Support	✓	Not concierge level.	✓	X	X
	Proactive Messaging	✓	X	X	✓	X
Program Integration	Operational Support	✓	X	X	Only basic support	X
	Proactive Engagement	✓	X	X	✓	X
Reporting	Plan Reporting	✓	Only their products	X	X	X
	Engagement Reporting	✓	X	✓	✓	X
	Partner Reporting	✓	X	X	X	X
Administrative Support	Eligibility Support	✓	X	X	X	✓
	Financials & Payments	✓	Only their products	X	X	X
	Stop Loss Coordination	✓	Only their products	X	X	X
	Open Enrollment Experience	✓	Only their products	Only their products	Only their products	X

Table Key: ✓ = functionality included

X = functionality not included

Possible, but with caveats



Plan Administration

Collective Health administers Medical, Pharmacy, Dental, and Vision claims through partnerships with a range of network options. We create a solution that is both fully integrated for the member and employer, as well as flexible enough to mix and match network options to optimize the employer's strategy. While a traditional ASO is able to administer Medical claims, they are only able to administer Pharmacy, Dental, and Vision claims if the employer purchases the ASO's own, limited carved-in products. This limitation prevents employers from adopting a best-of-breed approach.

Member Experience

Collective Health provides one connected member experience across health benefits and related 3rd-party programs. Because we are also the claims administrator, our member support spans from basic information about claims and eligibility to higher-level healthcare navigation and general concierge needs. We also use our various communication channels to proactively reach out to members to support their decision making. This is a meaningful improvement over traditional approaches that fragment the member experience across various programs and create situations where a member requires multiple calls into different service centers to actually resolve issues.

Program Integration

Collective Health streamlines partner implementation along with day-to-day management of partners by managing all of the relevant front-end integrations (e.g., outbound links to the partner website from the Member Portal), back-end integrations (e.g., eligibility, claims), and data integrations (e.g., utilization feeds when available). We also drive engagement by using technology to match members to relevant

programs, and informing members of their option through multiple member outreach channels. This is a significantly more powerful approach than other solutions that typically only integrate their own programs or provide some linking to other programs but deliver little-to-no ongoing employer support and lower member engagement rates.

Reporting

Collective Health combines utilization, claims, and engagement data to paint a connected and objective picture of how your benefits programs and healthcare investments are performing. This is a contrast to other approaches that fragment reporting across multiple vendors and rely on programs to self-report their impact.

Administrative Support

Collective Health provides the administrative support needed to run a best-of-breed benefits program with multiple network and health program partners, from operationalizing eligibility details to managing payments and reporting. This is an improvement over other solutions that typically only provide administrative support for their own products. We also partner with benefits teams to deliver industry leading Open Enrollment materials, digital tools, and on-site events, to ensure a helpful, connected, and memorable experience for participating members.

02.

How Our Packaging Works



step

1

Understand Collective Health's Medical Administration and Collective Health Experience

At the heart of our platform is tech-enabled medical plan administration and premium member experience.

Here's what's included:

- Full adjudication and administration of medical benefits
- Pharmacy integration
- Stop Loss carrier integration
- Concierge Member Advocacy
- Member web portal
- Member mobile app
- Member out-of-network claim reimbursement
- Streamlined eligibility management
- Employer portal
- Employer reporting & analytics

Did you know:

There isn't an upsell for premium Member Advocate support. We only have one level of support – awesome.



Understand the Financial Management and Payments (FMP) module

step

2

Trust our team of expert accountants to efficiently and effectively manage all the financial and payment aspects of your self-funded health benefits.

Here's what's included:

Self billing & Vendor Management:

- Invoice creation across all partners
- Billing integration and setup
- Troubleshooting across vendor partners

Payments

- CH processes payments to partners

Financial Reporting:

- Transaction reporting
- Financial monthly close reporting, by the 5th business day of the month

Did you know:

82% of our clients utilize the FMP module.



Do you want integrated dental and/or vision?

We can integrate dental and/or vision benefits into the Collective Health member and employer experience, creating a true health benefits hub.

step

3

Here's what's included:

- Expanded Member Advocate support
- Integrated member communications
- Integrated member + employer portals
- Eligibility support
- Financial management and payments (if also purchasing FMP module)
- Integrated reporting suite

Did you know:

70% of our clients include dental and vision from the start. Another 9% add dental and vision in years two or three.



Do you want integrated health program support?

We can streamline the implementation and management of your 3rd party health programs, while also boosting member engagement and impact.

Here's what's included:

- Program integration into member portal and mobile app
- Member Advocate services
- Targeted member communications
- Eligibility management
- Claims management
- Integrated reporting
- Program payments and financial management (if also purchasing FMP module)

Did you know:

We're already supporting more than 140 program integrations across our clients.

step

4

1

2

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Do you want holistic support for members with complex needs?

For members with complex needs, we think the missing piece is holistic psychosocial support and care navigation, integrated directly into to the core member experience.

Here's what's included:

- Interdisciplinary team of care coordinators, social workers, and relevant clinical support to meet the needs of members with complex conditions
- Member Advocate training to identify and triage needs of inbound callers
- Smart identification and engagement technology
- For clients who select Blue Shield of California as their medical partner, this program is called **CareSupport**
- For all other clients, this program is called **Care Navigation**

Did you know:

We are effectively engaging (and helping) 2-3x more members with complex needs than traditional care management programs.

step

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Do you want integrated Health Funds, through our partnership with HealthEquity?

We can integrate HealthEquity's best-in-class health funds products and functionality into our platform, creating a truly connected and streamlined member experience.

Here's what's included:

- HSA, HRA, FSA, and DCA account administration
- Integrated Member Advocate first-line support
- Account balance integration into portals
- Access to Health Equity's web and mobile management tools

step

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Did you know:

Nearly 2/3rds of our clients tie their health funds into the Collective Health platform.



What's the right level of Open Enrollment support?

We help your members get excited about their health benefits during Open Enrollment (...and we make your benefits team look good!)

We can work with you to create a tailored set of Open Enrollment materials, including a mix of:

- On-site events such as a Juice, Ice Cream, or Coffee cart
- Printed reminder cards for events
- Hosted OE webinars
- High-level plan cards
- Signage: wall posters, bathroom signs, magnetic posters, banners
- Postcards

Did you know:

Our approach to Open Enrollment has won Fast Company design awards!

step

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8



Understand the non-Collective Health fees in our model.

In addition to the fees paid directly to Collective Health, you pay some fees directly to our partners.

Here are those fees:

Network Access Fees

- Paid to your Medical, Pharmacy, Dental, and Vision Network Partners

Health Fund Fees (if relevant)

- Paid to HealthEquity

CareSupport Fees (if relevant)

- Paid to Blue Shield of California

step

8

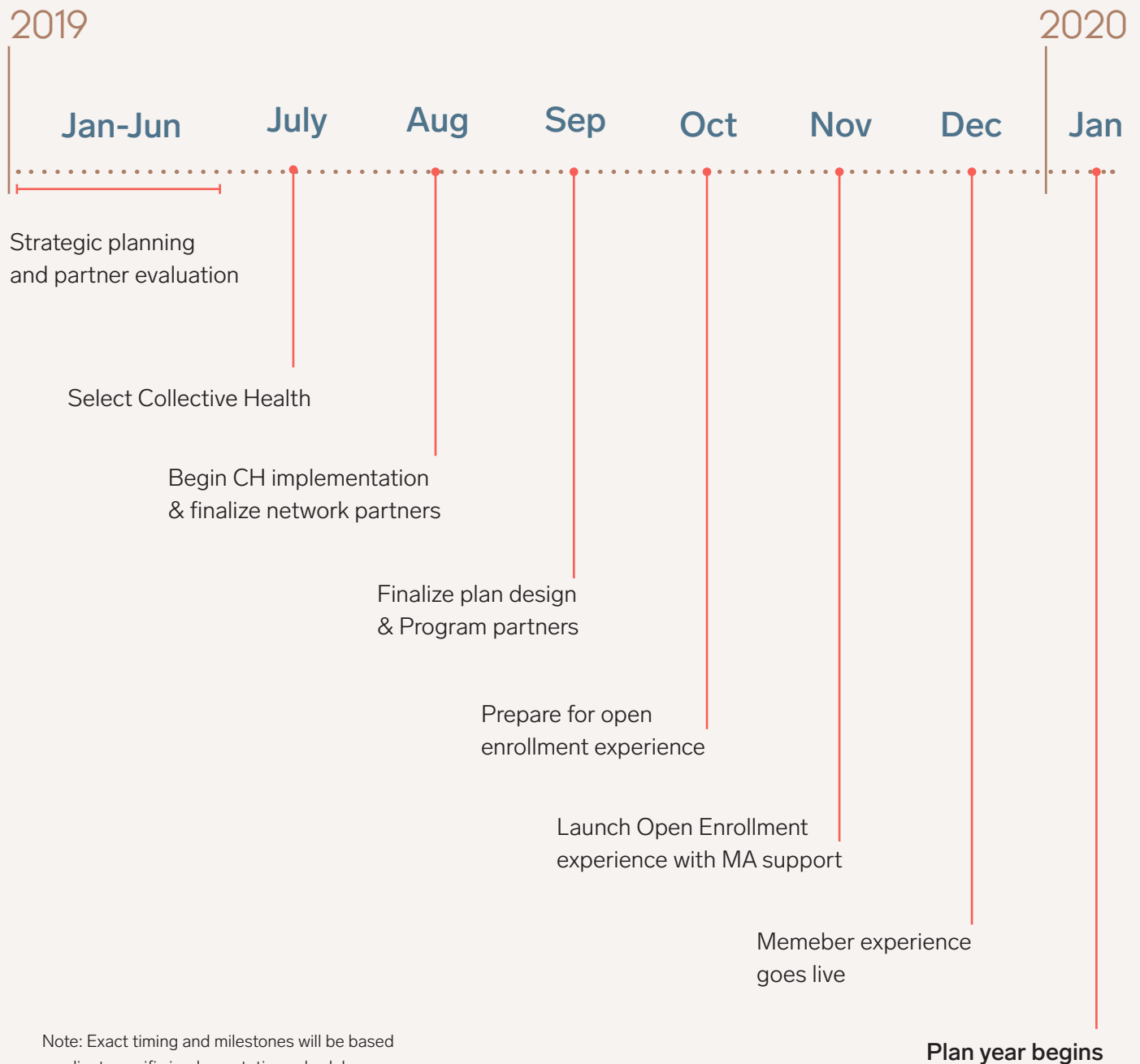
03.

Typical Buying Timeline



Typical **Buying** and **Launch** Timeline

Launching Collective Health is different than implementing a traditional health plan. Here's a typical buying timeline for a 1/1 plan year.





While medical technology continues to take giant steps forward, somehow the systems driving health coverage are still stuck in the past. The experience we have today is confusing. It's painful. And we all deserve better. Collective Health was founded on the belief that better is possible.

With a unique mix of technology and healthcare leadership (and some personal experiences of our own), we bring a fresh perspective to an outdated system. The result? Health insurance you'll love.

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