



GEISINGER HEALTH PLAN

Geisinger Funding Alternative

The smart way for
businesses to self-insure

Geisinger



Want to self-insure your business? We can help.

Our Geisinger Funding Alternative¹ (GFA) level-funded plan options are available to groups with 5 to 199 enrolled subscribers. Level-funded plans combine the predictable payments of fully-insured plans with the cost savings of traditional self-funding. These products are ideal for businesses that have a generally healthy pool of employees and expect a low number of high-cost claims.

In addition to our GFA quotes, we also quote Geisinger Health Plan ACA renewals for groups with 2 to 50 enrolled subscribers.

Is our GFA product right for you? Self-funded plan options offer:

- Stability and peace of mind knowing your group never has to pay more than the premium²
- A five-tier pre-funded premium structure
 - Maximum pre-funded premium
 - Employee only
 - Employee and spouse
 - Employee and child
 - Employee and children
 - Employee and family
- ACH auto-withdrawal on the first of each month
- Potential for experience credit to be returned at the end of the contract if actual claims paid are less than the claims funding³
- Terminal liability reserve (TLR) returned when you renew⁴
- Access to Geisinger Health Plan (GHP) network options as well as our health and wellness programs, including healthy rewards
- Familiar plan designs that align with our fully insured business

To learn more about self-funding options for your business, call [800-554-4907](tel:800-554-4907).

¹ The GFA product services are provided by Geisinger Indemnity Insurance Company

² Can vary by enrollment fluctuations

³ Upon renewal in a Geisinger product

⁴ Recalculated for the next renewal year

How GFA works

- For groups with 5-99 enrolled subscribers, there is a specific deductible of \$30,000 per member for groups and an aggregate attachment point.
- For groups with 100-199 enrolled subscribers, there is a specific deductible of \$50,000 per member for groups and an aggregate attachment point.
- The maximum expected claims are funded and if exceeded, will immediately be reimbursed by GIIC.

Pre-set monthly payments: what's included?

Stop-loss premium

- Specific & Aggregate
- 12/12 contract basis for year one
- Paid contract for year two

Administrative cost

Depending on your experience credit option, some costs may be deferred up front and collected at the end of the contract year as a shared experience credit.

Claims funding

- Five tier aggregate factors
- 110% risk corridor

Broker commission

- \$30 per employee per month (PEPM) standard
- Additional commission PEPM must be requested in writing

Terminal liability reserve

- Will be returned upon settlement if group renews
- Charged each month as part of the level funded premium
- Will be used to run out claims incurred prior to termination but received for payment after termination up to 48 months
- No additional cost to client when termination occurs at the end of the contract period

The thing about experience credit is...



It makes a difference! Experience credit occurs when actual claims are less than 110% of expected claims. With GFA plans, the experience credit remaining at the end of a group's contract period is shared 50/50 and credited to the employer funding the account upon renewal.¹

With our reporting suite, groups can monitor their claims experience and experience credit level on a monthly basis. Based on 5-99 January 2021 renewals 54% received an average experience credit statement of \$5,396!

¹Dependent on the group's selection of our 50% experience credit option

Annual settlement

- Termination requests require 30 days' notice for on-cycle terminations. Groups will not be permitted to terminate retroactively.
- The change to a 30-day notice requirement for renewals will be effective for new and renewing groups as of March 1, 2020.
- If the plan is in force for the entire year, settlement will occur within 60 days after the end of the contract
All amounts due must be paid by the end of the contract year for the settlement to occur.
- At the time of settlement, 50% of any experience credit will be returned to the client. GHP will retain the remaining 50% of the experience credit amount for deferred administrative costs.

Product designs

Product designs include HMO and PPO options, both with no referrals and the ability to choose your network. Plans also include health reimbursement accounts, health savings accounts, and the benefits below:



Pharmacy options

- Plan A:
\$0/\$20/\$40/\$60
- Plan B:
\$0/\$25/\$50/\$70



Included benefits

- Mental health and substance abuse
- Impacted wisdom teeth
- Manipulative treatment services
- Eye refraction
- Healthy Rewards program
- Domestic partner with dependents



Wellness programs

- On-site health education
- On-site screenings
- Health coaching
- Health fairs
- Wellness assessment
- Online tools

Learn about our network options

All-Access

What is it?	The All-Access network includes all participating network providers across the entire service area.
What are the benefits?	With All-Access, members enjoy access to our entire provider network, all with a single level of cost-share.
Key consideration?	With broader access and one cost-share level, premiums may be higher than with other network options.

Premier

What is it?	The Premier network is made up of the highest-performing, most exclusive providers.
What are the benefits?	Created using quality, efficiency and cost metrics leading to a highly integrated care delivery, this network generally has a lower cost.
Key consideration?	This network is available in 18 counties, which can be found on pages 7 and 10. Any services completed out-of-network will result in a higher out-of-pocket cost for the member. This network option cannot be offered alongside a Choices plan.

Choices

What is it?	The Choices network splits all participating providers into two tiers, offering members a more selective choice on receiving care.
What are the benefits?	The highest-value providers, designated by Tier 1, will provide members with the highest quality of care at the lowest cost to them.
Key consideration?	This network is available in 18 counties, which can be found on pages 8 and 11. Tier 2 services will have a higher out-of-pocket cost, but are still considered in-network. This network option cannot be offered alongside a Premier plan.

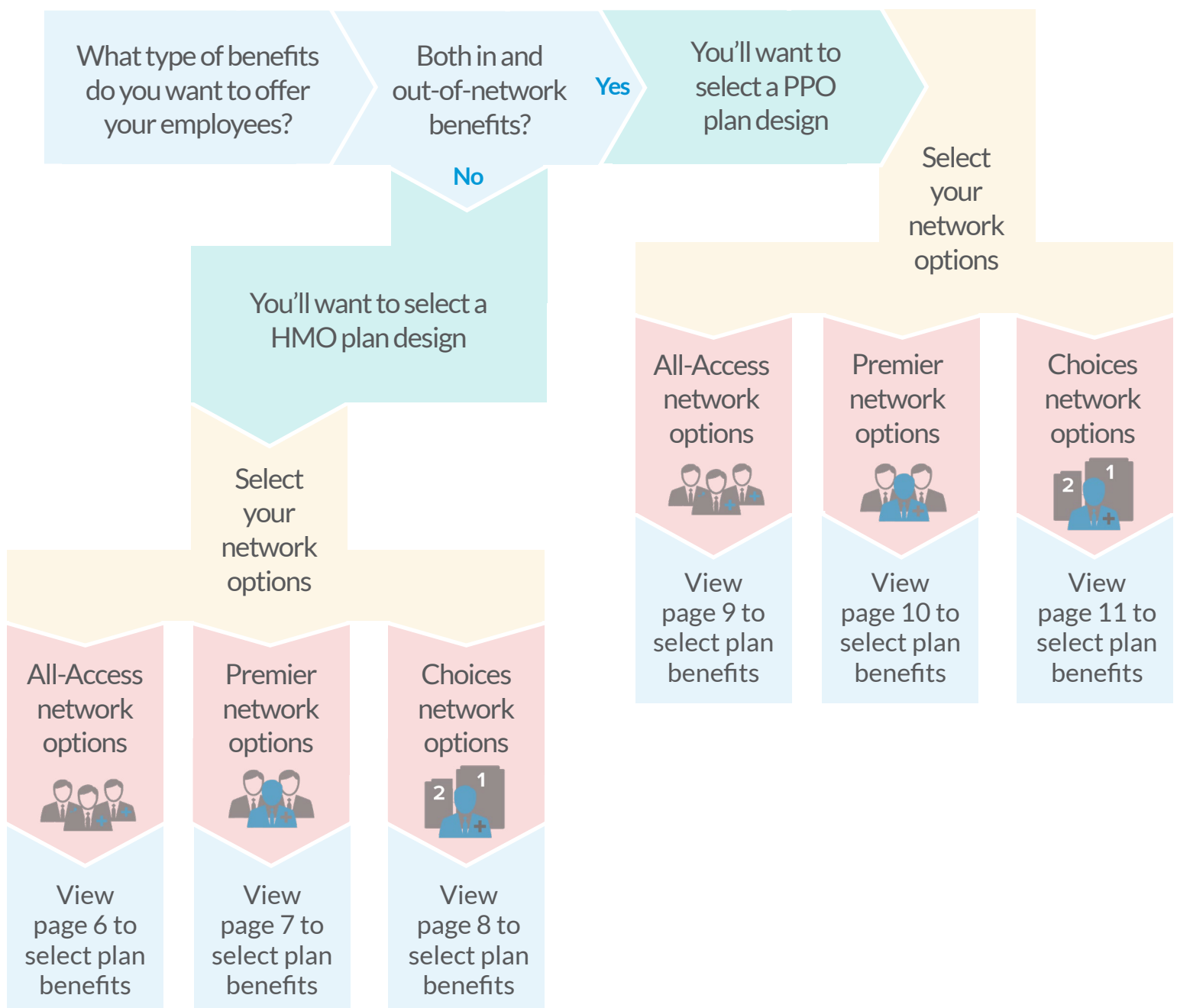
Build your plan options

Step 1: Start by choosing whether to offer in-network or both in- and out-of-network options for your employees. Your decision will decide which platform, HMO or PPO, to build your plan on.

Step 2: Select your network type, which in some cases will depend on the platform you choose. Details on the network options GHP offers can be found on page 4.

Step 3: Select the benefit designs you'd like to offer, which can be found on pages 6–11 of this document.

Use the flow chart below to guide yourself through the decision process.



Geisinger Funding Alternative (GFA)

All-Access HMO Plan Designs

Plan name	In-network providers			
	Deductible	PCP	SCP	ER
GFA All-Access HMO 250 ¹	\$250/\$500	\$20	\$40	\$150
GFA All-Access HMO 500 ¹	\$500/\$1,000	\$20	\$40	\$150
GFA All-Access HMO 1,000 ¹	\$1,000/\$2,000	\$20	\$40	\$150
GFA All-Access HMO 1,500 ¹	\$1,500/\$3,000	\$20	\$40	\$150
GFA All-Access HMO 2,000 ¹	\$2,000/\$4,000	\$20	\$40	\$150
GFA All-Access HMO 2,500 ¹	\$2,500/\$5,000	\$20	\$40	\$150
GFA All-Access HMO 3,000 ¹	\$3,000/\$6,000	\$20	\$40	\$150
GFA All-Access HMO 4,000 ¹	\$4,000/\$8,000	\$20	\$40	\$150
GFA All-Access HMO 5,000 ¹	\$5,000/\$10,000	\$20	\$40	\$150
GFA All-Access HMO 6,000 ¹	\$6,000/\$12,000	\$20	\$40	\$150
GFA All-Access MVP 2 - HMO ^{1,2}	\$7,100/\$14,200	\$40	\$75	\$300
GFA All-Access HMO 2,500 (1X) ¹	\$2,500 (1x)	\$20	\$40	\$150
GFA All-Access HMO 3,500 (1X) ¹	\$3,500 (1x)	\$20	\$40	\$150
GFA All-Access HMO 5,000 (1X) ¹	\$5,000 (1x)	\$20	\$40	\$150
GFA All-Access HMO 6,000 (1X) ¹	\$6,000 (1x)	\$20	\$40	\$150

¹ Plans include a \$10 GHP Extra PCP copay

² Does not include manipulative treatment services coverage



Pharmacy options

- Plan A: \$0/\$20/\$40/\$60
- Plan B: \$0/\$25/\$50/\$70

Geisinger Funding Alternative (GFA)

Premier HMO Plan Designs

Plan name	In-network providers			
	Deductible	PCP	SCP	ER
GFA Premier HMO 250	\$250/\$500	\$20	\$40	\$150
GFA Premier HMO 500	\$500/\$1,000	\$20	\$40	\$150
GFA Premier HMO 1,000	\$1,000/\$2,000	\$20	\$40	\$150
GFA Premier HMO 1,500	\$1,500/\$3,000	\$20	\$40	\$150
GFA Premier HMO 2,000	\$2,000/\$4,000	\$20	\$40	\$150
GFA Premier HMO 2,500	\$2,500/\$5,000	\$20	\$40	\$150
GFA Premier HMO 3,000	\$3,000/\$6,000	\$20	\$40	\$150
GFA Premier HMO 4,000	\$4,000/\$8,000	\$20	\$40	\$150
GFA Premier HMO 5,000	\$5,000/\$10,000	\$20	\$40	\$150
GFA Premier HMO 6,000	\$6,000/\$12,000	\$20	\$40	\$150
GFA Premier MVP 2 - HMO1	\$7,100/\$14,200	\$40	\$75	\$300
GFA Premier HMO 2,500 (1X)	\$2,500 (1x)	\$20	\$40	\$150
GFA Premier HMO 3,500 (1X)	\$3,500 (1x)	\$20	\$40	\$150
GFA Premier HMO 5,000 (1X)	\$5,000 (1x)	\$20	\$40	\$150
GFA Premier HMO 6,000 (1X)	\$6,000 (1x)	\$20	\$40	\$150

- All plans include manipulative treatment services coverage unless otherwise noted

¹ Does not include manipulative treatment services coverage



Pharmacy options

- Plan A: \$0/\$20/\$40/\$60
- Plan B: \$0/\$25/\$50/\$70

GFA Premier plans are only available in the following counties: Adams, Carbon, Centre, Columbia, Lackawanna, Lebanon, Lehigh, Luzerne, Mifflin, Monroe, Montour, Northumberland, Northampton, Schuylkill, Snyder, Union, Wayne, and York. To ensure a majority of employees and dependents have access to the highest-performing providers, 70 percent of the enrolling employees must reside within the available 18 counties or within 20 minutes/30 miles of a Premier network provider. Premier plans cannot be offered alongside Choices plans.

Geisinger Funding Alternative (GFA)

Choices HMO Plan Designs

Plan name	In-network providers							
	Deductible		PCP		SCP		ER	Coinsurance max
GFA Choices HMO 0/500	Tier 1: \$0/\$0	Tier 2: \$500/\$1000	Tier 1: \$10	Tier 2: \$40	Tier 1: \$20	Tier 2: \$70	Tier 1 & 2: \$150	Tier 1 & 2: 100%
GFA Choices HMO 0/750	Tier 1: \$0/\$0	Tier 2: \$750/\$1,500	Tier 1: \$10	Tier 2: \$40	Tier 1: \$20	Tier 2: \$70	Tier 1 & 2: \$150	Tier 1 & 2: 100%
GFA Choices HMO 250	Tier 1: \$250/\$500	Tier 2: \$750/\$1,500	Tier 1: \$10	Tier 2: \$40	Tier 1: \$20	Tier 2: \$70	Tier 1 & 2: \$150	Tier 1 & 2: 100%
GFA Choices HMO 500	Tier 1: \$500/\$1,000	Tier 2: \$1,250/\$2,500	Tier 1: \$10	Tier 2: \$40	Tier 1: \$20	Tier 2: \$70	Tier 1 & 2: \$150	Tier 1 & 2: 100%
GFA Choices HMO 1,000	Tier 1: \$1,000/\$2,000	Tier 2: \$2,000/\$4,000	Tier 1: \$10	Tier 2: \$40	Tier 1: \$20	Tier 2: \$70	Tier 1 & 2: \$150	Tier 1 & 2: 100%
GFA Choices HMO 1,500	Tier 1: \$1,500/\$3,000	Tier 2: \$3,000/\$6,000	Tier 1: \$10	Tier 2: \$40	Tier 1: \$20	Tier 2: \$70	Tier 1 & 2: \$150	Tier 1 & 2: 100%
GFA Choices HMO 2,000	Tier 1: \$2,000/\$4,000	Tier 2: \$4,000/\$8,000	Tier 1: \$10	Tier 2: \$40	Tier 1: \$20	Tier 2: \$70	Tier 1 & 2: \$150	Tier 1 & 2: 100%
GFA Choices HMO 2,500	Tier 1: \$2,500/\$5,000	Tier 2: \$5,000/\$10,000	Tier 1: \$10	Tier 2: \$40	Tier 1: \$20	Tier 2: \$70	Tier 1 & 2: \$150	Tier 1 & 2: 100%
GFA Choices HMO 3,000	Tier 1: \$3,000/\$6,000	Tier 2: \$6,000/\$12,000	Tier 1: \$10	Tier 2: \$40	Tier 1: \$20	Tier 2: \$70	Tier 1 & 2: \$150	Tier 1 & 2: 100%
GFA Choices HMO 4,000	Tier 1: \$4,000/\$8,000	Tier 2: \$7,350/\$14,700	Tier 1: \$10	Tier 2: \$40	Tier 1: \$20	Tier 2: \$70	Tier 1 & 2: \$150	Tier 1 & 2: 100%
GFA Choices HMO 2,500 (1X)	Tier 1: \$2,500 (1x)	Tier 2: \$5,000 (1x)	Tier 1: \$20	Tier 2: \$50	Tier 1: \$40	Tier 2: \$90	Tier 1 & 2: \$150	Tier 1 & 2: 100%
GFA Choices HMO 3,500 (1X)	Tier 1: \$3,500 (1x)	Tier 2: \$7,000 (1x)	Tier 1: \$20	Tier 2: \$50	Tier 1: \$40	Tier 2: \$90	Tier 1 & 2: \$150	Tier 1 & 2: 100%



Pharmacy options

- Plan A: \$0/\$20/\$40/\$60
- Plan B: \$0/\$25/\$50/\$70

GFA Choices plans are only available in the following counties: Adams, Carbon, Centre, Columbia, Lackawanna, Lebanon, Lehigh, Luzerne, Mifflin, Monroe, Montour, Northumberland, Northampton, Schuylkill, Snyder, Union, Wayne, and York. To ensure a majority of employees and dependents have access to the highest-performing providers, 70 percent of the enrolling employees must reside within the available 18 counties or within 20 minutes/30 miles of a Tier 1 provider. Choices plans cannot be offered alongside Premier plans.

Geisinger Funding Alternative (GFA)

All-Access PPO Plan Designs

Plan name	In-network providers				Out-of-network providers		
	Deductible	PCP	SCP	ER	Deductible	Co insurance	Coinsurance max
GFA All-Access PPO 250	\$250/\$500	\$20	\$40	\$150	\$500/\$1,000	80%	\$1,000/\$2,000
GFA All-Access PPO 500	\$500/\$1,000	\$20	\$40	\$150	\$1,000/\$2,000	80%	\$2,000/\$4,000
GFA All-Access PPO 1,000	\$1,000/\$2,000	\$20	\$40	\$150	\$2,000/\$4,000	80%	\$4,000/\$8,000
GFA All-Access PPO 1,500	\$1,500/\$3,000	\$20	\$40	\$150	\$3,000/\$6,000	70%	\$6,000/\$12,000
GFA All-Access PPO 2,000	\$2,000/\$4,000	\$20	\$40	\$150	\$4,000/\$8,000	70%	\$6,000/\$12,000
GFA All-Access PPO 2,500	\$2,500/\$5,000	\$20	\$40	\$150	\$5,000/\$10,000	70%	\$6,000/\$12,000
GFA All-Access PPO 3,000	\$3,000/\$6,000	\$20	\$40	\$150	\$5,000/\$10,000	70%	\$6,000/\$12,000
GFA All-Access PPO 4,000	\$4,000/\$8,000	\$20	\$40	\$150	\$5,000/\$10,000	70%	\$6,000/\$12,000
GFA All-Access PPO 5,000	\$5,000/\$10,000	\$20	\$40	\$150	\$5,500/\$11,000	70%	\$6,000/\$12,000
GFA All-Access PPO 6,000	\$6,000/\$12,000	\$20	\$40	\$150	\$6,500/\$13,000	70%	\$6,000/\$12,000
GFA All-Access PPO 2,500 (1X)	\$2,500 (1x)	\$20	\$40	\$150	\$5,000 (1x)	70%	\$6,000 (1x)
GFA All-Access PPO 3,500 (1X)	\$3,500 (1x)	\$20	\$40	\$150	\$5,000 (1x)	70%	\$6,000 (1x)
GFA All- Access PPO 5,000 (1X)	\$5,000 (1x)	\$20	\$40	\$150	\$10,000 (1x)	70%	\$6,000 (1x)
GFA All-Access PPO 6,000 (1X)	\$6,000 (1x)	\$20	\$40	\$150	\$10,000 (1x)	70%	\$6,000 (1x)
GFA All-Access QHDHP ³ 1,400	\$1,400/\$2,700	\$20	\$40	\$150	\$2,500/\$5,000	80%	\$5,000/\$10,000
GFA All-Access QHDHP ³ 2,500	\$2,500/\$5,000	\$20	\$40	\$150	\$4,000/\$8,000	80%	\$8,000/\$16,000
GFA All-Access QHDHP ³ 5,000	\$5,000/\$10,000	\$20	\$40	\$150	\$7,000/\$14,000	70%	\$10,000/\$20,000

- All plans include manipulative treatment services

³ QHDHP plans have all cost-sharing after deductible, MOOP is \$7,000/\$14,000 and include manipulative treatment services



Pharmacy options

- Plan A: \$0/\$20/\$40/\$60
- Plan B: \$0/\$25/\$50/\$70

Geisinger Funding Alternative (GFA)

Premier PPO Plan Designs

Plan name	In-network providers				Out-of-network providers		
	Deductible	PCP	SCP	ER	Deductible	Co-insurance	Coinsurance max
GFA Premier PPO 250	\$250/\$500	\$20	\$40	\$150	\$500/\$1,000	80%	\$1,000/\$2,000
GFA Premier PPO 500	\$500/\$1,000	\$20	\$40	\$150	\$1,000/\$2,000	80%	\$2,000/\$4,000
GFA Premier PPO 1,000	\$1,000/\$2,000	\$20	\$40	\$150	\$2,000/\$4,000	80%	\$4,000/\$8,000
GFA Premier PPO 1,500	\$1,500/\$3,000	\$20	\$40	\$150	\$3,000/\$6,000	70%	\$6,000/\$12,000
GFA Premier PPO 2,000	\$2,000/\$4,000	\$20	\$40	\$150	\$4,000/\$8,000	70%	\$6,000/\$12,000
GFA Premier PPO 2,500	\$2,500/\$5,000	\$20	\$40	\$150	\$5,000/\$10,000	70%	\$6,000/\$12,000
GFA Premier PPO 3,000	\$3,000/\$6,000	\$20	\$40	\$150	\$5,000/\$10,000	70%	\$6,000/\$12,000
GFA Premier PPO 4,000	\$4,000/\$8,000	\$20	\$40	\$150	\$5,000/\$10,000	70%	\$6,000/\$12,000
GFA Premier PPO 5,000	\$5,000/\$10,000	\$20	\$40	\$150	\$5,500/\$11,000	70%	\$6,000/\$12,000
GFA Premier PPO 6,000	\$6,000/\$12,000	\$20	\$40	\$150	\$6,500/\$13,000	70%	\$6,000/\$12,000
GFA Premier PPO 2,500 (1X)	\$2,500 (1x)	\$20	\$40	\$150	\$5,000 (1x)	70%	\$6,000 (1x)
GFA Premier PPO 3,500 (1X)	\$3,500 (1x)	\$20	\$40	\$150	\$5,000 (1x)	70%	\$6,000 (1x)
GFA Premier PPO 5,000 (1X)	\$5,000 (1x)	\$20	\$40	\$150	\$10,000 (1x)	70%	\$6,000 (1x)
GFA Premier PPO 6,000 (1X)	\$6,000 (1x)	\$20	\$40	\$150	\$10,000 (1x)	70%	\$6,000 (1x)

- All plans include manipulative treatment services



Pharmacy options

- Plan A: \$0/\$20/\$40/\$60
- Plan B: \$0/\$25/\$50/\$70

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Geisinger Funding Alternative (GFA) Choices PPO Plan Designs

Plan name	Benefit details								
GFA Choices PPO 1,000	In-network providers								
	Deductible		PCP		SCP		ER	Coinsurance	
	Tier 1: \$1,000/\$2,000	Tier 2: \$2,000/\$4,000	Tier 1: \$10	Tier 2: \$40	Tier 1: \$20	Tier 2: \$70	Tier 1 & 2: \$150	Tier 1 & 2: 100%	
	Out-of-network providers								
	Deductible		Coinsurance				Coinsurance max		
	\$4,000/\$8,000		80%				\$5,000/\$10,000		
GFA Choices PPO 2,000	In-network providers								
	Deductible		PCP		SCP		ER	Coinsurance	
	Tier 1: \$2,000/\$4,000	Tier 2: \$4,000/\$8,000	Tier 1: \$10	Tier 2: \$40	Tier 1: \$20	Tier 2: \$70	Tier 1 & 2: \$150	Tier 1 & 2: 100%	
	Out-of-network providers								
	Deductible		Coinsurance				Coinsurance max		
	\$6,000/\$12,000		70%				\$6,000/\$12,000		
GFA Choices PPO 3,000	In-network providers								
	Deductible		PCP		SCP		ER	Coinsurance	
	Tier 1: \$3,000/\$6,000	Tier 2: \$6,000/\$12,000	Tier 1: \$10	Tier 2: \$40	Tier 1: \$20	Tier 2: \$70	Tier 1 & 2: \$150	Tier 1 & 2: 100%	
	Out-of-network providers								
	Deductible		Coinsurance				Coinsurance max		
	\$8,000/\$16,000		70%				\$8,000/\$16,000		
GFA Choices PPO 4000	In-network providers								
	Deductible		PCP		SCP		ER	Coinsurance	
	Tier 1: \$4,000/\$8,000	Tier 2: \$7,350/\$14,700	Tier 1: \$10	Tier 2: \$40	Tier 1: \$20	Tier 2: \$70	Tier 1 & 2: \$150	Tier 1 & 2: 100%	
	Out-network providers								
	Deductible		Coinsurance				Coinsurance max		
	\$10,000/\$20,000		70%				\$10,000/\$20,000		



Pharmacy options

- Plan A: \$0/\$20/\$40/\$60
- Plan B: \$0/\$25/\$50/\$70

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Geisinger Health Plan may refer collectively to health care coverage sponsors Geisinger Health Plan, Geisinger Quality Options, Inc., and Geisinger Indemnity Insurance Company, unless otherwise noted. Geisinger Health Plan is part of Geisinger, an integrated health care delivery and coverage organization.

This benefit highlight is intended as an information source and does not constitute a coverage document. The Summary Plan Description (SPD) is controlling as to any issues of benefits coverage, limitations and exclusions. This managed care plan may not cover all your healthcare expenses. Read your SPD carefully to determine which healthcare services are covered.

All benefits follow fully-insured plan benefit changes. The Geisinger Funding Alternative product is the client's health plan. Geisinger Health Plan provides administrative services only. Underwriting reserves the right to re-rate if enrollment changes +/- 15% during the plan year. The client is responsible for administration/ERISA compliance. The client is responsible for any tax filings. The financial proposal does not include Affordable Care Act taxes, fees, or any future government assessments.

Geisinger Health Plan, Geisinger Quality Options, Inc., and Geisinger Indemnity Insurance Company comply with applicable federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, sex, gender identity, or sexual orientation. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 800-447-4000 (TTY: 711). 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 800-447-4000 (TTY: 711)。

HPM50 ab 2020 GFA brochure Rev. 3/2021

The Geisinger logo is displayed in a large, bold, blue sans-serif font. Above the logo, a blue line forms a wide 'V' shape, with its point centered above the 'G'.