

GEISINGER HEALTH PLAN

Proposal for Geisinger self-funded health plans



Geisinger

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Self-funded health plans: The right choice for my organization?

Today, more organizations are considering self-funding to provide their employees with affordable and quality health insurance benefits. As an experienced third-party administrator (TPA)¹, we can help your organization succeed. The first step is understanding how self-funding works.

What is a self-funded health plan?

With a self-funded health plan, an organization takes on the responsibility and financial risk of providing health insurance benefits to their covered members. Meanwhile, we manage the day-to-day operations like processing claims, issuing ID cards, answering your covered members' questions and more.

How do I know if self-funding is right for my organization?

Self-funding can work for plan sponsors of varying sizes; your account executive can give you specifics on size requirements and help you determine your best option. Knowing the advantages of a self-funded plan will help you decide if it's the best solution for your organization.

What are the advantages of self-funding?

Greater financial control

You pay claims as they occur. At the end of the benefit year, if your claims cost is lower than expected, it's a direct cost savings to your organization.

Custom plan designs

Self-funding allows you to custom-design a health plan according to your organization's size and needs.²

Tax exemption

Self-funded health plans are tax exempt from most state premium taxes — an estimated savings of 2% to 3% of the premium dollar value.

Data accessibility

We take a consultative approach to track your organization's progress, providing reports on utilization, claims and more. Then, using this information, we make recommendations that help with making plan changes later.

What else should my organization consider?

Stop-loss coverage and claims risk

You can protect your organization with our stop-loss coverage. We can also provide an estimate of your organization's maximum claim liability.²

Terminal liability

If you choose to end a self-funded agreement, you have to account for claims, stop-loss coverage and administration services after the termination date.

Financial stability

Self-funded plans are best for organizations with proven fiduciary responsibility. Consider your future premiums and the risk you're willing to take on before deciding on a self-insured plan. You might also think about the specific deductible, the amount of claims for which the plan is responsible for any one individual in a contract period.

¹TPA services are provided by Geisinger Indemnity Insurance Company.

²Group size restrictions may apply. Consult your account executive to learn more.

Note: Nothing in this brochure is intended to constitute legal or tax advice. Employers are encouraged to consult their legal or tax advisor with specific questions.



How does stop-loss coverage work?

Making the switch to a self-funded health plan is a rewarding decision for most organizations, but it's also important to prepare your company for unexpected expenses that can arise if a number of your covered members become seriously ill. Stop-loss coverage protects your company against this risk.

What is stop-loss coverage?

Stop-loss coverage is additional insurance coverage that you purchase to protect your organization from unplanned financial risk. The stop-loss plan will pay for eligible plan costs after your organization has paid a predetermined amount. There are a variety of stop-loss plan options available designed to protect against frequent high-cost claims and maximum liability.

Does GHP offer stop-loss coverage?

Yes! Every organization's needs are unique. That's why we offer a broad range of stop-loss options — so you can find the right solution for your organization. We offer stop-loss coverage paired with ASO for 100+ enrolled subscribers. For companies with fewer than 100 enrolled subscribers, there's Geisinger Alternative Funding, a level-funded product. We have more than 30 years of experience providing plan sponsor benefits, and we put that expertise to work for organizations like yours. Let's discuss your options together.

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Why choose us?

Our diverse provider network is here to serve you

By choosing the best network for your group, you make sure that your covered members can use the providers they need. Our provider network includes over 33,000 primary and specialty physicians; more than 150 hospitals, including Geisinger hospitals, Hershey Medical Center and Johns Hopkins; and over 230 urgent care and convenient care locations in Pennsylvania and beyond. You have access to Geisinger and non-Geisinger providers — it's your choice.





Why choose us?

Our integrated care and coverage sets us apart

We're a health plan that's integrated into one of the most renowned health systems in the nation. At Geisinger, everyone works in healthcare, whether you're on the health plan side or the clinical side. Everyone's job is innovation and providing the best experience possible. We work as one team, day in and day out, to make care more affordable, better quality and a better experience.

Compared to other Pennsylvania health plans, GHP exceeds the average success rate among members for many routine healthcare services. We're familiar with meeting high quality standards and will apply the same principles to your organization.

Our nationally recognized programs are changing the game

We're known for our innovative cost-saving programs like ProvenCare®, Fresh Food Pharmacy® and our numerous Centers of Excellence with focuses on opioid treatment, hepatitis C, bariatric surgery and much more. We're even recognized by companies like Walmart as a preferred destination medicine location. Plus, our disease management initiatives help keep high-risk members with chronic conditions out of the hospital. These programs, among others, are only possible in an integrated health system, where we work together to help our communities.

We can help you contain your costs

Our dedicated analytics team is here for you. By developing our own solutions and partnering with best in class vendors, we deliver programs that help drive high quality and cost savings. From controlling out-of-network costs to offering specialty programs to manage high-end radiology, pain management, lab services and more, our dedicated analytics teams are constantly monitoring GHP and industry trends to ensure we're providing you cutting-edge, cost-reducing initiatives.

We'll help you stay healthier – longer

Our medical management team provides evidence-based clinical best practices and member-centric medical cost management. Integrated teams address quality of care issues; promote safe, timely and effective transitions of care; and anticipate the needs of our members.

Our team is there for you

When you choose GHP, our team will help you through the process from start to finish — and it doesn't end when your enrollment is finalized. Each of our product lines has a specially trained team available to answer member questions. That includes our employer care team, just for you. Our seasoned staff is dedicated to supporting our self-funded clients by taking a consultative approach to providing analytics and reporting information. Plus, our MedInsight reporting suite lets you keep an eye on your organization's claims and spending with just a click.

Why choose us?

Our pharmacy does the work so you can relax

Our pharmacy benefit programs are managed by in-house pharmacists and drug specialists to evaluate the most effective and cost-efficient treatments. Pharmacy benefits can be built into all our health plans with standard options made to be easily implemented on an expedited timeline. We offer a choice of two formularies: Geisinger Triple Choice Formulary – total lowest net cost, or Geisinger High Performance Rx – a high-performance formulary with higher rebates.

Save with mail-order

Our mail-order prescription drug service specializes in providing 90-day supplies of medications your covered members may take on a regular basis. With mail-order, your covered members can:

- Save on Rx copays
- Make fewer trips to the pharmacy
- Sign up for automatic refills
- Get free shipping
- Talk one on one with a pharmacist over the phone

Never overpay on prescriptions again

Rx Savings Solutions is a free service provided by Geisinger Health Plan that helps members save money on prescription drugs. This tool shows members every opportunity to save money on their current prescriptions – and even alerts them about chances to save on a prescription treatment. A convenient search portal lets members easily find the best prices and options for any prescription drug.

Let us manage your pharmacy benefits

Managing your pharmacy benefits is easy with the help of a pharmacy team that focuses on quality, cost and care. We design pharmacy benefits to create the most value for you and your covered members, with in-house experts and drug specialists regularly evaluating new medications and treatments for cost and quality.

And we didn't stop there. We've also expanded generic drug use, when clinically appropriate, resulting in increased cost savings for members and plan sponsors. Specialized medication and disease management programs help decrease emergency room visits and hospital admissions, preventing costly and long-term complications. Plus, our ProvenCare Pathways program effectively manages specialty drugs for a safe and cost-friendly treatment method.



Why choose us?

Because member health is your top priority

At Geisinger, care coordination teams will make sure your members are cared for across the care continuum. By working together, we can make sure all of your members' unique needs are being met through medical management, disease management, case management, quality improvement and much more.

As you know, cost containment is crucial in a self-funded environment. A full spectrum of population health management services reduce our clients' expenses while simultaneously improving the health of your workforce. Here's how we get you there:

- Providing access to the best care
- Getting your remote workers and their families involved in their own healthcare management
- Working across the board to create innovative care models for all

Because one size does not fit all, this model allows for the choice of programs to fit your needs.

Medical management helps contains costs

Medical management provides clinical best practices and cost management options while giving your members access to efficient and effective healthcare services. We link your group's care across the continuum, identifying and addressing quality of care issues; promoting safe, timely and effective transitions of care; and anticipating the needs of your members.

Disease management for the chronically ill

Do your members need treatment for chronic conditions? They can work with one of our health managers to better manage their condition. Disease management programs help members with complex conditions including asthma, diabetes, heart failure, chronic obstructive pulmonary disease (COPD), tobacco cessation and weight management.

Help managing behavioral health

You need resources to maintain your health and well-being. That's why you'll have personal assistance and a variety of resources for managing behavioral health concerns to meet the unique needs of your workforce.

Better care through case management

Case management is a collaborative process of assessing, planning, facilitating and advocating for options and services to meet a person's health needs. Every member of our care team plays a role in reducing avoidable hospitalizations and emergency room visits, and in making sure your members have the best possible holistic care.

We've developed groundbreaking case management practices so your covered members can have health issues monitored right from their own homes, like Bluetooth scales, blood pressure telemonitoring and ReDS Vest lung fluid monitors.

Help getting (and staying) healthy and well

When designing your plan, you can select from enhanced wellness packages that include services such as health fairs, on-site screenings and incentive program management. You'll have a wellness team providing services at your workplace or virtually, like health education, health fairs, coaching, on-site screenings, online health and wellness programs, and incentive programs. Our wellness specialists will work with you to develop a custom wellness experience for your group.

We also offer health management and prevention education, such as Live Your Best Life programming for diabetes, Free2BMom, Too Good for Drugs, quitting tobacco and pain management.*

Save with local and nationwide discounts

Pay less for health-related products and services you use every day.

- Fitness center memberships
- Eyeglasses and contact lenses
- Chiropractic care
- Local amusement parks and activities
- Massage therapy

*Programs may be subject to qualification and location

Why choose us?

Get the care you need without ever leaving the house

Telemedicine or telehealth appointments let you speak to a Geisinger doctor in real time using video chat technology, similar to FaceTime or Skype. Many of our providers now offer telemedicine services to diagnose and treat you exactly the way they would in a traditional office appointment — but from the comfort of your own couch.

Telemedicine and primary care providers

Many doctors are offering telemedicine services, even outside of Geisinger. Your employees can contact their primary care provider (PCP) to find out what they offer.

If your employees see Geisinger doctors, they can call [800-275-6401](tel:800-275-6401) for more information on telemedicine services available and schedule their visit.

Telemedicine appointments let your employees and their families get treatment for common issues like:

- Cold and flu
- Allergy
- Rash
- Sinus infection
- Urinary tract infection (UTI)

We also offer telemedicine visits for specialty care, including:

- Behavioral health
- Dermatology
- Pediatric specialties
- Cardiology
- Neurology
- Neurosurgery
- Orthopaedics
- Diabetes care
- Psychiatry

Get the full list of available services [here](#).

Can't wait for an appointment? Try Teladoc.

Have a health concern and need care now? We're partnering with Teladoc to offer virtual doctor visits, including COVID-19 screenings.

Teladoc* is a telehealth service that connects your covered members to doctors who can diagnose and treat non-emergency issues right over the phone, with no in-person visit needed. And if they need a prescription, that can be provided, too.

If your covered members need routine medical or behavioral healthcare and their PCP isn't available, they can visit teladoc.com or call [800-835-2362](tel:800-835-2362) to get started.

Teladoc is available to Geisinger Health Plan members. Non-members will be responsible for out-of-pocket costs.

Note: Teladoc is an enhanced service that you can select when building your customized plan.

Tel-A-Nurse hotline

This hotline is designed to guide your members to the proper care channels, whether that means scheduling an appointment with their PCP, stopping in at an urgent care location or heading to the ER. Think of Tel-A-Nurse as a first line of defense for medical questions and advice.

Talk with a registered nurse 24/7 at [877-543-5061](tel:877-543-5061). Getting answers is as simple as picking up the phone and calling. This service is not for medical emergencies or urgent needs and should not replace your members' PCP. There is no copay or cost for using Tel-A-Nurse.

Telemedicine and COVID-19

You don't have to skip or cancel your medical or behavioral health appointments because of COVID-19. While most people who have COVID-19 will have mild symptoms, our doctors can evaluate your risk and recommend next steps. If you're having symptoms related to COVID-19, reach out to us before heading to your doctor's office, urgent care clinic or the ER (as long as it's not an emergency).

Get in touch with us.

Your sales representative can help.

Name: _____

Phone: _____

Email: _____

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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.

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)

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The Geisinger logo is displayed in a large, bold, blue sans-serif font. Above the logo, a blue line forms a wide, shallow V-shape, extending from the left and right edges of the page towards the center, where it meets the top of the 'G' in 'Geisinger'.