

Introducing PlanAdvisor

Supporting your benefit plan needs every step of the way



PlanAdvisor powered by zywave

Welcome, Andy (Logout)

Accounts | Plan Selector | Benchmark Surveys

PlanAdvisor Health Plan Reporting

Select a client to begin.

Client Name	Address	City
Ackare Technology	12054 Holt Street	Morley
Adene	369 S. 23rd Street	Boca Raton
Alaignag Development	10588 Corporate Drive	Denton
ASA - Advanced Security	2413 Andell Road	Newark
Babbasem Systems, Inc	P.O. Box 2506	Greenville
Busch & Sons	4376 W. Circle Drive	Seattle
Cone Partners	12356 112th Street	Westerville
Croup Devices	5899 69th Avenue	Ontario

Enter Employee and Dependent Information

Employee [+ Add Dependent](#)

Gender: Male Female
Age:
Select the category that best describes your health care needs:
Benchmark state:
Rate tier:
Self-projected tax bracket:
Expected HSA contribution amount: \$
Expected FSA contribution amount: \$

Do you have any of these health conditions?	Has it required a hospital stay?	Benchmark Annual Cost	Benchmark Cost Override
Rheumatoid arthritis	<input type="text" value="No"/>	<input type="text" value="No"/>	\$0.00
Asthma	<input type="text" value="No"/>	<input type="text" value="No"/>	\$0.00
Cancer - Breast	<input type="text" value="No"/>	<input type="text" value="No"/>	\$0.00
Cancer - Colon	<input type="text" value="No"/>	<input type="text" value="No"/>	\$0.00

PlanAdvisor®

PlanAdvisor

At Rodney Rich & Company, we see a simplified way for you to approach the benefits plan design process. With PlanAdvisor, we can help you:

- Analyze your benefits plan costs against reliable benchmark information
- Model the impact of medical and Rx plan design changes
- Estimate your renewal costs
- Streamline the plan selection process for your employees

COMPARE YOUR PLAN


Management Report

- Compares your health plan data to other employers of similar size, region and industry
- Identifies key areas of cost or utilization concerns
- Positions you to develop targeted cost-cutting strategies
- Features over 20 medical and Rx comparisons
- Uses reliable benchmark data from Thomson Reuters MarketScan® Research Databases and Kaiser Family Foundation

MANAGEMENT REPORT EXHIBITS

- Health Plan Cost
- Medical Claims Costs
- Employee vs. Dependent Analysis
- Inpatient Summary
- Inpatient Detail
- Top Inpatient Providers
- Inpatient Maternity Summary
- Inpatient Maternity Detail
- Emergency Room
- Office Visits – Combined
- Office Visits – Primary Providers
- Office Visits – Specialist Providers
- Top Office & Clinic Providers
- Major Diagnostic Categories
- Disease Categories
- Rx – Average Paid Summary
- Rx – Cost and Volume
- Rx – Member Cost Share
- Rx – Mail Service Utilization
- Rx – Brand vs. Generic

MANAGEMENT REPORT EXHIBITS



123 Company

Top Office & Clinic Providers

This exhibit displays your company's top office and clinic providers.

Methodology

The table below displays your top providers, their network affiliation status, and number of visits. Actual type of information assists in developing appropriate plan designs and is essential for staying on top of changing health care delivery system in many communities.


Provider Name	Network	# of Visits	Total Paid	% of Total
Cleveland Clinic	Yes	52	\$3,279	
Park Nicollet Clinic	Yes	15	\$1,899	
Uptown Primary Care	Yes	30	\$1,843	
Marshfield Clinic	Yes	17	\$1,835	
Stoov Valley Clinic	Yes	35	\$1,579	
Woodland Clinic of Phoenix	Yes	11	\$1,503	
Wichita Clinic	Yes	20	\$1,379	
Mayo Clinic of Phoenix	No	10	\$1,342	
Grovelly Medical Clinic	Yes	20	\$1,282	
Sunflower Alternative Med	Yes	15	\$100,200	
Others		1,213	\$55,152	
Total		1,438	\$222,193	

Next Steps...

If your plan has a network, use this exhibit to gauge how effective your plan is at steering participants to network providers.

If your plan does not have a network, consider working with your benefits consultant to network based on current utilization patterns.

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123 Company

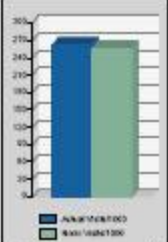
Emergency Room

This exhibit illustrates your company's emergency room visits compared to the norm.

Methodology

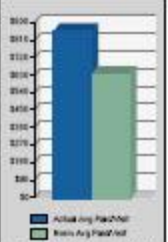
The normative data includes states that have been processed with a piece of service of emergency room designated by Centers for Medicare & Medicaid (CMS).

Visits per 1000



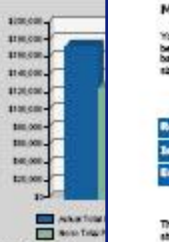
Actual Visits: 203
Norm Visits: 196
Percent Over/Under Norm: 3.40%

Average Paid per Visit



Actual Avg Paid/Visit: \$990.66
Norm Avg Paid/Visit: \$530.85
Percent Over/Under Norm: 86.80%

Actual Total



Actual Total Paid: \$201,104
Norm Total Paid: \$38,806
Percent Over/Under Norm: 417.80%


Next Steps...

If you see high frequency and relatively low cost compared to the norm, consider whether may be an overuse of emergency room services for inappropriate conditions.

Disseminate self care information for common illnesses such as colds, ear infections, and at appropriately-timed intervals throughout the year.

Encourage use of urgent care centers.

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123 Company

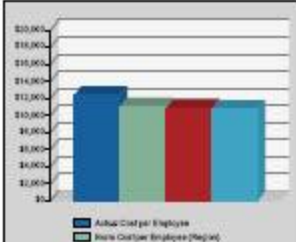
Health Plan Cost

This exhibit illustrates your company's health care cost per employee compared to benchmark data.

Methodology

Your plan costs were compared to benchmark data for similar employer plans based on region, industry, and employer size.

Region	Midwest
Industry Type	Trans/Comm/Utilities
Employer Size	200+ Workers



The actual costs for your company are shown in the table. The benchmark plan costs for a self-funded plan include medical (after specific stop loss reimbursement), Rx, and fixed administrative costs. The benchmark plan costs for a fully insured plan refer to premium paid.

Category	Value
Total Number of Employees	339
Actual Cost per Employee	\$11,294.95
Total Health Plan Cost	\$3,819,709
Norm Cost per Employee (Region)	\$3,703.80
Norm Total Cost (Region)	\$1,255,688
Norm Cost per Employee (Class)	\$3,663.71
Norm Total Cost (Class)	\$1,242,100
Norm Cost per Employee (Industry)	\$10,839.56
Norm Total Cost (Industry)	\$3,663,804

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MANAGEMENT REPORT EXHIBITS

PlanAdvisor
123 Company

Employee vs. Dependent Analysis

This exhibit illustrates your company's medical claims by relationship compared to the norm.

Methodology
The normative data is based on the percentage of total medical claims paid by relationship.

Actual Paid
Employee: 54%, Spouse: 21%, Dependent: 25%

Norm Paid
Employee: 55%, Spouse: 23%, Dependent: 22%

	Actual	Norm
Employee	\$1,497,632	\$1,527,337
Dependent	\$250,934	\$405,005
Spouse	\$608,283	\$791,627

Next Steps...
Plans with a few high cost claimants in a given relationship category can distort the percent. Use this exhibit as a tool to determine if your plan is being adversely selected against when employee percentage of cost is less than the norm. Discuss contribution options with your benefits consultant.

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Rx - Brand vs. Generic

This exhibit illustrates your company's utilization of generic prescriptions compared to the norm.

Methodology
The normative data includes prescriptions that were dispensed using a generic.

Percentage Generic Scripts
Actual: 36.30%, Norm: 51.05%, Percent Over/Under: -29.6%

Percentage Generic Total Paid
Actual: 33.31%, Norm: 37.72%, Percent Over/Under: -11.6%

Paid per Brand Prescription
Actual: \$100, Norm: \$150, Percent Over/Under: -33.3%

Next Steps...
Discuss your plan design with your benefits consultant as it can have a substantial impact on generic prescription utilization. Using generic prescriptions translates into significant cost savings for your plan and plan members. Analyze your plan's efficiency rate (number of times a generic is chosen over its brand counterpart). The lower the efficiency rate the better the opportunity to increase generic utilization. An average efficiency rate falls between 90-95%.

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Rx - Member Cost Share

This exhibit illustrates the portion of prescription costs your company's plan members pay compared to the norm.

Methodology
The normative data includes the participants' out of pocket expense for prescriptions.

Member Cost Share Percentage
Actual: 15.0%, Norm: 18.0%, Percent Over/Under: -16.6%

Average Member Cost Share
Actual: \$11.77, Norm: \$33.30, Percent Over/Under: -65.2%

Next Steps...
Discuss your cost share arrangement with your benefits consultant. A recommended cost share is 25-35%.

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PROJECT FUTURE PLAN COSTS

Renewal Estimator

- Calculates projected health plan costs based on trend, midpoint and large claim information
- Project future renewal costs to budget for next year
- Use pre-renewal to ensure a fair carrier quote

RENEWAL ESTIMATOR

Calculates an indicated rate change for the renewal

		PlanAdvisor	
123 Company			
2010 Renewal			
	01/01/2010 - 12/31/2010	01/01/2009 - 12/31/2009	Estimated Manuals
Total Paid Claims	2,048,848	1,737,216	
Total Pooled Claims	(125,678)	(94,563)	
Standard Pooling Point	50,000		
Desired Pooling Point	50,000		
Standard Pooling Charge	276,127	199,684	
Pooling Charge Used	276,127	0	
Paid Claims Net of Pooling	2,199,297	1,642,653	
Adjustment to Annualize	1.000	1.000	
Exposure Change Adjustment	1.000	1.041	
Paid to Incurred Adjustment	1.157	1.000	
Trend	1.122	1.259	
Discount Adjustment	0.000% Change	0.000% Change	
Benefit Plan Adjustment	0.000% Change	0.000% Change	
Underwriting Adjustment	0.000% Change	0.000% Change	
Projected Incurred Claims	2,855,026	2,153,478	2,192,238
Large Claims up to Pooling Point	100,000	50,000	N/A
Credibility	60%	30%	10%
Credibility Used	60%	0%	40%
Final Projected Claims	2,649,911		
Administrative Expense	115,968.00		
State Premium Tax	2.0%		
Profit	4.0% of final premium		
Required Premium	3,073,199		
Premium at Current Rates	2,354,056		
Indicated Rate Change	30.5%		
Selected Rate Change	30.5%		
Renewal Rates	Current Rates	Renewal Rates	Counts
Single	425.36	555.09	94
Family	918.75	1,198.97	170
Composite		969.71	
Monthly Total		256,004	
Annual Total		3,072,043	

SEE THE IMPACT OF A PLAN CHANGE

Plan Modeler

- Model potential alternative plan designs
- Analyze the impact of plan design changes before you make any decisions
- Applies to medical, Rx, HRA and HSA plans
- Based on proven actuarial factors

PLAN MODELER

Calculates the value of medical and Rx changes, along with the total value of plan changes

PlanAdvisor

123 Company, 2010 PPO

Medical Plan	Current Plan		\$1500 HSA		\$1500 HDHP	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible	500	1000	1500	3000	1500	3000
Family Deductible	1000	3000	3000	6000	3000	6000
HSA Style Family Limit	No	No	Yes	Yes	No	No
Primary Care Copay	20	0	0	0	20	0
Specialist Copay	20	0	0	0	20	0
Copay Type	Just O/V	Just O/V	All Inclusive	All Inclusive	Just O/V	Just O/V
Plan Coinsurance	90	70	90	70	90	70
Single Out of Pocket Max	1500	3000	3000	6000	3000	6000
Family Out of Pocket Max	3000	6000	6000	12000	6000	12000
Inpatient Copay	0	0	0	0	0	0
Outpatient Surgery Copay	0	0	0	0	0	0
Emergency Room Copay	50	0	0	0	50	0
Urgent Care Copay	20	0	0	0	20	0
Plan Psych Chem Dep Coinsurance	90	70	90	70	90	70
Psych Chem Dep Inpatient Limit	365	365	365	365	365	365
Psych Chem Dep Outpatient Limit	365	365	365	365	365	365
Well Child Annual Max	0	0	0	0	0	0
Adult Wellness Annual Max	0	0	0	0	0	0
Lifetime Maximum	Unlimited	Unlimited	Unlimited	Unlimited	0	Unlimited
Network Discount Improvement Factor	15.00%	0%	15.00%	0%	15.00%	0%
Percent of Total Care in Network	100%	0%	90%	10%	100%	0%
Prescription Drug						
Separate Rx Card?	Yes		No		Yes	
Drug Claims as Percent of Total Claims	15%		15%		15%	

	Tier 1/Tier 2/Tier 3	Tier 1/Tier 2/Tier 3	Tier 1/Tier 2/Tier 3
Deductible			
Plan Coinsurance	100%/100%/100%	100%/100%/100%	100%/100%/100%
Employee Coinsurance Minimum	N/A/N/A/N/A	N/A/N/A/N/A	N/A/N/A/N/A
Employee Coinsurance Maximum	Unlimited/Unlimited/Unlimited	Unlimited/Unlimited/Unlimited	Unlimited/Unlimited/Unlimited
Copay	100/0/0	0/0/0	100/0/0
Generic Mandate Options	20	None	20

Value of Medical Plan Changes	8.4%	-15.8%
Value of Rx Plan Changes	-100.0%	0.0%
Total Value of Plan Changes	-11.6%	-12.8%

SIMPLIFY OPEN ENROLLMENT

Plan Selector

- Advance employee consumerism and promote educated decision-making when offering multiple health plan options
- Address employee confusion regarding their enrollment options
- Employees input their expected health care needs and they receive a recommendation of the best plan option for them

PLAN SELECTOR

Employees input estimated health care needs for themselves and dependents

PlanAdvisor powered by Optima

Due to the personal nature of this information, you will not be able to save any pages of the Plan Selector. Navigating away from the Plan Selector will result in a loss of all previously entered information.

Enter Employee and Dependent Information

Employee Spouse Son Daughter Add Dependent

State of relationship: * Required Field

Gender: Male Female

Age:

Select the category that best describes your health care needs:

Benchmark status:

Do you have any of these health conditions?	Has it required a hospital stay?	Benchmark Annual Cost	Benchmark Cost (Override)
Rheumatoid arthritis	<input type="text" value="No"/>	\$0.00	\$
Asthma	<input type="text" value="Yes"/>	\$0096.00	\$ 0.00
Cancer - Breast	<input type="text" value="No"/>	\$0.00	\$
Cancer - Colon	<input type="text" value="No"/>	\$0.00	\$
Cancer - Lung	<input type="text" value="No"/>	\$0.00	\$
Cancer - Skin	<input type="text" value="No"/>	\$0.00	\$
Depression	<input type="text" value="No"/>	\$0.00	\$
Diabetes mellitus, type 2	<input type="text" value="No"/>	\$0.00	\$
Coronary artery disease	<input type="text" value="No"/>	\$0.00	\$
High blood pressure	<input type="text" value="No"/>	\$0.00	\$
Hypothyroidism	<input type="text" value="No"/>	\$0.00	\$
Lower back pain	<input type="text" value="Yes"/>	\$7407.00	\$ 500.00
Osteoporosis	<input type="text" value="No"/>	\$0.00	\$
Chronic headache	<input type="text" value="No"/>	\$0.00	\$
Gastro - Stomach/Intestinal Infection	<input type="text" value="No"/>	\$0.00	\$

Procedure Code/alias	Benchmark Utilization	Utilization Used In Analysis	Benchmark Cost per Procedure	Cost per Procedure Used In Analysis	Annual Cost
PS	1.00	1.00	\$ 133.44	\$ 133.44	\$ 133.44
Core physician visit	0	0	\$ 158.89	\$ 158.89	\$ 953.34
exam	1.00	1.00	\$ 126.05	\$ 126.05	\$ 126.05
day visit	0	0	\$ 0	\$ 0	\$ 0.00
total care (after delivery)	0	0	\$2279.37	\$2279.37	\$ 0.00
services					
in admission	0	0	\$16878.5	\$16878.5	\$ 0.00
in - Standard	0	0	\$7492.29	\$7492.29	\$ 0.00
in - Co-reaction	0	0	\$11590.8	\$11590.8	\$ 0.00
and surgery	0	0	\$1450.34	\$1450.34	\$ 0.00
day town visit	0	0	\$ 592.88	\$ 592.88	\$ 0.00
Tests					
gripes	0	0	\$ 188.85	\$ 188.85	\$ 0.00
copy	0	0	\$1014.96	\$1014.96	\$ 0.00
stress test	0	0	\$ 243.82	\$ 243.82	\$ 0.00
ray	0	0	\$ 85.04	\$ 85.04	\$ 0.00
	0	0	\$1129.45	\$1129.45	\$ 0.00
	0	0	\$1035.24	\$1035.24	\$ 0.00
Prescription Drugs					
(Retail)	1.00	1.00	\$ 22.18	\$ 22.18	\$ 286.16
(Mail)	2.00	2.00	\$ 69.25	\$ 69.25	\$ 138.50
tier 1 (Retail)	1.00	1.00	\$ 143.11	\$ 143.11	\$ 143.11
tier 1 (Mail)	2.00	2.00	\$ 338.88	\$ 338.88	\$ 673.36
tier 2 (Retail)	1.00	1.00	\$ 143.11	\$ 143.11	\$ 143.11
tier 2 (Mail)	2.00	2.00	\$ 338.88	\$ 338.88	\$ 673.36
Specialty (Total)	0	0	\$1750.00	\$1750.00	\$ 0.00
Specialty (Mail)	0	0	\$1750.00	\$1750.00	\$ 0.00
Annual Cost of Common Procedures Subtotal:					\$9816.43
Add Other Medical Expenses:				<input type="text" value="\$"/>	
Total Annual Medical Expenses:					\$ 9,816.43
Recalculate Totals					
Exit Dependents Analyze My Data					

PLAN SELECTOR

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Due to the personal nature of this information, you will not be able to save any pages of the Plan Selector. Navigating away from the Plan Selector will result in a loss of all previously entered information.

Summary of Output Results

[Edit Personal Health Information](#)

Health Costs Summary

Name or Relationship	Total Health Costs
Employee	8119.11
Spouse	9816.43
Son	8325.76
Daughter	8325.76

Total Health Expenditures: \$34587.06

Additional Information

Please complete this Plan Selector and make election in HRconnection by November 15th.

[Select 1500 SPD](#)

Plan Comparison

Plan Name	Total Employee Expenses	Net Cost w/ Tax Savings	Detail
Select 1500 - HSA	10075.74	9695.74	
Select 500 - PPO	12430.00	12430.00	
Select 1500 - PPO	13006.40	13006.40	

Recommended Plan Select 1500 - HSA

Carrier Acme Benefits

Employee Expenses after Insurance 4875.74

Employee Annual Premium 5200.00

Total Employee Expenses **10075.74**

Estimated Cost Savings from Using Pre-Tax Dollars Through FSA/HSA 3380.00

Net Cost w/Tax Savings 9695.74

The information provided is for estimation purposes only. Other important information, such as network providers and coverage/exclusions provisions of the plan should be considered by you make your health plan selection.

Awesome Agency

PlanAdvisor® is brought to you by Awesome Agency
2323 N. Mayfair Road · Milwaukee, WI 53226 · 414.475.1591

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Employees receive plan cost comparison and recommendation

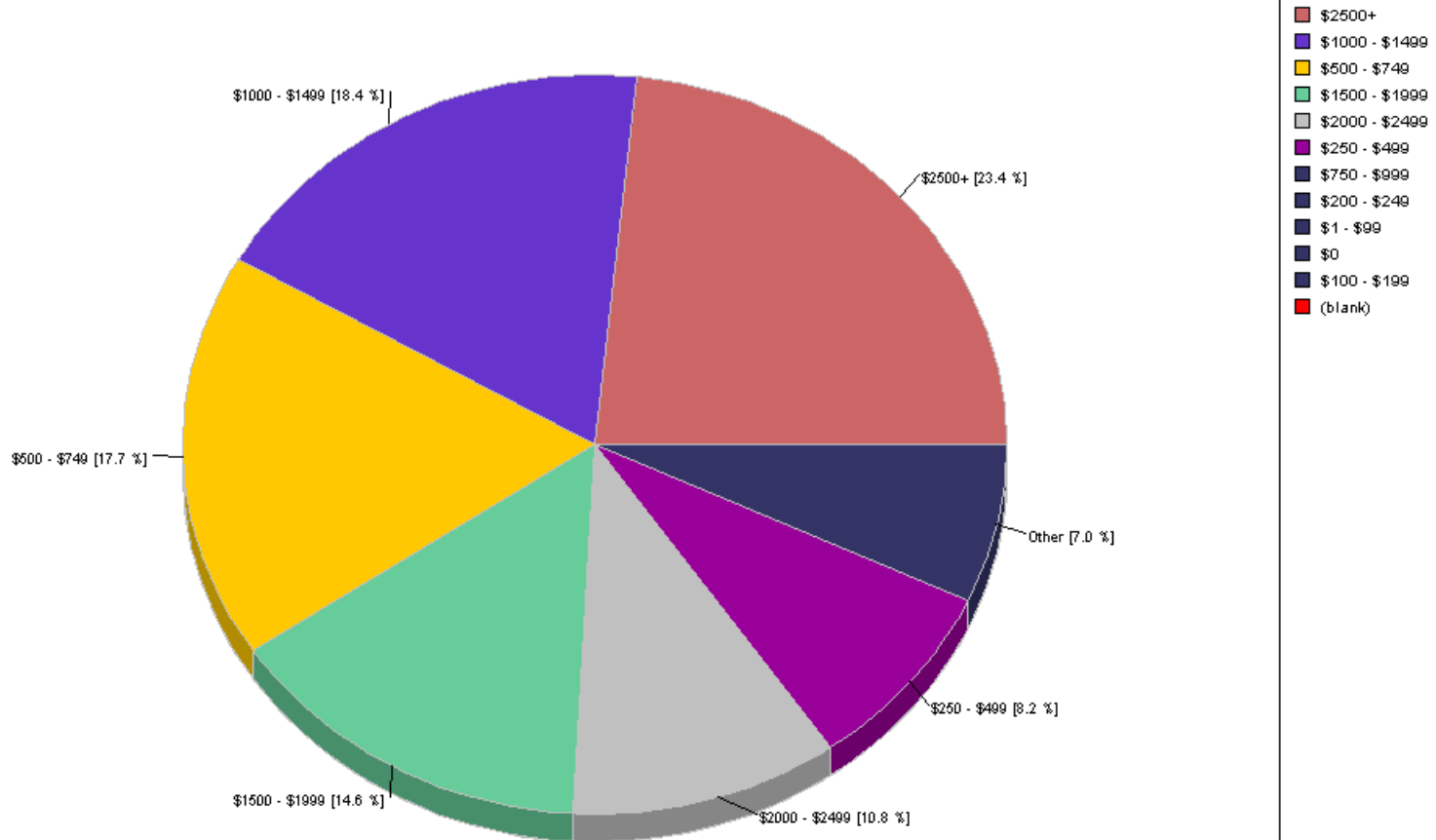
BENCHMARK YOUR PLAN

Benchmark Surveys

- We can provide thousands of survey results to see how you compare to other employers
- Various benefit plan topics available:
 - Deductible, coinsurance and other plan details, broken down by plan type
 - Rx plan data, such as number of tiers and copay per tier
 - Answers to how employers are planning to reduce health care costs in the near future

BENCHMARK SURVEYS

In Network Deductible - Midwest Region - Under 500 Employees



Let Rodney Rich & Company help you make educated, cost-cutting benefit plan decisions using PlanAdvisor.

Contact your Rodney Rich & Company representative to learn more or get started today!