

Why SimpleSelect?

- ✓ Affordability. By carefully selecting benefits and services, while holding fees down, we've designed a plan that provides real value, but at a very competitive price. SimpleSelect allows employers to offer a useful benefit to employees, at a cost that's far below the penalties that would be applied due to non-compliance with the Affordable Care Act.
- ✓ Greater value than typical minimum essential coverage (MEC) plans. In addition to the preventive care covered by similar plans, SimpleSelect provides the added value of up to four annual physician visits (with a \$25 copay); generic drug plan with a \$2 copay; and unlimited access to Teladoc telemedicine service.
- Proprietary claims funding projection methodology. Estimated claims are based on a rate table created by an actuarial service specifically for this plan which takes age, gender and projected utilization of services into account.
- Great HealthFirst service. SimpleSelect is a value-priced plan, but you get the same personalized service you'd get with a more robust plan, including a dedicated account management team and a customized toll-free customer service number to help employees.

Frequently asked questions about SimpleSelect

Q: What's the minimum number of lives that can be written on this plan?

- A: 15; an employer must have at least 50 full-time or benefit-eligible employees.
- **Q:** What are examples of the wellness procedures and visits covered by SimpleSelect?
- A: This plan complies with the Patient Protection and Affordable Care Act and covers standard preventive care, including but not limited to the following services for adults:
 - Blood pressure and cholesterol screenings.
 - Colonoscopy (adults over age 50, once every 10 years).
 - Diabetes screening (Type 2) (for adults with high blood pressure).
 - Routine vaccinations, including annual flu shot.
 - Routine physical exam.
 - Tobacco cessation program and aids.
 - Well-woman exam, including annual pap smear and other routine lab work.
 - Mammography to screen for breast cancer (women over 40, every one to two years).





Q: Does SimpleSelect use a network?

A: This plan uses the PHCS network, ensuring plan members an extensive selection of primary care providers and specialists, no matter where they live and work.

Q: How long does SimpleSelect take to implement?

A: Because of the streamlined nature of SimpleSelect, the plan can be fully implemented in as little as 30 days – so employers can begin offering this benefit to their employees quickly and easily.

Q: How is enrollment handled?

A: Enrollment can be completed online or on paper. Enrollment assistance from the account management team is available if requested.

Q: What's the employer's typical overall cost for this plan?

A: Costs depend on the age and gender of the employee population, but funding rates typically range between \$55 and \$100 PEPM. See the sample cost proposal below for a more detailed breakdown.

Proposal based on 230 employees*

HealthFirst Services

Medical Administration Fee	\$ 18.00
Network Access Fee	\$ 2.82
Teladoc	\$ 4.50
COBRA/HIPAA Administration	\$ 2.00
Broker Fee	\$ 13.00
Total PEPM Fees	\$ 40.32
Additional Fees	
Cobra Setup/Renewal Fee	\$ 200.00
Expected Claims Costs	
Employee Only**	\$ 52.17
Funding Rates	
Employee Only	\$ 92.49
Employee Only Monthly Cost	\$ 21,273

* Amounts shown for example only, based on Employee Only coverage

******Dependent rates can be provided upon request

