



CostLens Benefits Planning

Interactive portal to save time on renewals and proposals to clients

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Access Client Portal

Log into your client's unique portal, completely branded to your agency.

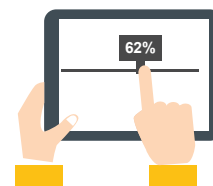
2



Add Scenarios

Select multiple plan groups to compare and contrast coverage and cost scenarios

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Live Contribution Modeling

Select and drag contribution strategy to architect a custom contribution strategy in real time

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Save Your Design



Save your plan design in the Benefits Consulting Cloud. Easily access this and all other custom reports, conveniently stored by client.

CostLens Report				
For Plan Year Starting: 2017				
Prepared By: Your Agency				
Costs Shown Per: Month				
Renewal Option 2	ER	\$11,975	-54.77%	EE \$9,888 -45.23%
Renewal Option 1	ER	\$9,554	-43.39%	EE \$12,227 -56.61%
Current Plans	Employer	\$1,015,397		Employee \$421,276

	Enrolled by Tier	Total Cost	ER Cost	Contribution Strategy	EE Cost
All other staff					
Employee	192	\$86,650	\$25,995	72%	\$60,655
Emp + Spouse	15	\$8,600	\$2,322	72%	\$6,278
Emp + Child(ren)	13	\$7,128	\$1,840	72%	\$5,488
Family	15	\$9,965	\$2,790	72%	\$7,175
Physicians					
Employee	89	\$40,166	\$6,427	54%	\$33,739
Emp + Spouse	11	\$6,307	\$883	54%	\$5,424
Emp + Child(ren)	16	\$8,981	\$1,078	54%	\$7,903
Family	10	\$6,643	\$930	54%	\$5,714

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Present alongside your Consulting Deliverable

Access your plans in the Benefits Consulting Cloud to export insightful deliverables (completely branded to your agency). Leverage other Code SixFour technology tools for Benchmarking, Modeling, Cost Analysis, and other powerful reports.

Predictive Health Risk Analysis

- Individuals with multiple health risks in

Plan Design Benchmarking Data

Hospitals / 1,000 to 4,999 Employees

Category	In-Network Cost Sharing	Benchmark Comparison	OAP 3009 Plan
Deductibles	Individual \$960.00	\$3,000.00	
Family	\$1,831.00	\$6,000.00	
Physician	\$9.66 copay 8.98% coinsurance	\$25.00	
Specialist	\$24.14 copay 8.98% coinsurance	\$40.00	
Outpatient	\$66.00 copay 17.6% coinsurance	0.00% After Deductible	
Inpatient	\$136.15 copay 19.4% coinsurance	0.00% After Deductible	
Rx	\$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00	\$0.00 \$0.00 \$0.00 \$0.00
Out Of Pocket Maximum	Individual \$1,969	\$3,000.00	
Family	\$4,027	\$6,000.00	

Plan Administration Fixed Cost Benchmarking

Cost Category	Tier	(Client)	ZSP %
General OpEx / Administration Cost (PEPM)	EE	\$4.07	
	ES	\$8.30	
	EC	\$8.73	
Aggregate Stop-Loss Premiums (PEPM)	EE	\$17.95	
	ES	\$7.47	
	EC	\$15.56	
Specific Stop-Loss Premiums (PEPM)	EE	\$16.06	
	ES	\$24.15	
	EC	\$66.04	
Claims Processing (% Of Medical Claims PEPM)	EE	\$138.26	
	ES	\$141.98	
	EC	\$214.22	
EE	3.85%		

Medical Plan Benefits

	Current Plan	Current Plan	Current Plan
	Cost	Cost	Cost
Deductible (Self/Fam)	\$3,000 / \$5,000	\$4,000 / \$5,000	\$5,000 / \$5,000
Out Of Pocket Maximum (Self/Fam)	\$2,000 / \$5,000	\$2,000 / \$5,000	\$3,000 / \$5,000
Primary/Secondary Office Visit	\$25 / \$40	\$25 / \$40	\$25 / \$40
Emergency Room	\$75 / \$100	\$75 / \$100	\$75 / \$100
Urgent Care	\$50 / \$75	\$50 / \$75	\$50 / \$75
Physician Co-insurance	15% / 20%	15% / 20%	15% / 20%
Specialist Co-insurance	20% / 25%	20% / 25%	20% / 25%
Maternity Co-insurance	10% / 15%	10% / 15%	10% / 15%
Prescription Co-insurance	10% / 15%	10% / 15%	10% / 15%
Outpatient Co-insurance	10% / 15%	10% / 15%	10% / 15%
Inpatient Co-insurance	10% / 15%	10% / 15%	10% / 15%
Out of Network Benefits Available	Yes	Yes	Yes
Out of Network Copay	\$50.00	\$50.00	\$50.00
Out of Network Coinsurance	10%	10%	10%
Out of Network Deductible	\$1,000.00	\$1,000.00	\$1,000.00
Out of Network Max	\$3,000.00	\$3,000.00	\$3,000.00