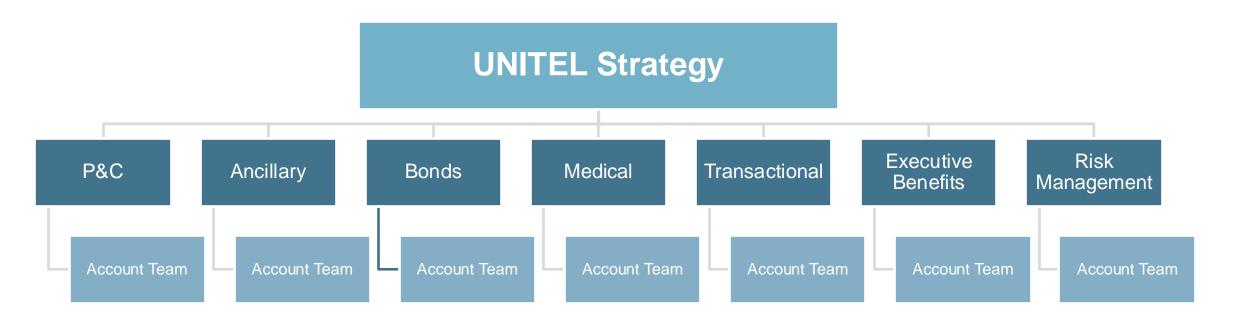


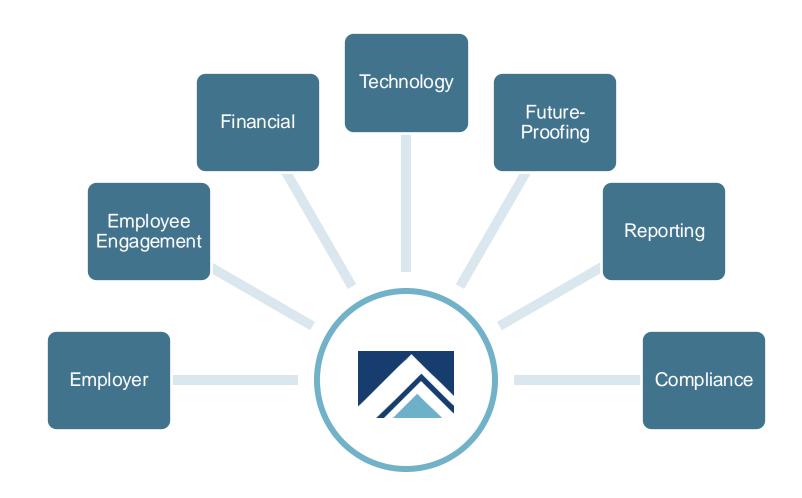
Employee Benefits State of the Union Kipp Kissinger

Our Streamlined Approach





UNITEL Benefits Strategy





State of the Market

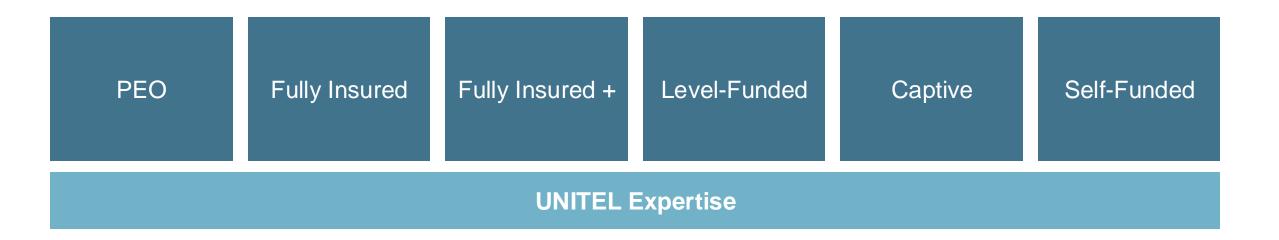
- Rx spend continues to dominate the landscape
 - Weight loss drugs GLP-1's and Ozempic
 - Specialty Drugs
- Medical Inflation
 - Continues to outpace inflation
 - Medical costs expected to rise at 8% in 2025
- Al in the medical world
 - There is hope to control spend.





Current Strategies

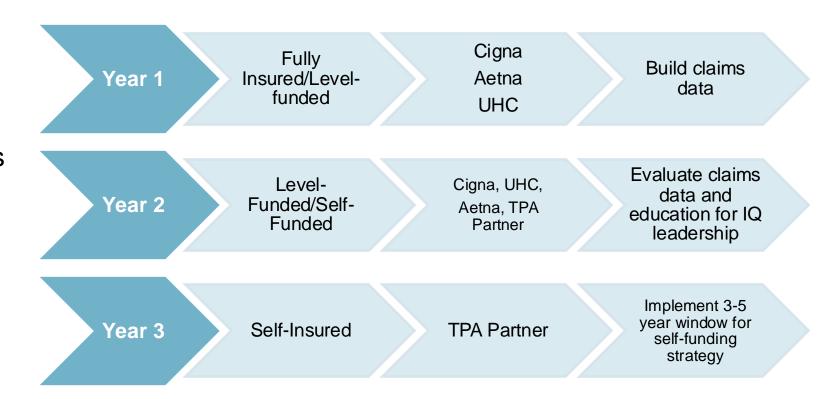
- > 3–5-year plans instead of the jack in the box approach
 - Vision is imperative to control spend
 - What is the right fit for my group?





Current Strategies

- Right fit for each group
 - While there is a roadmap, it's individualized.
 - No right number of employees
- Start-Up to Large Growth
 - Start Up Fully-Insured
 - Legacy Level-funded
 - Large Growth Self-Funded





Controllable Cost Savings

Taxes and Cash Flow:	HIT and State Premium Tax, Pre-Paid Claims	2.9% – 3.3%
Hidden and Misaligned Fees:	Fully insured and carrier TPAS	1.5% - 3+%
Overweight and Overpriced Be nefits:	Essential Health Benefits Mandate Age pricing compression Single risk pool standards	1% - 3%
Lower and More Transparent TPA Administrative Costs:	TPA vs Insurance Carrier	5% - 10%
Cost Control:	Transparency, RX Rebates, Wellness, Plan Incentives, Customization etc.	8% - 20%
Savings Potential:	Total	18.4% - 39.3%



Controllable Cost Savings

Cost Reduction Strategy- What will the TPA and PPO Allow?	Your TPA	TPA 1	TPA 2
Dialysis Program that lowers costs in Network below the PPO agreed price.	$\overline{\mathbf{V}}$		
Do you allow J-Code and Infusion programs that encourage members to use other PPO providers at a lower cost	V		
Do you allow Tiering and benefit plans that encourage members to use high value / low-cost PPO providers over any provider.			
Do you allow Specialty Carve-out Programs that source manufacturing assistance, charity care, and Rx programs that can purchase lower cost Canadian Prescriptions?	V		
Do you allow third party negotiations and audits on PPO provider claims?	$\overline{\mathbf{V}}$		100
Do you allow total transparency on claims reporting that would include Ineligible claims, shock loss information that includes prognosis, diagnosis, treatment plans, and provider/claim specific PPO discounts?	$\overline{\checkmark}$		



High Performance Health Plans

- Independent Administrator
- High touch Medical Management
- Customized Data Driven Plan Design
- Centers of Excellence and High Value Steerage
- Specialty Drug Sourcing
- J code blocking
- Dialysis and Transplant Management
- Independent Stop Loss Management
- Proactive Data Review and Planning



High Performance Health Plans

