



PROGRAM OVERVIEW

Success Group International Healthcare Initiative Program

Level-funded Group Health Benefits Program featuring healthcare benefit savings as compared to traditional coverage options.

Powered By 
Lifestyle
HEALTH PLANS
A World of Wellness

PROGRAM OVERVIEW

Lifestyle Health Plans... A World Of Wellness



Improve Health & Lower Costs

Lifestyle Health Plans is an innovative and strategic group health benefit solution designed for employers with 4 to 500 employees. Healthcare costs are consistently listed as one of the greatest concerns facing business owners and employees today. Lifestyle Health Plans believes that the only way to truly manage healthcare costs is to improve the health and wellness of our members.

Our Level-funded benefit program provides turnkey major medical health benefits with an integrated wellness and lifestyle improvement program designed to address the root cause of the escalating cost of healthcare - employee health behaviors. By design, our approach seeks to truly stabilize premium costs for employers from year to year to create a strategic and sustainable benefits program. Let our innovative and flexible plan designs, consumer-driven features, deductible credits, and cash reward incentives form the basis of a long-term benefits solution for your group.

What Makes Us Different?



Level-funded group health plan designs available through our "A" Rated reinsurance carrier partnerships



Premium savings in most cases of 5-15% versus traditional insurance products



Consumer-driven program features designed to save both employer and employee alike



Integrated wellness program with deductible credit and cash reward incentives for program participation



Provides sustainable health benefit program that addresses underlying causes of healthcare costs without reliance or being tied to a single carrier

Integrated Benefit Features:



OnCall MED - On-demand access to telemedicine consultations anywhere, anytime at \$0 Copay for Lifestyle Health Plans members



DirectHealth - 100% outpatient lab benefit program through preferred lab vendor designed to save employer and employee alike



Just Diabetic Supplies - Auto-ship program offers 100% benefit for diabetic testing supplies for enrolled participants to encourage regular testing and provide out-of-pocket savings



Patient Care Coordination - Program offers assistance in scheduling all outpatient diagnostic and surgery services



OUR INSURANCE PLATFORM

Lifestyle Health Plans... A World Of Wellness



What is a Level-Funded Plan?

Lifestyle Health Plans is a unique group health benefits solution that is built on an innovative Level-funded platform and designed from an insurance perspective that differs from traditional self-funded plans. The plan is 'level funded' meaning that by design, any risk to the sponsoring employer has been removed beyond the 12 months of premiums paid. By blending a specific and aggregate insurance coverage for each specific group, participating employers are able to gain the flexibility they desire without taking on the risk associated

with traditional self-funding. Our Level-funded plans are governed primarily by the Federal Employee Retirement Income and Security Act (ERISA), which can result in lower costs and expenses for sponsoring employers. Based on employer size, we can offer a unique, self-funded health benefits program that maximizes the benefits to employees, while implementing cost-saving opportunities for employers to stabilize benefit costs without reducing benefits.

How it Works

The monthly group health premium paid to Lifestyle Health Plans for your group is comprised of three separate components:



**1. Custom Stop Loss (CSL)
Insurance Coverage**

**2. Administration & Excess
Loss Coverage**

3. Claims Fund

Your maximum annual claims, including claims run-off liability, are predetermined and you pay 1/12 of this cost each month for the 12 months of your plan year. After you have paid this amount, there are no other charges for the claims fund. Once all claims have been paid for the plan year, any unused dollars in the claims fund will be used to reduce future premium rate increases. In the event of plan termination, each employer is eligible to receive back any unused dollars in the claims fund.

Truly Level-funded

Our Level-funded program is designed to truly 'levelize the funding' for your group health benefits from year to year. We recognize that the best way to stabilize employer health benefit costs is through a combined effort of accurately underwritten rates, proactive cost-containment measures, integrated wellness, patient care coordination and the ability to reinvest claim fund dollars to offset future rate increases over multi-year periods.

Rather than rate up your group to ensure a claims fund refund at the end of the plan year, our approach is designed to stabilize costs between plan years. This way, your group will have the best outcomes from an overall cost containment and population health management perspective!

COST CONTAINMENT STRATEGIES

Lifestyle Health Plans... A World Of Wellness



Lifestyle Health Plans is committed to finding innovative ways to manage healthcare costs. Traditional benefit designs and cost management techniques have been relatively unsuccessful in assisting employers and their members with cost containment. To address the need, we've integrated a number of additional cost management programs and benefit coverage solutions into our plan designs.

Unfortunately, most members today are totally uneducated regarding the cost of healthcare services.

Consumer awareness and education regarding the cost of services is a key element that makes Lifestyle Health unique. Once informed of their options, most members are open to doing their part in managing costs.

We partner with our members to provide multiple cost-effective healthcare delivery options, education with regards to the cost differentials, and then freedom for the member to decide where they would like their care provided. In the end, empowering change through consumer awareness is a unique difference offered through Lifestyle Health.



ER Utilization

Emergency Room utilization has been deemed in a retrospective review to be an inappropriate place of service for up to half of all ER visits.



Implant Cost Containment

Some of the highest hidden costs to healthcare consumers come in the manner in which hospitals charge for certain supplies, implants, and other misc. charges associated with a hospital admission.



Alternative Generic Drug Utilization

The majority of brand-name medications on the market today have an alternative generic drug replacement that provides the same care management results, but at a fraction of the cost of brand name prescriptions.



Outpatient Imaging & Surgical Services

Utilizing a freestanding imaging center for outpatient radiology, imaging, and surgical services needs can provide significant savings to our members.



Specialty Medications and Injectibles

Specialty medications are the fastest rising cost item in healthcare today. By analyzing the current utilization needs within each group, Lifestyle Health can lower your premium costs dramatically by excluding certain medications that can be covered through other advocacy programs.

MEDICAL PLAN COMPARISON

Success Group International Healthcare Initiative Program



In-Network Provider: PHCS	HDHP HealthyConsumer 3000	HDHP HealthyConsumer 6500	PPO HealthyChoice 1000	PPO Healthy100 3500	PPO Healthy100 5000
IN-NETWORK COVERAGE					
CALENDER YEAR					
Deductible Single / Family (embedded)	\$3,000 / \$6,000	\$6,500 / \$13,000	\$1,000 / \$2,000	\$3,500 / \$7,000	\$5,000 / \$10,000
Co-insurance	N/A	N/A	80/20	N/A	N/A
Co-insurance Maximum - Single/Family	N/A	N/A	\$2,500 / \$5,000	N/A	N/A
Out-of-Pocket - Single/Family	\$3,000 / \$6,000	\$6,500 / \$13,000	\$3,500 / \$7,000	\$3,500 / \$7,000	\$5,000 / \$10,000
INPATIENT HOSPITALIZATION					
Medical Facility Services	Ded/Co-ins	Ded/Co-ins	\$500 Copay, then Ded/Co-ins	\$500 Copay, then Ded/Co-ins	\$500 Copay, then Ded/Co-ins
Anesthesiologist & Surgeon Fees	Ded/Co-ins	Ded/Co-ins	Ded/Co-ins	Ded/Co-ins	Ded/Co-ins
PHYSICIAN OFFICE VISITS					
Primary Care	After Ded, \$30 Copay	After Ded, \$30 Copay	\$30, then 100% to \$250 per visit, then Ded/Co-ins	\$30, then 100% to \$250 per visit, then Ded/Co-ins	\$30, then 100% to \$250 per visit, then Ded/Co-ins
Specialist	After Ded, \$50 Copay	After Ded, \$50 Copay	\$50, then 100% to \$250 per visit, then Ded/Co-ins	\$50, then 100% to \$250 per visit, then Ded/Co-ins	\$50, then 100% to \$250 per visit, then Ded/Co-ins
Routine Preventive Exam	100%	100%	100%	100%	100%
PRESCRIPTION DRUGS					
Generic Copay	After Ded, \$1 / \$15	After Ded, \$1 / \$15	\$1 / \$15	\$1 / \$15	\$1 / \$15
Brand Copay / Non-Preferred	After Ded, \$50 / \$80	After Ded, \$50 / \$80	\$50 / \$80	\$50 / \$80	\$50 / \$80
Specialty Rx	After Ded, 50%	After Ded, 50%	50%	50%	50%
OUT-OF-NETWORK COVERAGE					
Deductible - Single / Family	Out-of-network Deductibles are 2x the in-network Deductible. Out-of-network Co-insurance percentage and out-of-pocket amounts vary by plan selection. Please refer to your Summary Plan Document for actual benefits, limitations, and exclusions.				
Co-insurance					
Out-Of-Pocket - Single / Family					
ADDITIONAL INCLUDED PROGRAMS					
Telemedicine (unlimited)	No Copay	No Copay	No Copay	No Copay	No Copay

INTEGRATED PLAN BENEFITS

Lifestyle Health Plans... A World Of Wellness



INTEGRATED TELEMEDICINE

24/7/365 for \$0 Copay

Lifestyle Health Plans members can talk to a OnCall MED clinical professional anytime, anywhere. Avoid office visit copays, urgent care visits and unnecessary emergency room visits. Connect with a clinical professional live by calling OnCall MED. OnCall MED is a key component of every plan design at a \$0 Copay.

OnCall MED offers over 240 clinical professionals and covers all 50 States. Providers are typically available within 10 minutes, and a consult is guaranteed within three hours.



ON CALL MED

PATIENT CARE ADVOCACY SERVICES

Maximize Your Plan Benefits & Manage Your Chronic Conditions with Care Advocates

Managing healthcare costs and promoting consumer awareness with plan participants is a key element of what Lifestyle Health does differently. Through our partners at Care Advocates, our Care Coordination Teams help you save when you need outpatient imaging and surgery services, specialty medications, generic medication conversions and more!

Struggling with a chronic condition? Our Care Coordinators are trained and ready to assist with chronic condition and disease management as an integrated benefit and service for plan participants. In coordination with your provider, we can provide tools, action plans and other support to assist with managing chronic conditions. We are committed to our members!



CARE
ADVOCATES

INTEGRATED PLAN BENEFITS

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DIABETIC SUPPLIES

Direct Shipping At No Cost!

Save on your out-of-pocket costs! Diabetic testing supplies are covered at 100% through the Just Diabetic Solutions program. All of the testing supplies you need - including a new meter, test strips and lancets - shipped directly to you at no cost!



To get started, simply complete a simple member enrollment form (available in your Lifestyle Member Welcome Packet). You will receive a welcome package with the startup kit once your enrollment is processed.

Note: Due to federal regulations this benefit cannot be offered in plans that are qualified HDHP plans without cost sharing by the member. However, these individuals can contact Just Diabetic Solutions for discounted purchasing options.

OUTPATIENT LAB TESTING

Maximize your DirectHealth Benefit



Through the DirectHealth Lab Benefit Program, you have a 100% lab benefit when you use LabCorp. Whenever your doctor orders laboratory or pathology, just ask him/her to attach a copy of your DirectHealth card to the requisition and follow the simple instructions on the back of the card regarding procedures for lab/path collection. If your physician's office does not use LabCorp as their reference lab, you will need to either request

that they draw the sample and call DirectHealth to schedule a pick up of the sample, or that they send you to the nearest LabCorp Patient Service Center with a requisition form for the required tests.

Note: Due to federal regulations, the 100% lab program is not available for HealthyConsumer HDHP plan participants.



WELLNESS INCENTIVES

Earn Deductible Credits & Bonus Bucks

GET STARTED EARNING WELLNESS POINTS FOR DEDUCTIBLE CREDITS

Each year, you can earn wellness points by participating in the wellness program. Points convert to deductible credits for your next program year and then Lifestyle will match your credits based on your program year! Jump start your deductible credits by completing the

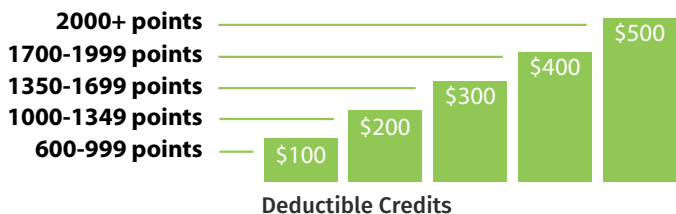
online Health Risk Assessment (HRA) and wellness lab testing through your Wellness Center account. If completed within the first 2 months of your effective date on the plan, Lifestyle will give you a complimentary deductible credit for your first program year!



We'll Match You!

- Program Year 2 = 25% credit match
- Program Year 3 = 50% credit match
- Program Year 4 = 75% credit match
- Program Year 5 = 100% credit match

What Will I Earn?



Jump Start Your Credits!



Within the first 2 months from program effective date

HRA 	+	LABS
\$250.00 Deductible Credit		\$250.00 Deductible Credit

Total Possible: \$500.00

(If completed within 2 months from effective date)

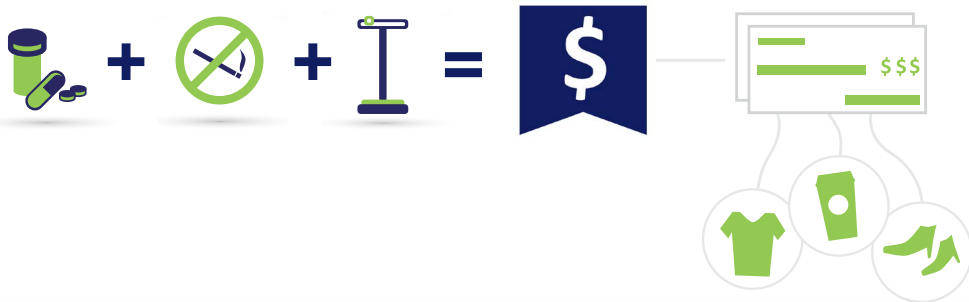
EARN BONUS BUCKS CASH INCENTIVES

In addition to deductible credits, LifestyleWellness provides additional 'Bonus Buck' cash incentives for plan participants who act as wise healthcare consumers and/or participate in a proactive, disease management program. Check out the **Ways to Earn Rewards** charts on the next page for a comprehensive list of cash earning opportunities! Just look for the Bonus Bucks ribbon graphic for cash incentive

opportunities while participating as a wellness program participant. Upon completion, you will be awarded your Bonus Bucks with a personalized check for your reward amount!

Check out the chart on the next page to find ways to earn Bonus Bucks.

You will be awarded your Bonus Bucks with a personalized check for the reward amount!



WAYS TO EARN REWARDS



Incentive Key:



Wellness Points for Deductible Credits



Bonus Bucks Cash Rewards

HRA / Labs



Activity	Incentive	Max / Program Yr.
Health Risk Assessment (HRA)	250 points	250 points
Lab Testing	250 points	250 points

* Points awarded through online HRA based upon change in weight between program years.

Healthy Actions



Activity	Incentive	Max / Program Yr.
Gym Membership Attendance*		
25 Visits / Qtr	100 points	400 points
20 Visits / Qtr	75 points	400 points
15 Visits / Qtr	50 points	400 points
Self Reported Exercise (30 minute min) **		
25 Times / Qtr	50 points	200 points
20 Times / Qtr	35 points	200 points
15 Times / Qtr	25 points	200 points
VERIFIED RACE COMPETITIONS***	25 points / mile	200 points
Challenges		
Individual	50 points	no max
Employer Sponsored	100 - 250 points	no max
Action Plans		
Wellness Center Action Plans	200 points	no max

* Must be verified by gym or trainer by submitting rewards verification form.

** Points can be self-reported by submitting rewards verification form.

*** Must be verified & submitted with rewards verification form.

Prevention



Activity	Incentive	Max / Program Yr.
Physical / Wellness Exam *	300 points	300 points
Dental Exam	100 points	100 points
Vision Exam	100 points	100 points
Flu Shot	50 points	50 points

*Points can be earned by completing one routine physical, wellness exam or well-woman exam within program year.

Health Coaching



Activity	Incentive	Max / Program Yr.
TOBACCO CESSATION		
Initial Enrollment	\$100 bonus bucks	\$100 bonus bucks
Coaching Compliance	\$100 bonus bucks	\$100 bonus bucks
COACHING PROGRAMS		
Wellness Coaching	50 points / call	no max
Disease Management Coaching *	50 points / call	
Disease Management Coaching Compliance **	\$100 bonus bucks	\$100 bonus bucks

* Disease Management programs include coaching for COPD, Obesity, Diabetes, Dyslipidemia, and Hypertension.

** Disease Management compliance is earned after 90 days of active participation.

Wellness Achievement



Activity	Incentive	Max / Program Yr.
Wellness Participation / Points Achievement *		
2500 - 3000 Points Earned	\$100 bonus bucks	\$300 bonus bucks
3001 - 3500 Points Earned	\$100 bonus bucks	\$300 bonus bucks
3501+ Points Earned	\$100 bonus bucks	\$300 bonus bucks

* Wellness Participation / Points Achievement Bonus Bucks are sent at the completion of the member's program year.



DENTAL PLAN COMPARISON



Dental Coverage Plan Summary

Annual Maximum Benefit	\$750	\$1,500	\$3,000
Annual Individual Deductible	\$50	\$50	\$50
Annual Family Deductible	\$150	\$150	\$150
	In-Network You Pay	In-Network You Pay	In-Network You Pay
Preventive Care—Cleanings, Oral Exams, Fluoride, etc.	0%	0%	0%
Basic Care—Fillings, & Emergency Care, Endodontics, Oral Surgery, Simple Extractions	20%	20%	20%
Major Services— Crowns, Inlays & Bridges	50%	50%	50%

- ⇒ No Waiting Periods
- ⇒ All Plan utilizes the “Always Care” network
- ⇒ ID card provided
- ⇒ Out-of-Network charges pays claims on maximum allowable charge



VISION PLAN SUMMARY



Schedule of Benefits	In-Network What you pay	Out-of-Network What you pay
Copay for Exam Copay for Materials	\$10 \$25	Up to \$40
Frequency Exams Lenses or Contract Frames	Once Per 12 months Once per 12 months Once per 24 months *Frequency is based on prior date of service*	
Frames	\$130 Allowance	Up to \$40
Standard Plastic Lenses Single Vision Bifocal Trifocal	\$25 \$25 \$25	Up to \$30 Up to \$50 Up to \$65
Contact Lenses Conventional Disposables Medically Necessary	\$130 Allowance \$130 Allowance \$0 Copay, Paid in Full	Up to \$150 Up to \$150 Up to \$250

⇒ No Waiting Periods

⇒ 4 year rate guarantee

⇒ 20% participation required

⇒ EyeMed National Network



LIKE TO OFFER MORE BENEFITS?

Basic & Voluntary Life (includes AD&D)

Benefit Amount	Benefit Option	Rate
\$25,000 Basic Term Life and AD&D coverage	Employer may elect basic life insurance for all eligible employees	TBD during quoting process
\$50,000 Basic Term Life and AD&D (Employer Paid)	Employer may elect basic life insurance for all eligible employees	TBD during quoting process

Voluntary Term Life & AD&D

Employee

Choose from \$10,000 to \$500,000 in \$10,000 increments, up to 5 times annual earnings. Guarantee Issue amount is \$100,000.

Spouse

May elect up to 100% of employee coverage in \$5,000 increments not too exceed \$500,000. Guarantee Issue amount is \$25,000

Child(ren)

Children 6 months to age 26 may elect up to \$10,000 of coverage in \$2,000 increments. Live birth to 6 months—coverage will not exceed \$1,000.

Disability

Short and Long Term Disability

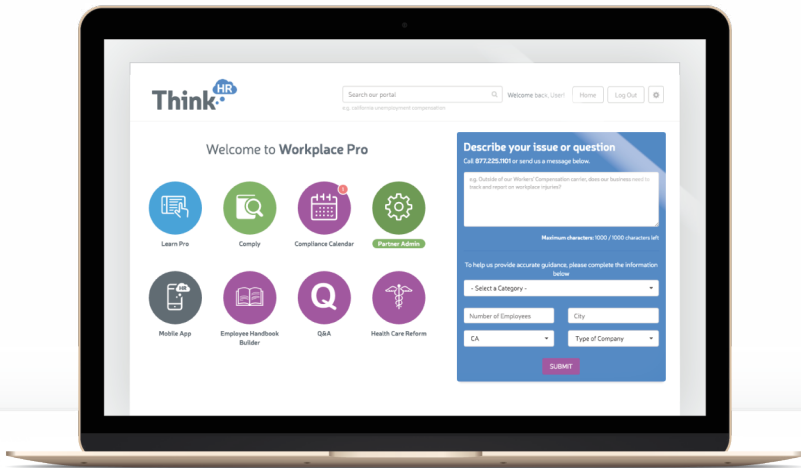
Employers may chose to offer both Short and Long Term Disability on an employer paid or voluntary basis. Quotes will be provided with submission of employee job titles and annual salary.

Note: Minimum Participation of 10 employees required on Voluntary Life and Disability.



ThinkHR is included
when joining.

PROTECT YOUR BUSINESS
STRENGTHEN YOUR TEAM



Workplace Pro is an integrated suite of **HR knowledge**, content and **training solutions**.



LEARN PRO

More than 200 online training courses that ensure compliance, reduce risk and drive employee engagement. Plus an intuitive admin dashboard, robust reporting and Quick Start course tracks.



LIVE

Certified HR experts answer questions, render advice and follow up with research to resolve issues.

Accessible 8am-7pm Central each business day



COMPLY

Comprehensive resource center with all the forms, checklists and tools needed to maintain compliance.



INSIGHT

All the news and analysis HR professionals need to stay current and compliant with changing regulations.

ADVOCACY & TRANSPARENCY IS VITAL

ONLY
9%

of Americans surveyed “showed an understanding of the following common health insurance terms”

- Health Plan Premium
- Health Plan Deductible
- Out-of-Pocket Maximum
- Co-Insurance

SUPPORT YOUR MEMBERS & ALLEVIATE HR QUESTIONS WITH

HEALTH ADVOCATE™ SOLUTIONS – An Extension of your HR Team

Health Advocacy

- Untangle medical bills and insurance claims, Find network providers
- Clarify benefits and answer questions about tests, treatments and medication options
- Assist with eldercare and related healthcare issues
- Arrange second opinions and transfer medical records

Medical Bill Saver™

- Skilled negotiators will attempt to negotiate discounts on medical and dental bills on your behalf, no matter your benefit status
- Negotiate payment arrangements with providers and find options for non-covered services

NurseLine™

- Registered nurses ready to answer your calls 24/7/365
- Detailed information on a range of concerns including appropriate treatment options for minor emergencies or illnesses

TELEPHONIC EAP – Mental Health for employees and assistance to the Employer

- 24/7 access to confidential, short term telephonic counseling
- Organizational services to assist managers and HR Staff
- Work/life services address concerns from adoption to eldercare, alcohol and drug abuse, and much more

COMPASS PRICING TRANSPARENCY

Costs for the same service can differ by 300%

- Compare costs for procedures and care
- Find lower cost alternatives for prescriptions
- Provider and care recommendations are based on health plan, personal preferences, cost, quality and availability

RETAIL AND MAIL ORDER PHARMACY

- Save 10% to 85% on most prescriptions at 60,000 retail pharmacies nationwide
- Save 10% to 85% on 30+ day supply prescriptions shipped directly to your home with free standard shipping

ADDITIONAL SAVINGS ON HEARING AIDS AND VITAMINS

This is Not Insurance.



What to Expect

- Membership materials (booklet and ID card) will be mailed to the employee's home address
- Materials will display your name and member ID
- Employees will follow the instructions in the member materials or on the member portal MyBenefitsWork.com

ACCESS BENEFITS ON THE GO!

With the **My Benefits Work™** mobile app & portal



DISCLOSURES

This plan is NOT insurance. The plan is not insurance coverage and does not meet the minimum creditable coverage requirements under the Affordable Care Act or Massachusetts M.G.L. c. 111M and 956 CMR 5.00. **It contains a 30-day cancellation period.** Member shall receive a reimbursement of all periodic membership fees if membership is cancelled within the first 30 days after the effective date. Discount Plan Organization: New Benefits, Ltd., Attn: Compliance Department, PO Box 803475, Dallas, TX 75380-3475, 800-800-7616. Not available to residents of UT, VT, & WA. © 2019

START SAVING TODAY!

Top 10 Reasons To Choose the SGI Healthcare Initiative Program

1. Premium savings over comparable traditional insurance plans.
2. Individual Health Questionnaires - only take 2-3 minutes to complete to obtain firm rates.
3. Start saving now – no need to wait until your renewal. Most carriers will allow you to opt out with a 30-day written notice.
4. YTD deductibles and out of pocket dollars are honored for the calendar year. EOB from prior carrier required for credit.
5. Free access to THINKHR, Compliance Software & Legislative Briefs for all groups signing up by year end through the SGI Program.
6. Wellness Credit – up to \$500 for member and spouse (each).
7. Wellness Kits provided to each group to help jump-start the road to healthier employees.
8. Ability to offer additional ancillary benefits through the SGI Program.
9. 50% Employer contribution of employee-only rate on lowest plan offered (PPO or HDHP).
10. Telemedicine with \$0 copay included along with International Mail order for Brand Name drugs.

Get a Quote!

Large Group Quoting (over 100 employees) Requires:

- Current Employee Census
- 3 Years of Rate and Claims History
- Copy of Current Plans

Small Group Quoting (less than 100 employees) Requires:

- Current Census
- Individual Health Questionnaires

Quotes returned in 72-96 hours



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