

A Broker's Handbook

From Lucent Health

Helping Self-Insured Employers with the 2 Things They Care about ... Right Now



Lucent Health

DATA DRIVEN + HUMAN FOCUSED

Right Now

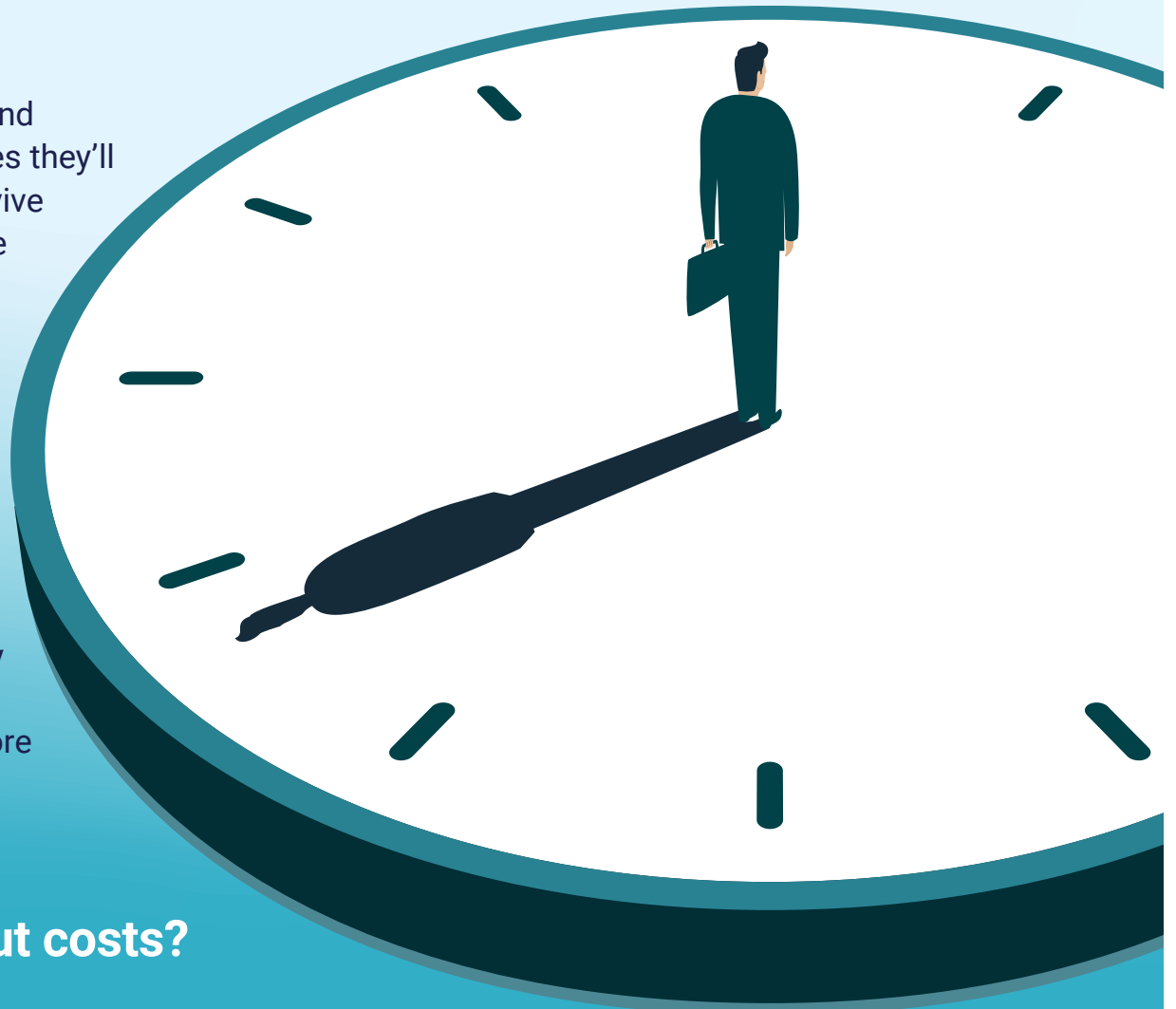
Right now, employers are scared—and they're worried about what measures they'll need to take to bounce back or survive after the COVID-19 pandemic. There are a lot of unknowns during this unprecedented time, but there is something we do know: Companies in every industry need help.

So, as a health benefits broker serving self-insured companies, what can you do to help?

From our perspective, there are only two things that matter right now to your customer—and they matter more than they would at any other time:

How can you help me cut costs?

How can you take care of my people?



Those are the only two things that the leadership of any company, whether human resources or finance, will be able to hear coming out of your mouth right now. Anything else you try to sell will sound like Charlie Brown's teacher: "wah wah wah wah."

The good news? There's a way to address both questions, without waiting for enrollment, that can position you as a hero.



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Can you imagine companies right now dealing with the uncertainties of this healthcare crisis, and then learning that they can expect to see rate increases of 5%–15%? That's about to happen.

Every self-insured company should consider a value-based pricing (VBP) plan as a way to cut costs. Lucent Health, the largest administrator of VBP plans in the country, helps companies save an average of 25%–30% over PPO plans in year one, then holds costs at 1.25% in subsequent years.

VBP plans also don't introduce a lot of the negatives that reference-based pricing (RBP) plans present.





The first generation of RBP plans, introduced in 2004, were initially a great idea. Instead of the traditional insurance practice of “discounting” artificially high pricing for delivery of care (discounts of 200% or 300% of Medicare are common), RBP plans started with Medicare and built in an acceptable profit for providers of care (sometimes 120% of Medicare).

But the relationship with providers was adversarial. The pricing model for employers wasn’t transparent and there were lots of extra fees. Plus, the experience for members was worse. Billing was confusing and members were often referred to credit agencies for not meeting their obligations on balance bills.

The second generation of RBP plans, introduced in 2015, were better, but they still didn't focus on member education. Balance billing persisted as a common issue for RBP plans.

The third generation are value-based pricing plans (VBP). VBP plans solved the problems that had plagued RBP plans, while also maintaining significant and sustainable savings. Since then, direct contracting with providers has become more common.

Direct-to-employer (DTE) facilitation of agreements allows employers to access the leading health systems in the U.S. without a middle man. Member education and attention to customer service has improved, too. The best VBP plan administrators use data to customize plans with the right mix of benefits—at the best cost—while also mitigating risk. Those plans also use data to understand how to better support members with complex care needs through comprehensive, compassionate care delivered by an experienced care team.

VBP plans are the rare convergence of delivering more (better member care and higher satisfaction) for less (dramatic and sustainable savings).

So, how can you help employers by taking care of their members, right now?

In a normal time, your healthiest members won't need as much personal attention as those with complex care conditions. But during this global health crisis? You may have a 30-year-old health member who wants to know what to do if he runs a fever or a young mother who's worried when her child starts to cough. Fears about COVID-19 are substantial and real. Companies are understandably overwhelmed with the needs and questions surrounding this crisis. That's why delivering a concierge care solution that alleviates pressure on HR is needed.

Lucent Health's wholly owned Narus Health care management solution

was formed to service the care needs for the most medically complex and vulnerable patients and their families. The company was started to help members and their families at the point of greatest need. That level of care was migrated to serving all members, and Narus Health uses daily data feeds to best allocate care resources. Narus Health delivers a team, platform and process to create care plans, help members understand all medications and treatments, provide a listening ear, and help set appointments and explain bills and statements. Narus Health's platform automates how information is shared with the appropriate caregivers, too. Compassionate care isn't delivered by machines. Narus Health works with members in the medium they prefer, whether it's via traditional phone calls or through secure texting via our app.



YOUR TEAM



YOUR PLATFORM



YOUR PROCESS

Are you equipped to deliver the compassionate care and information members need during this historic moment and afterward? Lucent Health is here to help—right now.



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