



Lucent Health
DATA DRIVEN + HUMAN FOCUSED

Lucent Health is a leading third-party administrator serving the self-insured employer market, with a fully integrated care management solution. Lucent Health is data driven and human focused, with plan administration, patient care programs and cost controls all under one roof.

Lucent Health is the largest administrator of Value-Based Pricing (VBP) plans in the U.S., helping save employers an average of 25% to 30% in health benefit costs in the first year, and holding cost increases down to less than 2% thereafter. Narus Health, a Lucent Health Company, is its fully integrated care management solution.

With 435 employees, and more than 250,000 member lives managed across more than 800 clients, Lucent Health processes more than \$2 billion in claims annually. Our 10 offices nationwide are linked by one data warehouse, one phone system, one data analytics system and one financial platform.

Lucent Health possesses the care teams, technology platforms and data-driven process to:

- > Help self-insured employers design customized health benefits solutions that mitigate risk and reduce costs. We offer the best rates on Value-Based Pricing (VBP) plans and help drive down health benefit spend through daily analysis of Plan data and proactive Plan management.
- > Serve members with complex clinical needs with compassionate care and concierge options. Narus Health's care management team helps employees consume care more wisely, meeting their ongoing health needs while also producing significant savings to the employer Plan.



Narus Health

YOUR LIFE. YOUR WAY.



INTEGRATED CARE MANAGEMENT

Narus Health, a Lucent Health company, delivers best-in-class care management and concierge care solutions to self-funded companies. Narus Health care management services create a better healthcare experience for employees while empowering employers to mitigate costs. Our technology platform pulls nightly data to more intelligently deliver compassionate care to members and their families, and a skilled care team supports employee members.

The value to members and their families includes enrollment of the most complex cases in clinical care management, but services may also be purchased to support your HR team with various other care needs, as outlined below.

Narus Health Care Management Services:

Precertification/UR/UM

- Serves as a check/balance for proper treatment protocol
- Helps to identify high-risk individuals prior to formal diagnosis
- Can give an indication of upcoming expense

Concierge Care Support

- Allows a single point of contact for all member healthcare issues and Plan related inquiries
- Engages high-risk members and triages to more appropriate care
- Improves the overall member experience during change of plan coverage
- Helps members navigate the complexities of VBP plans -- from finding accepting providers to pricing negotiations and balance bill resolution

Traditional Large Case Management

- Similar in scope to more familiar LCM solutions
- Works closely with stop-loss providers
- Improves member compliance and education
- Ensures good clinical practice standards

Complex Care Support

- Proprietary risk stratification analysis
- Engagement based on medical complexity
- Interdisciplinary team driven member experience
- 24/7 member access to designated care team



PLANS/SOLUTIONS

VBP Plans

- Lucent Health is the largest administrator of VBP plans in the U.S. with 160 VBP clients and almost 100,000 members
- Dedicated VBP account executives and support
- Integrated Care Management and 24/7 Concierge Member Support*
- Pricing established prior to services being rendered
- Collaborative relationship with providers
- 98%+ acceptance

**When Complex Care Management is selected and eligible members are enrolled.*

Level Funded Plans

- Average savings of 25% to 30% over fully insured plans
- No startup costs + no additional fees post termination
- Concierge care, complex care management
- Specialty drug carve-out
- Transplant carve-out
- Telehealth option
- Transparent reporting
- Secure stop-loss Contracts
- Employer keeps 100% of excess benefit dollars after contract period plus rebates

Traditional Plans

- Help employers work with national PPO plans
- Access to virtually every regional and local network
- Customized networks to meet specific needs of employee base
- Blue Cross Blue Shield of Arizona, Cigna, Anthem, Aetna

MEC Plans

- Designed for employers required by the ACA to offer health insurance coverage
- Employer can avoid the employer mandate penalties and offer an affordable health plan option
- 4 MEC plan options
- 24/7 telemedicine access
- Magellan Health Rx Management
- 48-hour claim processing
- Preventive & wellness updates
- Utilization tracking & reporting

Tribal Lands Plans

- Rich history of providing Medicare-like rate (MLR) services, tribal healthcare claims processing and managed care services
- Coordination with tribal sovereignty
- Best-fit solutions for tribal communities, delivering long-term cost reduction while improving quality of life for Native Americans
- Coordinate with Indian Health Service (IHS) and 638 facilities to maximize the availability of MLR for eligible tribal members
- Obtain IHS authorization, notify the provider and coordinate payment to provider at substantial additional MLR savings
- 340b pharmacy discounts

Captive Solutions

- Reduced year to year volatility of stop loss terms
- Reduced claims volatility
- Ability to share in profits of stop loss carrier
- Use of mature 12/18 contracts
- No new lasers upon renewal
- Peer to peer interaction

