

All Savers



## **All Savers Insurance**

*Small Business Health Insurance*

*Fully Insured Wellness Plans*



# For Your Small Business

## *Plans that don't break the bank*

The **No. 1 concern** for small-business owners is the cost of health care.<sup>1</sup> So All Savers Wellness plans were built with low premiums in mind, because we believe small businesses shouldn't have to pay outrageous amounts for health insurance.

We also think your company should **get more for your money**. Here's what we mean:

## *A different kind of insurance*

With many traditional plans, some employees feel like they don't get the full benefit of their coverage if they don't meet their deductible. In fact, we found that 60 percent of small-business employees spend less than \$1,500 a year on health care.<sup>2</sup> It's often for things like ear infections, broken bones or routine checkups. But since those employees don't meet their deductibles, they cover their medical costs out of their own pocket year after year. All Savers is different.

We designed All Savers Wellness plans to **reward your healthy employees** and help them pay for many of those everyday health care costs while paying the deductible. Here's how it works.

## *Incentives for employees*

Staying healthy is the best way to keep health care costs low. And motivating your employees to improve their health can help lower everyone's costs and improve their quality of life for years to come. So with All Savers Wellness plans, employees and their spouses can earn a wellness credit by passing the required health screening. Anyone who doesn't pass can enroll in a wellness program at no extra cost.

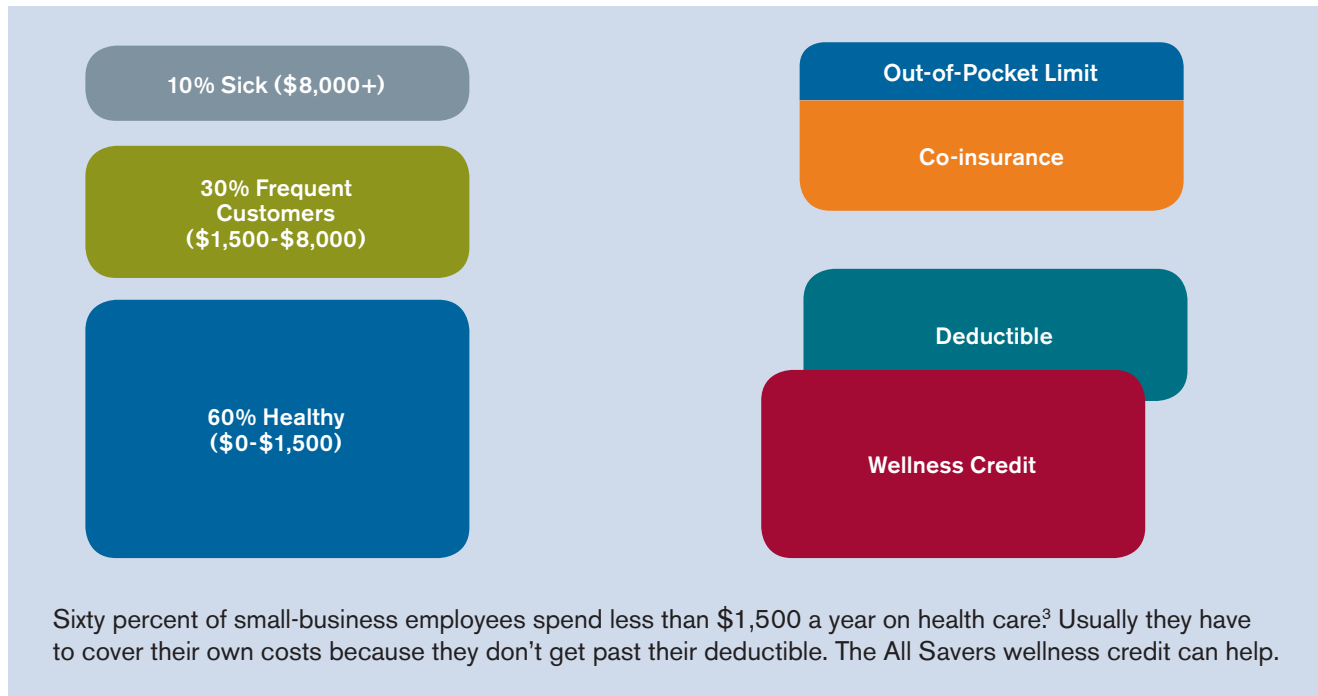
Read more about the wellness credit on the next page.

<sup>1</sup>National Foundation for Independent Business study, 2012

<sup>2</sup>Based on a national sample of UnitedHealthcare small-business claims data from March 1, 2010 to February 28, 2011

# The Wellness Credit

With All Savers Wellness plans, every employee and covered spouse can earn a wellness credit that can help cover expenses such as office visits, X-rays, lab work and diagnostic tests, and inpatient hospital stays for any covered family member (preventive exams are already covered at 100 percent). Even better, payments made by the wellness credit count toward the member's deductible.



The wellness credit can be from \$100 to \$1,000 depending on the plan. Any enrolled employees and covered spouses can earn a wellness credit if they pass the screening. Earned credits can be used for eligible expenses of any enrolled family members.

Once the wellness credit is used up, every member must meet the rest of their deductible before co-insurance begins to pay eligible claims.

<sup>3</sup>Based on a national sample of UnitedHealthcare small-business claims data for fully insured plans from March 1, 2010, to February 28, 2011

# A Measure of Good Health

## Plans that don't break the bank

To receive a wellness credit, each enrolled employee and covered spouse must meet at least three of these five targets:

- |                                    |  |
|------------------------------------|--|
| <b>1. Waist size</b>               | less than 40 inches for men; less than 35 inches for women |
| <b>2. Blood glucose</b>            | below 100 mg/dL  |
| <b>3. Blood pressure</b>           | below 130/85 mm Hg   |
| <b>4. Triglycerides</b>            | below 150 mg/dL  |
| <b>5. HDL ("good") cholesterol</b> | above 40 mg/dL for men; above 50 mg/dL for women           |

Members who don't meet three of these targets can enroll in the wellness program at no personal extra cost. The full wellness credit will be earned upon completion of the wellness program, which is administered by Streamlines™ Wellness. Members can learn more about it at [streamlineswellness.com](http://streamlineswellness.com).

If you are unable to participate in the wellness program, you might qualify for an opportunity to earn the wellness credit by a different means. We will work with you (and, if necessary, with your doctor) to find another way to earn the wellness credit. Contact us at [myallsaversinfo@UnitedHealthOne.com](mailto:myallsaversinfo@UnitedHealthOne.com) to learn more.

Enrolled employees and covered spouses will retest at the beginning of each calendar year to earn a wellness credit.

## Enrollment and Screening Timeline

### Step 1: Enrollment

- ▶ Choose plan designs and an effective date for the company's medical plan.
- ▶ Submit all the proper forms and medical histories (your broker can help with this).

### Step 2: Health Screening

- ▶ After your employees are enrolled and your medical plan is in effect, your company will schedule an on-site screening event (about four weeks out).
- ▶ Host your company's screening event and encourage your employees (and their covered spouses) to participate. Screenings must be completed within 120 days of the effective date.

### Step 3: Results

- ▶ Results will be made available to members within about a week.
- ▶ Wellness credits will apply retroactively to the first day of the plan year in which the credit was earned.
- ▶ Those who don't meet the waist-circumference target can enroll in the wellness program at a discounted cost.

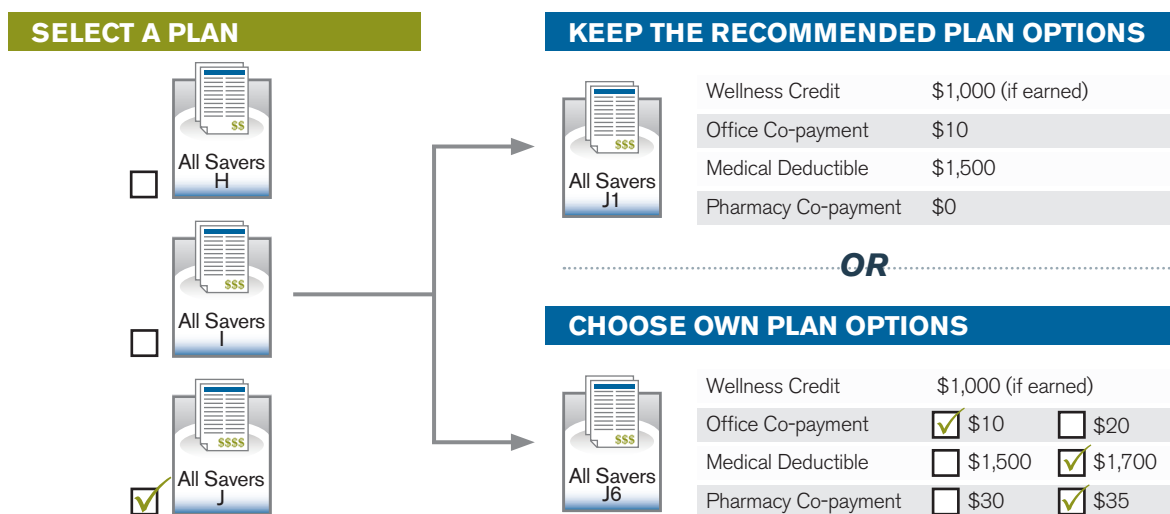
# Employees Get to Choose

*Designed with employees in mind – because everyone needs to balance budgets*

Each employee has different needs. So with All Savers, it's easy for employees to choose the co-payment and deductible options that are right for them.

Do employees want lower co-payments, a lower deductible, or a lower pharmacy co-payment? No problem – it's their choice. With All Savers, your employees can keep your recommended options, or they can choose their own options. And it won't affect your company's premium. Not a single dime.

It only takes a minute or two for employees to choose their own co-payment and deductible options on the All Savers website.



With All Savers, your employees can keep the recommended plan or choose the plan they like best – at no extra cost.

## Prescription drugs, minus the headaches

Our pharmacy benefit has low deductibles (as low as zero dollars). And once covered members meet the pharmacy deductible, they'll only cover the co-payments for the rest of the calendar year. All Savers picks up the rest of any eligible costs.

Every All Savers plan has a **\$10 co-payment** for Tier 1 drugs, which includes many generics. The co-payments for the other tiers depend on the plan options your employees choose.

# Illustration of Costs and Payments

## Example 1<sup>4</sup>

Sara chose a plan with a higher co-payment, deductible and pharmacy benefit. But she passed her health screening and earned a wellness credit. So after the co-payments, her wellness credit covered the rest of the costs for her office visits – and it counted toward her deductible. Her total out-of-pocket cost for the year was \$60.

Medical	Cost	Co-payment	Credit (\$1,000 total)	Deductible (\$1,700 total)
Annual checkup (preventive)	\$200 =	–	–	–
Exam and biopsy of skin lesion	\$500 =	\$20	\$480	\$480
Removal of skin lesion	\$150 =	\$20	\$130	\$130
<b>Totals</b>	<b>\$850 =</b>	<b>\$40</b>	<b>\$610</b>	<b>\$610*</b>

\*Wellness credit applies to deductible

Pharmacy	Cost	Deductible (\$0 total)	Co-payment
Tier 1 prescription	\$10 =	–	\$10
Tier 1 prescription	\$10 =	–	\$10
<b>Totals</b>	<b>\$10 =</b>	<b>\$0</b>	<b>\$20</b>

## Example 2<sup>4</sup>

Now consider if Sara hadn't passed the health screening. With the same plan options and the same medical claims, but no wellness credit, she would have paid \$670 out-of-pocket.

Medical	Cost	Co-payment	Credit (\$0 total)	Deductible (\$1,700 total)
Annual checkup (preventive)	\$200 =	–	–	–
Exam and biopsy of skin lesion	\$500 =	\$20	–	\$480
Removal of skin lesion	\$150 =	\$20	–	\$130
<b>Totals</b>	<b>\$850 =</b>	<b>\$40</b>	<b>\$0</b>	<b>\$610*</b>

\*Wellness credit applies to deductible

Pharmacy	Cost	Deductible (\$0 total)	Co-payment
Tier 1 prescription	\$10 =	–	\$10
Tier 1 prescription	\$10 =	–	\$10
<b>Totals</b>	<b>\$10 =</b>	<b>\$0</b>	<b>\$20</b>

<sup>4</sup>These examples are for network services and are for illustration purposes only. They do not represent real persons or events.

# A Wide Array of Benefits

This table outlines how different kinds of eligible services are reimbursed. The options your employees choose will determine their actual co-payments, deductibles and co-insurance amounts.

Services	Network				Non-Network			
	Co-payment	Wellness Credit	Deductible	Co-insurance	Co-payment	Wellness Credit	Deductible	Co-insurance
<b>Preventive</b> ▶ Wellness Visits ▶ Immunizations ▶ Routine Screenings	N/A	N/A	N/A	100%	N/A	Wellness credit applies to non-network claims	2x the network deductible	Same as network rate
<b>Co-payment Level 1</b> ▶ Physician Office Visit ▶ Urgent Care Visit ▶ Minor Lab Work ▶ Inpatient Physician Visit ▶ Chiropractic	\$10 to \$50	\$100 to \$1,000	\$1,500 to \$4,500 (Individual) \$3,000 to \$9,000 (Family)	50% to 90% (plan pays)				
<b>Co-payment Level 2</b> ▶ ER Visit*	\$75 to \$250							
<b>Co-payment Level 3</b> ▶ Outpatient Facility ▶ Ambulance (Air/Ground) ▶ Major Diagnostic Testing (CT Scan, MRI, etc.) ▶ Inpatient Stay ▶ Inpatient Services	\$150 to \$600							
<b>No Medical Co-payment or Wellness Credit</b> ▶ Transplant ▶ Skilled Nursing ▶ Home Health Care ▶ Rehab ▶ Prosthetics ▶ Durable Medical Equipment	N/A	N/A						
<b>Prescription Drugs</b> ▶ Retail Pharmacy (30-Day) ▶ Mail-Order (90-Day)	\$10 <sup>5</sup>	N/A	\$0 to \$500	100%				

\* If an ER patient is admitted into the hospital, it is counted as inpatient or outpatient services under the No Co-payment section.

<sup>5</sup> This is for Tier 1 co-payments. Separate co-payments apply for Tiers 2, 3 and 4. (Tier 2 range: \$30–\$75. Tier 3 range: \$50–\$120. Tier 4 range: plan pays 75%-50% co-insurance.) To see a list of the prescription drugs included in each tier of our prescription drug list, visit [www.myallsavers.com](http://www.myallsavers.com).

## Pediatric Dental and Vision Coverage

Child Dental Coverage	Child Dental Co-insurance Rates	Child Vision Coverage	Child Vision Co-payments
Applies to medical deductible Separate co-insurance (same for network and non-network services)	<ul style="list-style-type: none"> <li>Preventive – 100%</li> <li>Minor Restorative – 80%</li> <li>Major Restorative – 50%</li> <li>Orthodontic Services – 50%</li> </ul>	Separate co-payments depending on the service. Out-of-network coverage is subject to the medical deductible and then the co-insurance rate.	Exam – \$10 Lenses – \$25 Contact Lenses – \$25 Frames: schedule based on price of frame

# All Savers Insurance

The smart choice – for you, for your employees, for better health.



Insurance coverage is provided by or through All Savers Insurance Company, a UnitedHealthcare company. Administrative services may be provided by United HealthCare Services, Inc. and its affiliates for insurance products underwritten by All Savers Insurance Company.

42347-S-0214

©2014 United HealthCare Services, Inc.  
UHCEW684131-000