

Benefits Guru™

Making informed benefit enrollment decisions is as easy as 1, 2, 3! Employees provide **3 simple informational pieces:**

1. **Indicate** who will be covered.
2. **Assign** a health grade for each covered member.
3. **Provide** their tobacco status.

And Users receive a personalized enrollment recommendations based on data analytics and machine learning technology that helps to ensure they feel confident in their plan decisions.



Benefits Guru™ gives employees a more customized enrollment experience. No need to settle for a one size fits all approach to something as personal as benefits.

Why Do You Need The Benefits Guru™?

Benefits can be confusing. There are seemingly endless options, insurance terminology is like a foreign language and reading a plan document doesn't always provide a clear picture of what is being offered. Enrolling in benefits can be a daunting task that often leaves employees with more questions than answers. It is no surprise that **9 out of 10 employees don't change** their enrollment elections each year. They simply don't know where to start when trying to figure out what choices are best for them.

How Do We Fix The Problem?

Benefits Guru™ simplifies the decision making process for the employee. Employees rate their health score on a scale we outline in detail and whether or not they are a tobacco user and based on the answers provided, Benefits Guru™ provides **Personalized Plan Recommendations** based on the needs of the employee and his or her family. No one gets the same Google search results, has the same Facebook feed or product offerings from Amazon, and now employees no longer have to settle for a one size fits all approach to their benefits.

At the end of the day it's about providing clearer direction for employees to help them achieve **Better Results.**

The screenshot displays the Benefits Guru™ interface with three numbered callouts: 1. Selecting family members (Veronica James, John James, test CH42, test CH41) and their health status (Excellent, Moderate, POOR). 2. Reviewing plan options (High Deductible Health Plan, PPO Plan, EPO Plan) with details on deductibles, copays, co-insurance, and out-of-pocket limits. 3. Viewing estimated annual usage for covered family members, including doctor visits, prescriptions, lab & equipment, hospital out-patient, and hospital in-patient days.

Category	High Deductible Health Plan	PPO Plan	EPO Plan
Deductible (Individual/Family)	\$2000 / \$4000	\$750 / \$2250	\$0 / \$0
Copay	-	\$20	\$20
Co-insurance	-	20%	-
Max Out-of-Pocket (Individual/Family)	\$2000 / \$4000	\$3000 / \$6000	\$3000 / \$6000
PA Copay	\$10	\$10	\$10
Premium (Employee + Children)	\$10.56 / \$176.76	\$7.85 / \$146.00	\$9.21 / \$166.12
Est. Out-of-Pocket	\$3611.51	\$2400.40	\$610.00
Health Total	\$3622.07	\$2408.25	\$619.12
Benefits Enhancer Bundle*	High	High	High
Hospital	High	High	Low
Savings Account	FSA	FSA	FSA
Health Contribution	0	0	0

