

HealthFlex Operational Updates

HealthFlex Mini-Summit March 11, 2015



Agenda

- Catamaran Update
- Businessolver Update
- WageWorks Update
- OneExchange (formerly Extend Health)—Timeline
- Medical Carriers—BCBSIL/UHC*

* BCBSIL: Blue Cross and Blue Shield of Illinois

UHC: UnitedHealthcare



Oasis

Approaching





Catamaran Transition

Short-Term

Long-Term

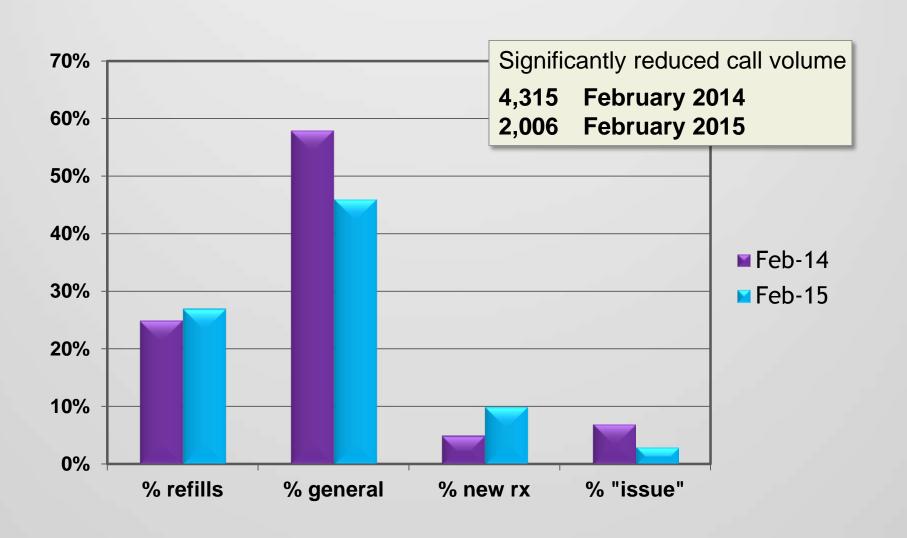
Catamaran Continued Focus on Customer Experience

Home Delivery Turnaround Time (TAT)



Catamaran

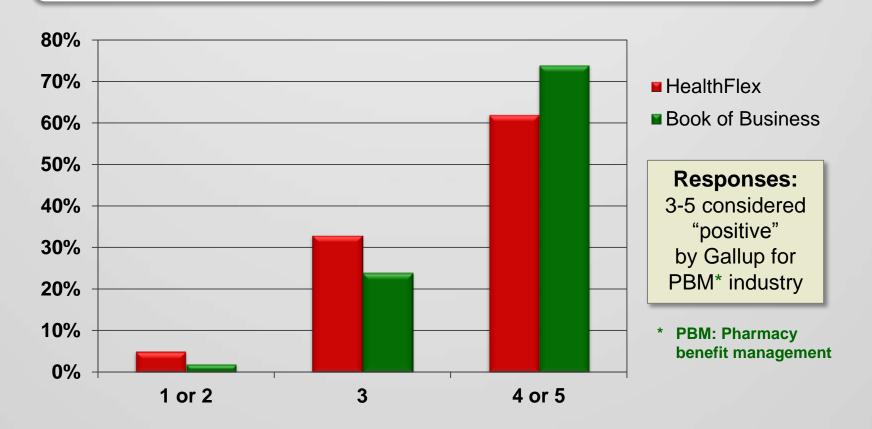
Customer Service Progress—Past 12 Months



Catamaran

Continued Focus on Customer Experience

Satisfaction Survey (500 surveys, 188 responses) "Overall satisfaction with Catamaran?"



Catamaran Upcoming Improvements



Introducing

Patient Advocate Team

model escalation process

for frequent callers

Phase 1 to begin late March

- First call resolution reporting
 - Expected in early Q2
- Additional opportunities to survey participants beyond annual outreach to limited sample
 - Q4 or early 2016

Catamaran Upcoming Improvements



Continued website enhancements

- Pricing at checkout
- Website refresh

Catamaran Prior Authorizations

- Industry standard mechanism for patient safety and plan stewardship
- Typically require review every 12 months
- Transition from Express Scripts
 - Grandfathering (now expired)
 - Express Scripts less rigorous
- Collaboration with Catamaran leadership for prior authorization process improvement

Businessolver Updates and Ongoing Improvements

- Plan sponsor invoice enhancements
- Notification around automated additions and terminations (with impact to invoice)
- Participant "self-service" considerations
 - Allow participants to add/remove dependents to coverage during Annual Election (dependent in Benefits Access Portal)
 - Allow participants to make changes for some qualified life status events (dependent in Benefits Access Portal)
 - Include with HealthFlex Exchange; considering for all
- Reporting enhancements—frequently requested reports and monthly tier (pricing) changes

OneExchange—Timeline Reminder

Timeline for transitioning to OneExchange effective January 1, 2016

Plan sponsor requests/data submission/financial modeling	Q1/Q2
Plan decision	Q2 (April 15)
Eligibility file submission	Q2 (May 31)
Participant outreach from OneExchange	August
Enrollment begins	October

Wage Works—2014 Review

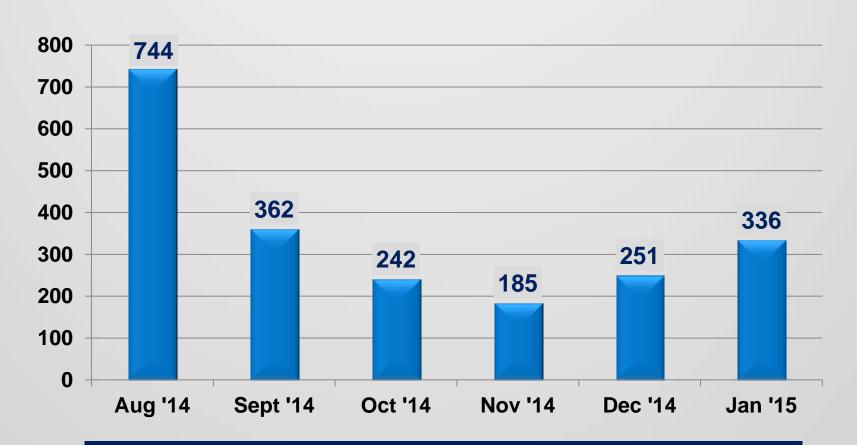


- FSA/HRA* card
 - Auto-adjudication rate: 99.52%
- Total card transactions
 - FSA 7,714 (\$551,997)
- Average card transactions
 - FSA \$75.92
 - HRA \$92.20

* FSA: Flexible spending account;

HRA: health reimbursement account

Wage Works—Call Volume



Ongoing call volume (~5%) consistent with WageWorks book of business

BCBS-Anthem Breach

- Anthem membership impact
 - Over 78 million members nationwide
 - Different levels of data breach (SSN* vs. no SSN)
 - 3,700 HealthFlex participants, 9 with SSN breach
- Anthem outreach
 - Letters and resources to participants
 - Continuing over the next month
- General Board outreach
 - Notification for plan sponsors

^{*} SSN: Social Security number

Certificates of Creditable Coverage

- No longer required due to Affordable Care Act
- BCBSIL approach
 - Continue sending to participants upon loss of coverage
- UHC approach
 - No longer sending to participants upon loss of coverage
- General Board approach
 - Will provide upon participant request

