



Innovative, Flexible Health Plan and Provider Network Solutions

Presented by:
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Who we are

A health care enablement company recapitalized in 2013.
Investment led by Goldman Sachs and Pamplona Capital Management.

MAGNACARESM

- Proprietary PPO network – health & casualty
- 220,000+ provider locations
- Tiered product offering
- 30 years in business

BRIGHTON
healthplan
SOLUTIONS

- Full TPA capabilities
- Cloud-based technology platform
- Provider contracting
- \$7B of medical expenses
- 1.1M members

create[®]

- Network of integrated delivery systems
- 10+ health systems contracted
- Launched Q1 2017

Who we are



Experience

30+ years

\$7 billion
in health care
expenses annually

10.1M claims
processed and over
600,000 calls
fielded annually

1.1 million members



Company

**100% focus on self-funded plans –
Casualty, Health , Rx,
& Vision**

**Licensed Third Party
Administrator**

**Providing services to
members in all 50
states**

**\$30M investment in
technology**



Customers

**Commercial, Labor,
and Public Sector
employers**

**Provider health
systems**

Other TPAs

95% retention rate

**Strong membership
base and growing**



Services

**Highly scalable,
customizable technology**

Full suite of TPA services

**URAC-accredited
Medical Management
services**

**Access to proprietary
networks – Casualty &
Health**



Recognition



Forbes



CRAIN'S

We Are Not

- ✗ A traditional health plan
- ✗ Network of providers and hospitals **offering fragmented care**
- ✗ **Large carrier contractor** driven by fully insured business
- ✗ **Afraid to disrupt** the status quo

We Are

- ✓ A **health care enablement company** supporting self-funded groups in building health care solutions
- ✓ Network partners of **high-quality integrated delivery systems**
- ✓ **Technology-led platform** that supports consumer enrollment, transparency, and health care navigation
- ✓ **Promoters of competition among health systems** based on cost and quality
- ✓ **Flexible partner** with strong “plug and play” architecture

We are different

Everything we do is designed to
**help you deliver high-quality,
affordable health care**

We offer traditional services...

...But we offer them in a different way

Broad Local & National Networks

- Competitive discounts
- Value-based incentives
- Custom networks & tiering
- Referenced-based pricing
- Flexible reimbursement options
- Direct-To-Provider Contracting

Administration & Services

99%+
claim accuracy

- **Benefits your way** – complete flexibility to administer unique benefits
- Ability to **fully integrate** with your vendor partners
- Integrated **workers' compensation**
- Technology to support **member consumerism**

Outcomes-focused Medical Management Programs

Achieve ROI
as high as
24:1

- Total cost of care management
- Delivered by local, in-house team of clinicians
- Redirect care to high quality, low cost providers
- Pay for only the services needed

Offering a full suite of Network Access, TPA and Medical Management services

Network Access

- Extensive network of providers and hospitals in NY, NJ, & CT
- Nationwide network for out-of-area coverage
- Narrow networks based on health systems
- Claims repricing
- Competitive discounts
- Full, seamless integration with TPAs

TPA/Administrative Services

Plan Management

- Plan design & compliance
- Plan administration
- Plan communications
- Vendor integration & file exchange
- Trustee board management

Claims Adjudication & Processing

- Claims administration/repricing
- Claims review
- Subrogation/COB
- Flexible out-of-network fee schedules
- Fixed fee/shared savings for out-of-network

Enrollment & Financial Services

- Eligibility management
- Enrollment services
- Optional enrollment platform
- Contribution accounting
- Premium collection from members

Customer Support

- Account Management
- Customer Service/Concierge service
- Provider service center
- Member navigation
- Portals & mobile app
- Online and mobile provider directory

Medical Management

- Utilization Management
- Case Management
- Redirection services
- Population health and wellness programs
- Cost containment services
- Transition of care
- Opioid oversight
- Behavioral Health

We are a health care enablement company

Direct to Market Products

- **MagnaCare & Create®** proprietary networks
- Full TPA services
- Member, employer & provider portals

Self-administered Fund support

- Network lease access
- Claim repricing
- Employer portal access
- Self-service reporting
- Member & provider services
- Utilization Management, Care Management, Case Management
- ID cards
- Marketing & member communications

White Labeled Services for other TPAs

- Network lease access
- Technology suite
- Medical Management
- ID cards

Carrier & Health System Integration

- Custom network build & access
- Full TPA services
- Technology suite
- Integrated Medical Management
- Utilization Management & Prior Authorization services
- Stop Loss
- Reporting packages

Only MagnaCare offers integrated workers' compensation services

Integrating workers' compensation and Employee Benefits offers additional savings and streamlined administration

Broad Workers' Compensation PPO

- High quality PPO specialist network in NY and NJ

31%
Average
network savings

Dedicated Care Coordinators

- Schedule member visits
- Integrate with UR, CM, and Return to Work programs

Increased
member
satisfaction

Opioid Management

- Guide members through alternative pain management treatment and weaning process

94%
reduction in
the number of
days using
opioids

Alternative Dispute Resolution (ADR) Services (NY)

- A member advocacy focused dispute process
- Decreased insurance premium

99%
of claims
resolved without
mediation/
arbitration



MAGNACARESM & create[®] Networks

Evergreen contracts with providers

Flexibility to offer MagnaCare, *Create*, or both options

National networks available for out-of-area coverage

MagnaCare Networks

- **Open access PPO network**
- Providers in all specialties, with network adequacy
- **220,000+ provider locations, 200+ hospitals** from many leading health systems in NY/NJ/CT

Create[®] Networks

- **Narrow network built around discrete health systems**
- Providers in all specialties, with network adequacy
- All providers belong to the **selected system**
- Providers in the same network **share patient information, for better-coordinated care**
- Concierge customer service
- Advanced technology platform

Improving outcomes through Integrated Health Systems

create[®]

create[®] Flex

- Most flexible *Create* option
- Narrow network that includes **several** health systems
- Members decide where they want to go at **point of service**

create[®] Health System

- Promotes provider competition on cost and quality
- Access to an **individual** health system
- Members select a system at **point of enrollment**

High quality systems include:



Multi-year strategy towards risk based contracts

**Total Cost of Care:
10-24% savings PEPM**

Total Cost of Care Savings

- Best-in-market pricing
- Lower total cost in exchange for increased market share
- Developing/strengthening integrated delivery systems

Benchmarks Established

- Quality scorecard established
- Targets tied to pay for performance
- Transitioning care management to capable health systems

Risk-based Contracts

- Value-based incentives paid based on quality and cost of care
- Shared risk contracts (upside/downside)



Provider contracting opportunities

Extensive experience in provider contracting

- Ability to negotiate with any health system to build custom provider networks
- Plan design guides members to preferred providers
- Innovative contracts
- High-quality, outcomes-focused care
- Market-leading rates and discounts

Bundled pricing solutions that include navigation to the best doctors

Flexible wrap networks

SYSTEM-FOCUSED PRODUCTS



Other Prominent Health
Systems throughout the U.S.

CENTER OF EXCELLENCE FOR TOTAL JOINT REPLACEMENT



Providing coverage beyond *Create*® service area

Access to high-quality
providers throughout
the country

**Same health plan
covers the entire group**

Making it easier to manage and administer



Create networks
are available in
NY, NJ and CT



**Multiple wrap
network partners**
cover members in
other regions

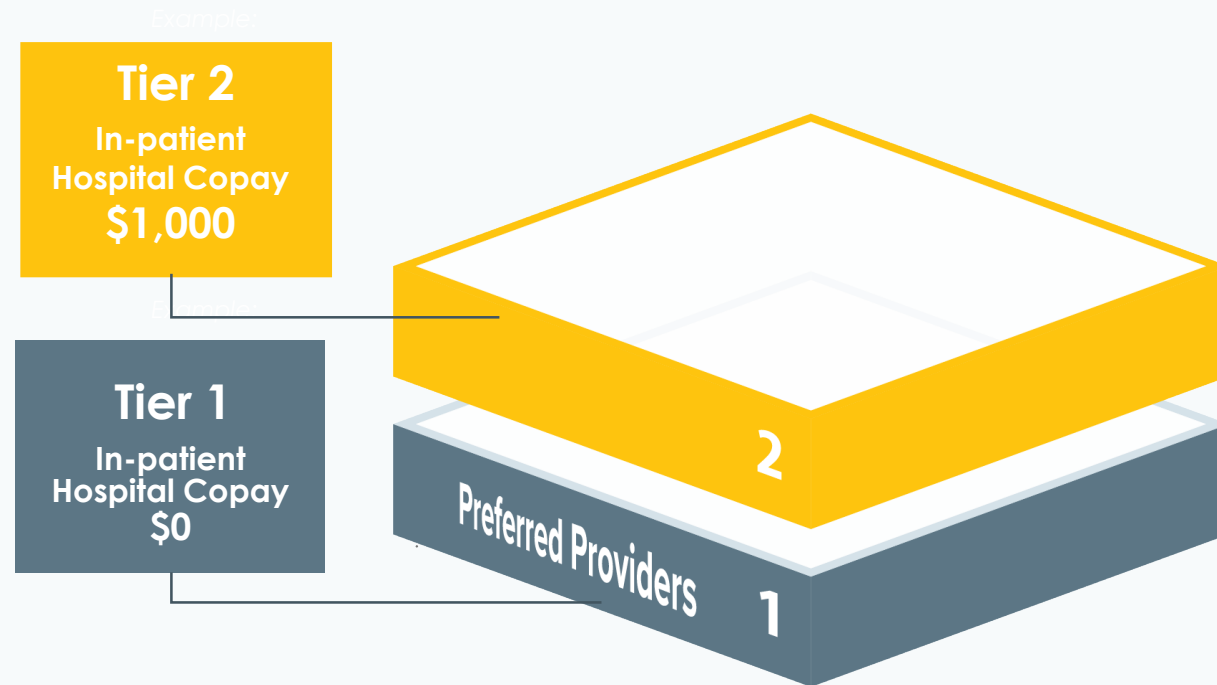
Tiered PPO benefit design drives members to high-value providers

- ✓ Member access to full PPO network
- ✓ Plan design encourages members to use lower cost Tier 1 providers
- ✓ Members can access Tier 2 providers but they will pay more out of pocket
- ✓ Savings of 5–20% depending on geography, utilization, and plan design

MAGNACARESM
Open Access

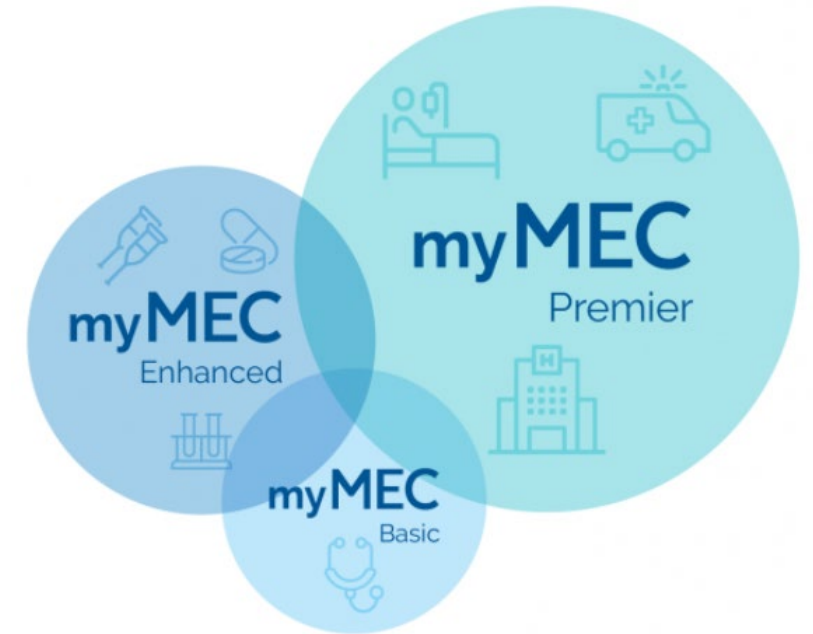
200+
hospitals

220,000+
provider locations



Affordable Minimum Essential Coverage (MEC) plans

Plans eliminate the individual penalty and satisfy the ACA Minimum Essential Coverage requirement



- Very affordable health plans
- Cover all preventive tests and screenings, some Rx
- **MyMEC Enhanced** adds services such as “sick” doctor visits, urgent care, lab work, x-rays
- **MyMEC Premier** can include ER and inpatient/outpatient services
- Optionally add vision, telemedicine, comprehensive Rx to any MyMEC plan

Medical Management programs deliver improved outcomes and savings

Our Medical Management programs have helped clients achieve ROI of 24:1

Utilization Management

- Prior authorization
- Determine medical necessity, length of stay, and appropriateness of care

1:1 Nurse Case Management

- 1:1 nurse support for the most at-risk members
- Savings up to 25% vs. members not enrolled in CM
- Up to 40% reduction in ER utilization; 48% fewer ER visits

Site-of-Service Redirection

- Guides members to lower cost sites for high-tech radiology tests, specialty infusions, and endoscopy procedures
- Extensive savings potential (e.g., \$900 for high-tech radiology)

Pain & Opioid Management

- Nurse support for persistent opioid users and new acute users
- Opioids used for less than 6 months:
 - Pre-Pilot Average: 65%
 - Pilot Results: 100%

Population Health

- Integrated pharmacy, lab, medical claims, and biometric can reduce specific gaps in care or safety alerts for members and their providers, when appropriate

Payment Integrity

- High-quality clinical claims review validate claims and identify opportunities to recode claims for cost savings

Around-the-clock access to innovative technology

Enhances the experience for benefits administrators and members

Developed with a \$30M investment by Goldman Sachs

Administrator portal empowers staff to manage enrollment status and service in real-time

- View and manage enrollment status individually or at group level
- Send health and benefits messages to members using pre-built email templates
- Review claims
- Access performance dashboards
- Manage updates
- Send messages to members
- Standard and customizable messaging
- And much more

Mobile app

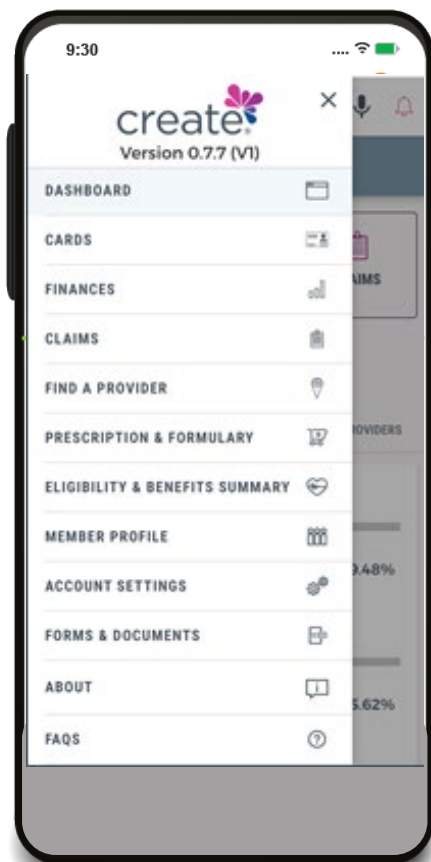
- Anytime, anywhere access to the same health plan information that's available on the online portal

Intuitive member portal gives members 24/7 to all benefits plans

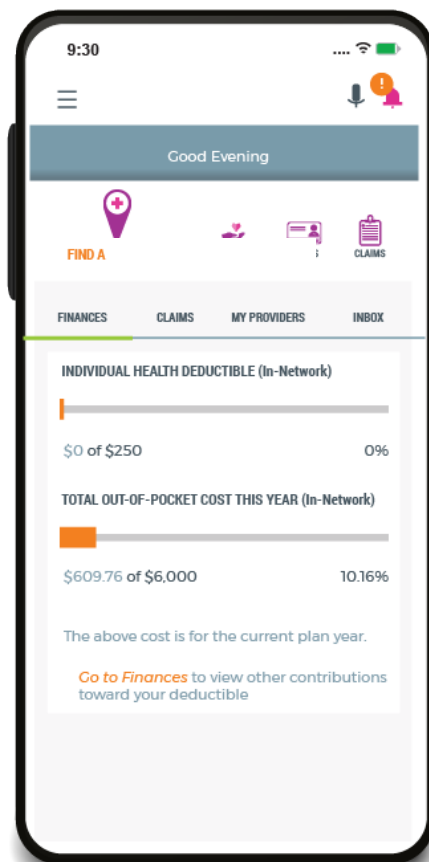
- Easy enrollment
- Display, print and email digital ID cards
- View finances
- See claims history
- Find providers
- Easy-to-understand EOBs
- Live chat, email, and callback options
- Request appointment bookings
- If provided, we can add other carriers' plan summaries to the portal



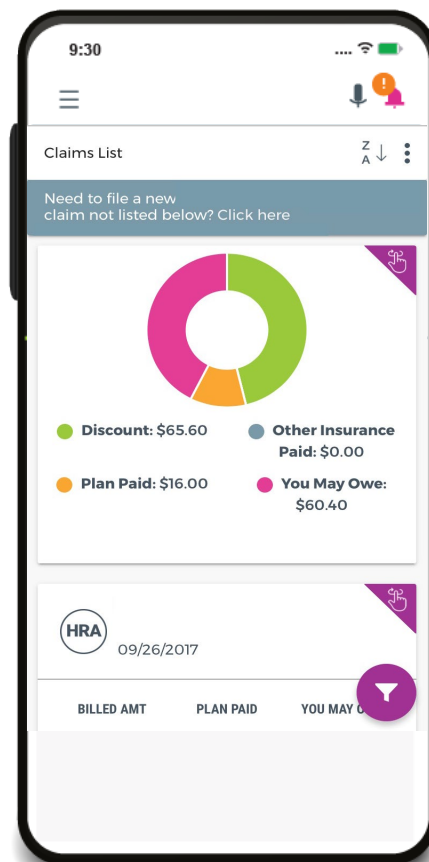
Health care at your fingertips



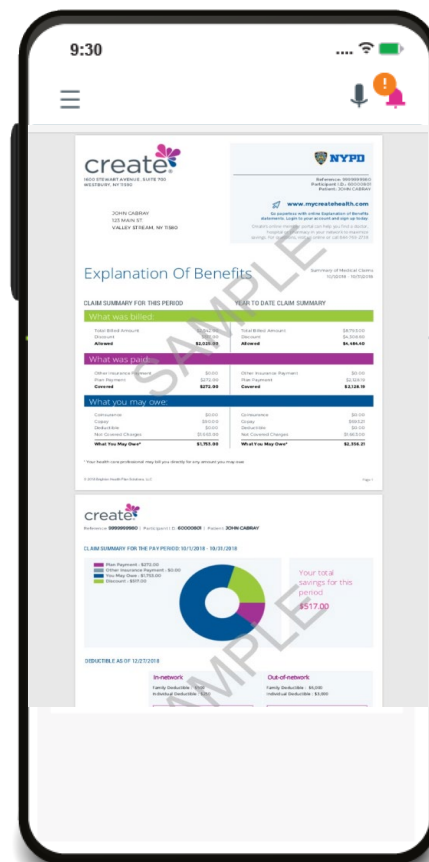
Self-service



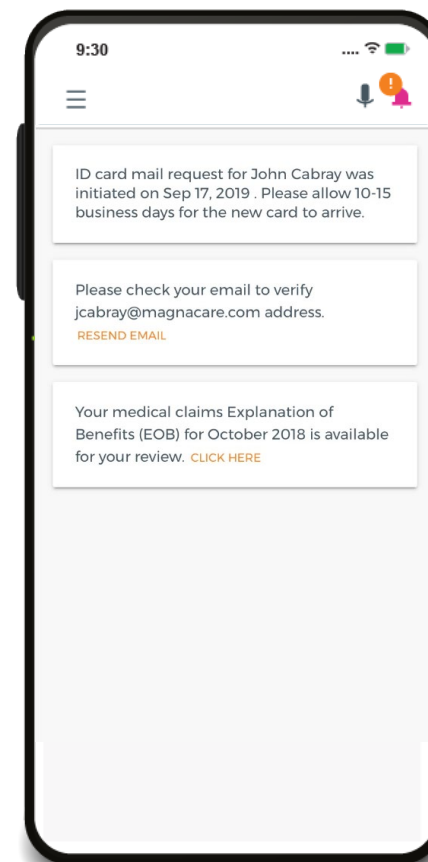
Provider search



Finances



EOB

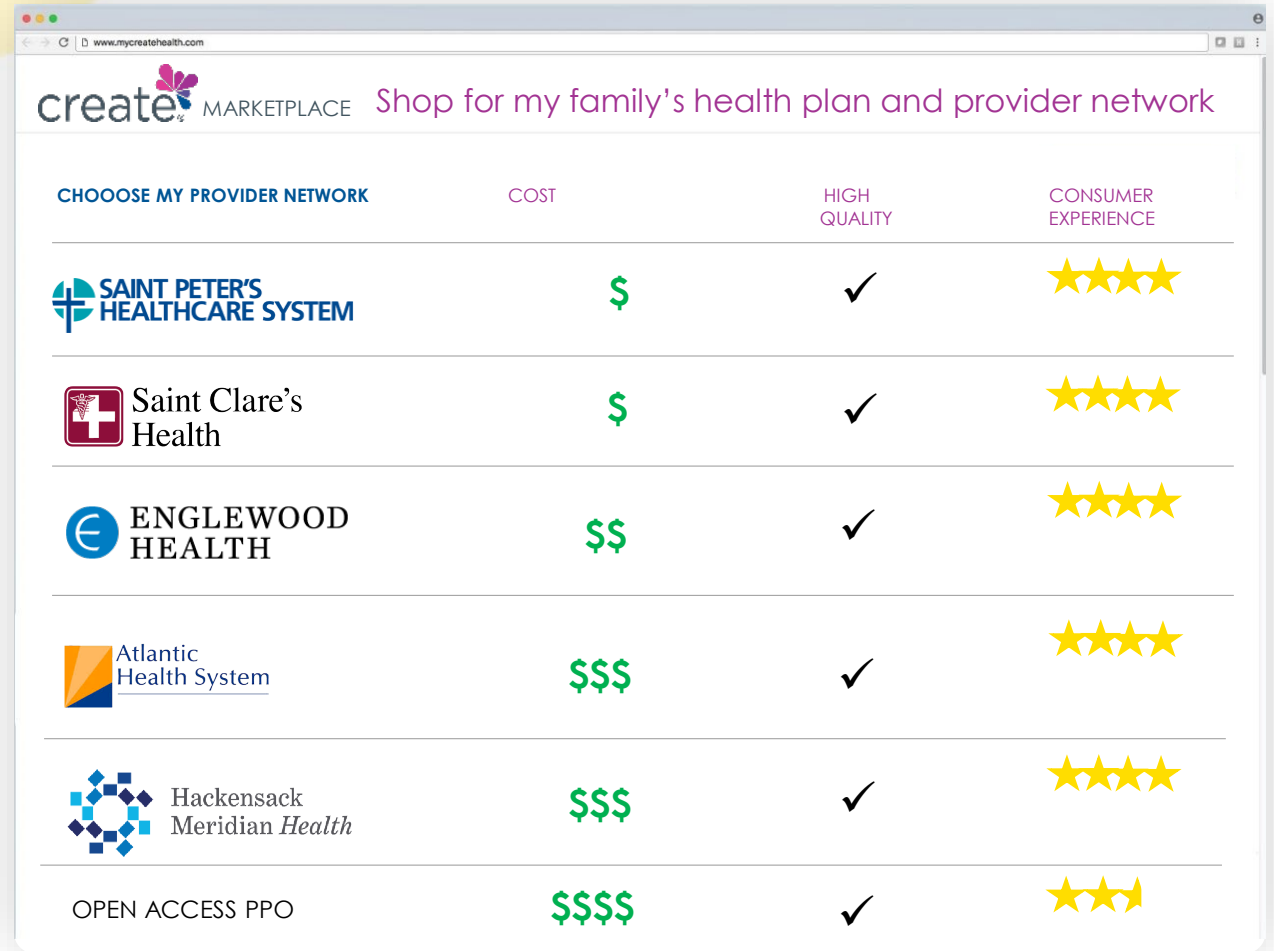


Communication






Intuitive enrollment platform

- Intuitive and easy to use
- Integrates with other systems and vendors
- Customized to your needs
- Quickly compare network options and coverage area
- Leads the member through enrollment, step-by-step

Integrated Delivery Networks in NJ



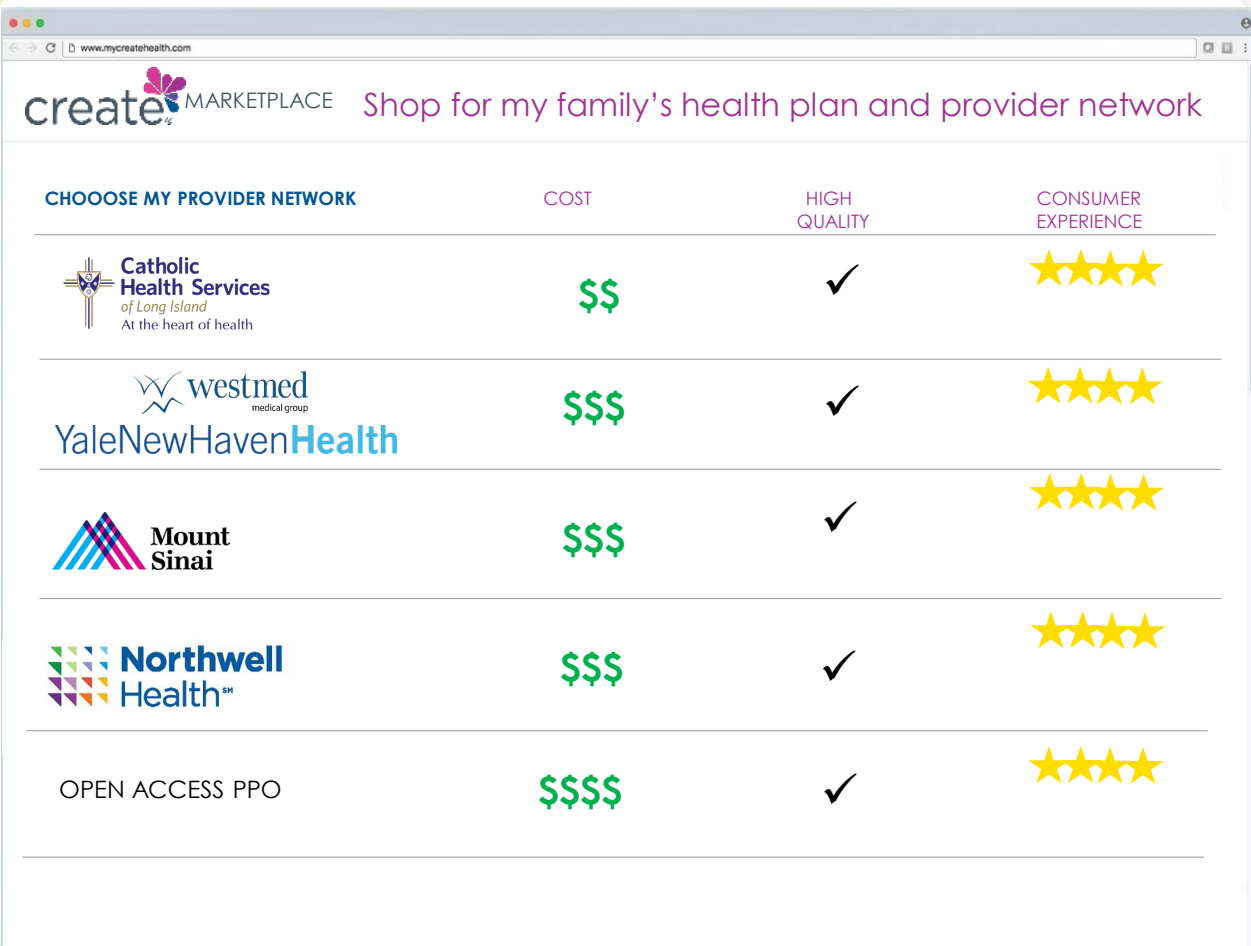
The screenshot shows a web browser window with the URL www.mycreatehealth.com. The page header includes the 'create' logo and the text 'MARKETPLACE Shop for my family's health plan and provider network'. Below the header is a table titled 'CHOOSE MY PROVIDER NETWORK' with columns for 'COST', 'HIGH QUALITY', and 'CONSUMER EXPERIENCE'. The table lists five provider networks: Saint Peter's Healthcare System, Saint Clare's Health, Englewood Health, Atlantic Health System, and Hackensack Meridian Health. Each row includes a logo, the provider name, a cost rating (from \$ to \$\$\$\$), a quality checkmark, and a consumer experience rating (from 3 to 5 stars). An 'OPEN ACCESS PPO' option is listed at the bottom with a cost rating of \$\$\$\$ and a 3-star rating.

CHOOSE MY PROVIDER NETWORK	COST	HIGH QUALITY	CONSUMER EXPERIENCE
 SAINT PETER'S HEALTHCARE SYSTEM	\$	✓	★★★★★
 Saint Clare's Health	\$	✓	★★★★★
 ENGLEWOOD HEALTH	\$\$	✓	★★★★★
 Atlantic Health System	\$\$\$	✓	★★★★★
 Hackensack Meridian Health	\$\$\$	✓	★★★★★
OPEN ACCESS PPO	\$\$\$\$	✓	★★★





Intuitive enrollment platform

- Intuitive and easy to use
- Integrates with other systems and vendors
- Customized to your needs
- Quickly compare network options and coverage area
- Leads the member through enrollment, step-by-step

Integrated Delivery Networks in NY



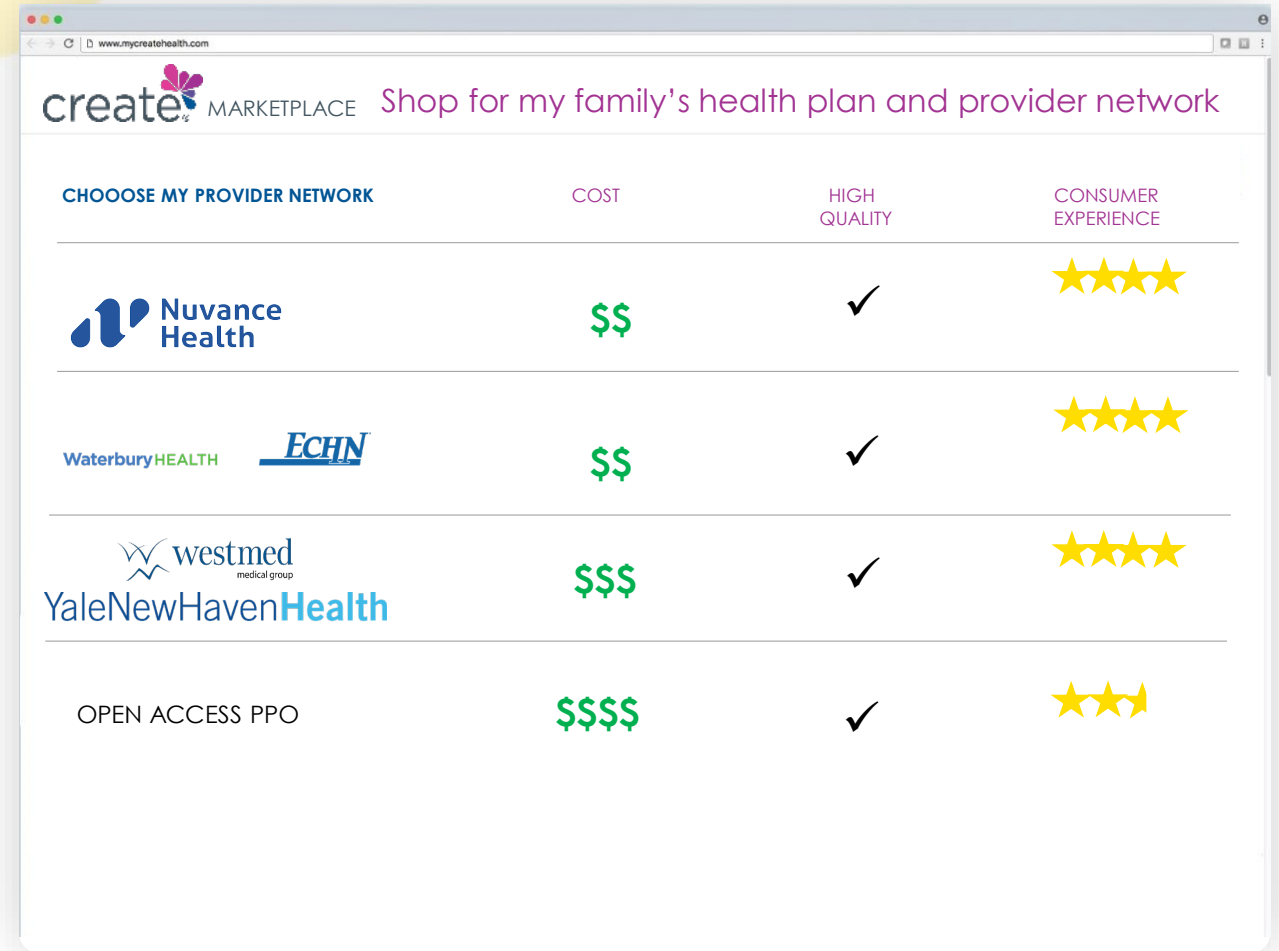
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CHOOSE MY PROVIDER NETWORK	COST	HIGH QUALITY	CONSUMER EXPERIENCE
 Catholic Health Services of Long Island At the heart of health	\$\$	✓	★★★★★
 YaleNewHavenHealth	\$\$\$	✓	★★★★★
 Mount Sinai	\$\$\$	✓	★★★★★
 Northwell Health SM	\$\$\$	✓	★★★★★
OPEN ACCESS PPO	\$\$\$\$	✓	★★★★★





Integrated Delivery Networks in CT

Intuitive enrollment platform

- Intuitive and easy to use
- Integrates with other systems and vendors
- Customized to your needs
- Quickly compare network options and coverage area
- Leads the member through enrollment, step-by-step



The screenshot shows a web browser window with the URL www.mycratehealth.com. The page header includes the 'create' logo and the text 'MARKETPLACE Shop for my family's health plan and provider network'. Below the header is a table titled 'CHOOSE MY PROVIDER NETWORK' with four columns: 'CHOOSE MY PROVIDER NETWORK', 'COST', 'HIGH QUALITY', and 'CONSUMER EXPERIENCE'. The table lists four options: Nuvance Health, Waterbury HEALTH ECHN, westmed medical group YaleNewHavenHealth, and OPEN ACCESS PPO. Each option is evaluated on cost (represented by dollar signs), high quality (represented by a checkmark), and consumer experience (represented by stars).

CHOOSE MY PROVIDER NETWORK	COST	HIGH QUALITY	CONSUMER EXPERIENCE
 Nuvance Health	\$\$	✓	★★★★★
 Waterbury HEALTH 	\$\$	✓	★★★★★
 westmed medical group YaleNewHavenHealth	\$\$\$	✓	★★★★★
OPEN ACCESS PPO	\$\$\$\$	✓	★★★

Flexible funding options

We will work with the client to determine optimal funding levels

The number of lives enrolled in MyMEC plans counts toward the number of lives required for level-funding and stop loss

Self-funded/ASO (Administrative Services Only)

- Pay only for employee claims and not a monthly premium that goes up every year
- Exempt from state and premium taxes
- Full transparency
- Lower admin fees

Level Funded

- Pay a fixed monthly amount per employee
- Receive a refund if claims experience is lower than maximum liability

Stop Loss

- Protects against high-dollar claims
- We will obtain Stop Loss quotes on client's behalf



The Brighton Advantage

Customizable Solutions

Flexibility is our strength; administering custom benefits and seamless integration with client vendor partners

Cost Savings

Competitive network discounts, integrated medical management programs, and strategic network solutions that reduce costs and improve plan performance

Experienced Account Management

Designated, responsive, and experienced account management team that goes above and beyond

A Focus on the Future

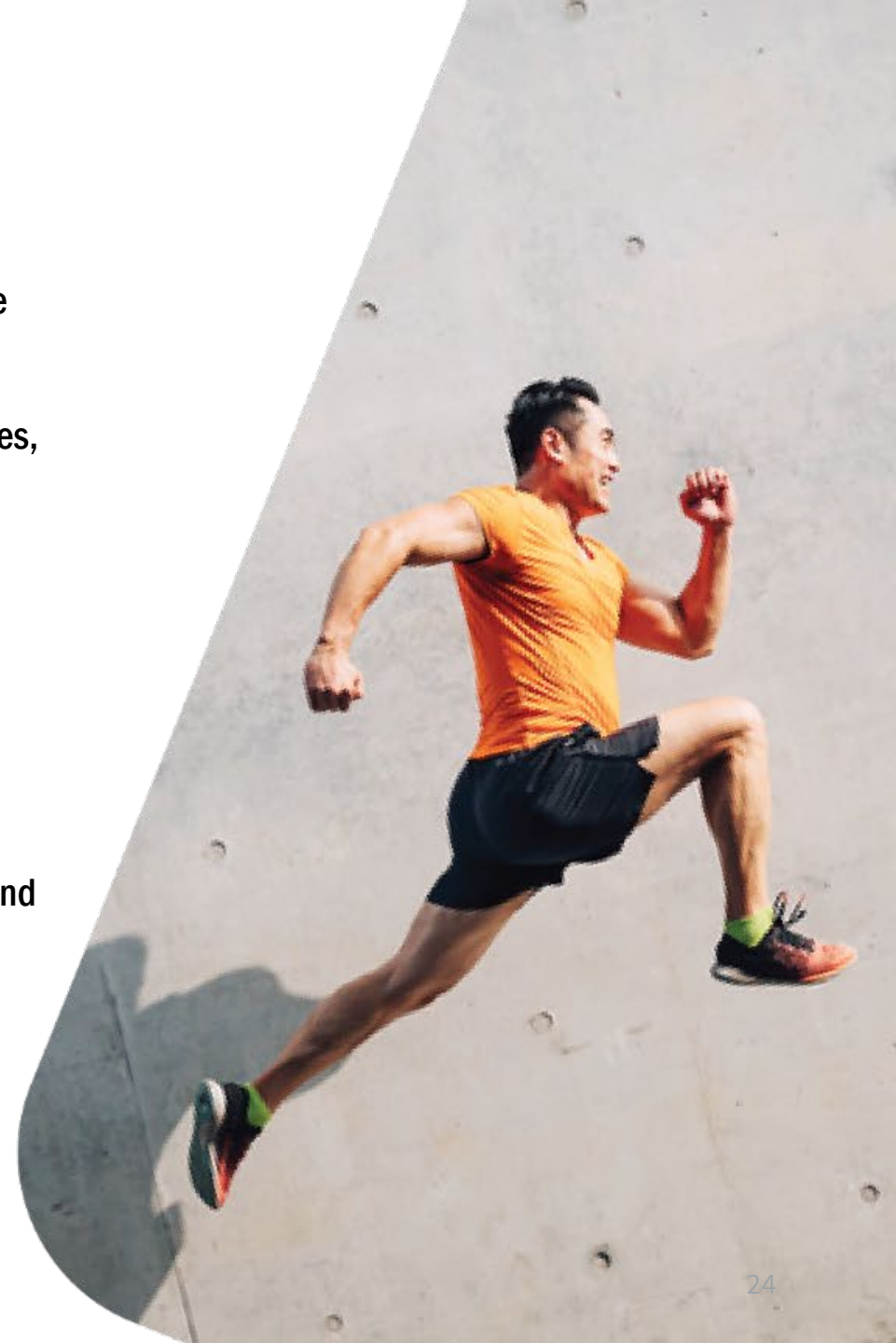
We are a long term innovative partner that continues to look for ways to deliver more value at a lower cost



The Value of a Brighton Partnership

We are uniquely positioned to partner with you to deliver a high-performing, successful program

- Flexibility to offer our products on full replacement or slice bases, with national PPO and wrap options
- Significant, continuous investment in technology, resources, and staffing to support any program
- Ability to administer a program how the client wants it administered
- Commitment to excellent performance, with service level agreements (SLAs) to ensure excellent results starting at implementation
- Flexible plug-and-play integration with multiple vendors and partners



Contacts

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