



aplos

HEALTH PLANS

Health Plan Overview:



Aplos Health Plans is a new plan being offered. *Aplos* is Greek for simple, and that is what we hope you experience as a plan member.

In your member portal/app, you and your dependents will have the ability to:

- View Profile, ID Card, Plan Details
- Provider Search, Plan Accumulators
- Virtual Care, Medical Navigation
- Review and pay medical claims
- Access customer service, claims, network, and pharmacy numbers

You can call Aplos Health Plans if you need assistance finding a provider, navigating care, verifying eligibility, and/or obtaining pre-certification by calling the number on your ID card.



Our new name is Hy-Vee Health Exemplar Care. Members will have unlimited access to virtual direct primary care included to no additional cost.



Fairos will serve as your plan's Medical Access "Network." The Fairos Advocacy Team is available to answer any questions relating to your providers and plan acceptance as well as assist in resolving issues related to provider billing issues.

Medical Benefits

The OccuNet Company



About The OccuNet Company:

The OccuNet Company is a privately held, innovative healthcare cost-containment company founded in 1998 and headquartered in Amarillo, TX. Our offerings help manage and reduce rising healthcare costs while improving the health and well-being of those we serve.

Our Offerings:



Out-of-Network Solutions



Reference-Based Pricing



High-Performance Network

Client Spotlight:



What is RBP:

Reference-Based Pricing (RBP), operates as a pricing model aimed at fostering transparency and cost control within healthcare. Under this model, a benchmark is established regarding what the plan will cover for specific treatments. Providers receive payment at a fair percentage above the rates set by Medicare. Additionally, members have the flexibility to select from an open network of healthcare providers.

How reference-based pricing works:

As referenced above, reference-based pricing is a cost-containment model that pays claims based on an established benchmark rather than based on prices negotiated between a provider and payor.

Cost savings:

By setting fair and reasonable pricing for medical services, RBP can help reduce the overall cost of healthcare.

Increased transparency:

By establishing clear, consistent pricing for healthcare services, RBP can help employers and employees better understand costs of care.

No Out of Network Fees:

Some RBP programs eliminate the concept of in- or out-of-network providers, essentially opening up healthcare options for employees. With this plan design we are blending the best of both worlds. A robust network (Tier 1) of providers with a Open Network (RBP wrap) to ensure the greatest access possible with the ability to educate members where the best most cost effective care can be delivered (Tier 1).

Why RBP?

(Reference Based Pricing)



The Problem

Rising healthcare costs

- Employers struggle to offer **high-quality financially sustainable benefits**.
- Employers are projected to see **cost increases of 9-10%** annually through 2026 due to inflationary pressure passed from medical providers.
- Traditional solutions like HDHP have often led to people foregoing care, increased costs, and basic **cost shifting to employees**.

9-10%

Annual Increase of Health Costs for employers through 2026.

75%

Lower-income populations could spend 75% of discretionary income on medical costs due to unmanaged cost increases.

Reference: McKinsey & Co. The Gathering Storm: The threat to employee healthcare benefits

RBP saves **20-30%** compared to PPO

Service Type: C-Section Delivery

Billed Charges = \$27,534.28

PPO Discount Pays = \$16,755.39

Medicare Pays = \$6,702.00

RBP Pays = \$10,053.00

The Solution

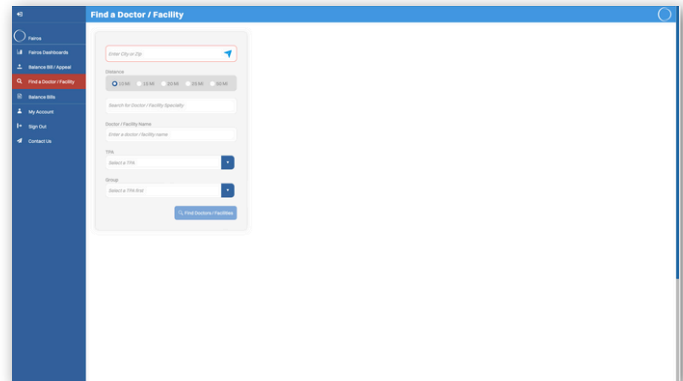
Control cost with RBP

- RBP ensures **fair payments** for all stakeholders.
 - Employees
 - Employers
 - Healthcare Providers
- RBP reimburses **~50%** greater than Medicare rates.
- RBP is an **open network**.

Filter Page

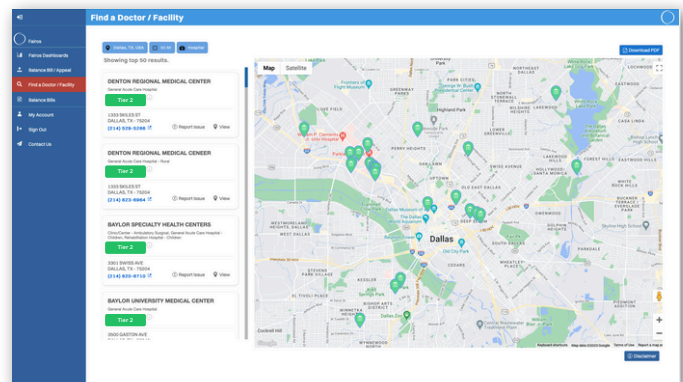
Filter by:

- City or Zip
- Distance
- Doctor Specialty / Facility
- TPA
- Group



Search Results

- Map showing locations that match your search.
- List showing provider name, specialty, address, and contact information.
- Provider Rating - Hover over the icon for the definition.
- Download search results to PDF



Provider Rating Definitions

Tier 1	Superior patient experience. Provider accepts your health plan.	Tier 1 for Aplos. Contracted provider with Fairos
Tier 2	Provider is accessible and accepts your health plan.	Tier 2 for Aplos. Contracted provider with Fairos.
Tier 2	Provider is accessible and likely to accept your health plan.	Tier 2 for Aplos. RBP will be applied.
Tier 2	Provider is accessible but less likely to accept your health plan.	Tier 2 for Aplos. RBP will be applied. Provider may pushback/balance bill.
Tier 2	Expect disruption to your patient experience including higher, upfront costs for care. Contact Aplos.	Tier 2 for Aplos. RBP will be applied. Provider is known to pushback/balance bill.



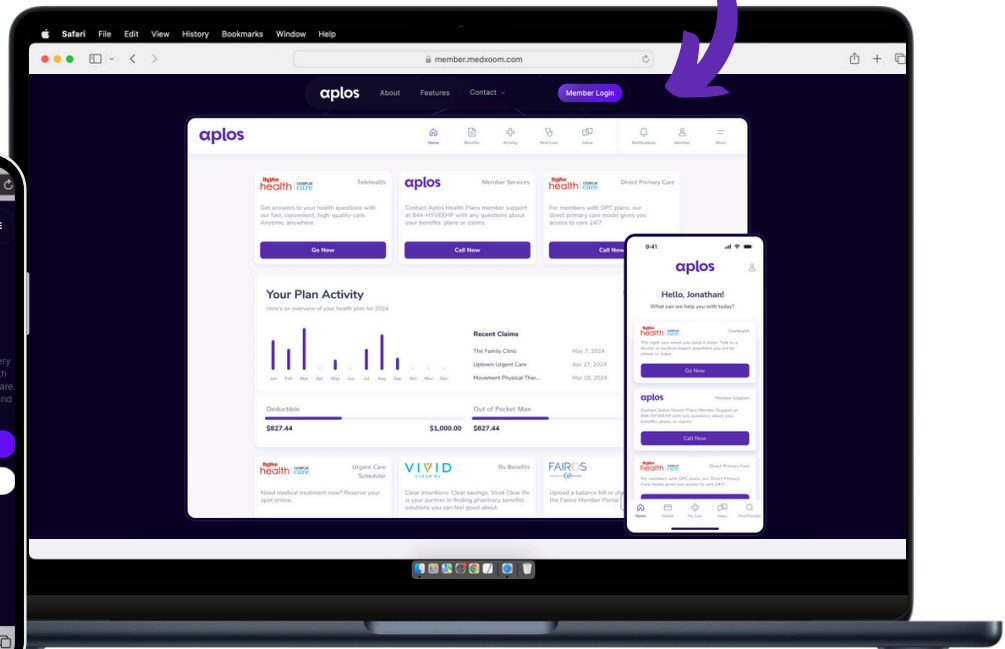
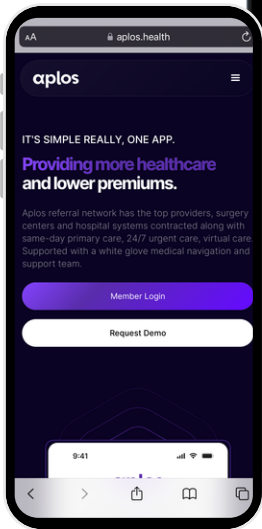
How Do I Access My Benefits?

You're just a few clicks away from your new health benefits experience.

Access, track, and manage your benefits, online or by mobile, in 3 easy steps:

STEP 1

Visit aplos.health and click on the Member Portal in the top right corner.



STEP 2

REGISTER for your account by entering your benefits information to verify your account (don't worry, your information is kept private and secure).

STEP 3

REVIEW dependents and invite adult dependents to register too.

Now You Can:

- Manage all of your benefits in one place
- View, Print & Share your Digital ID Card
- View your Plan, including your Plan Documents
- Track your Deductibles & Out-of-Pocket Maximums
- View detailed information about your Claims
- View & Pay Medical Bills with EZPay®
- Search for Providers
- Start a Telehealth visit
- ...and more!
- Start Maximizing your Health Benefits Today!

Have Questions? You can call call your Concierge team member at the number on your ID card for help.



How to Access Medical Care

- Utilize the Provider Search feature through your member app to access a list of preferred providers within your Aplos Health Plans network.
- If you have any questions, contact the Aplos Health Plans medical navigation team at the number on your ID card for help.
- Every doctor is eligible to deliver services to you and your dependents; you may choose your doctor.
- If the front desk has questions about your health plan, tell them to contact your plan administrator at the number on your ID card for help.



Scan to Access Member Portal



What to expect from Fairos:

- Personal member advocate dedicated to you
- Timely updates from your personal member advocate

Sample EOB

Explanation of Benefits

RETAIN THIS FOR TAX PURPOSES
THIS IS NOT A BILL

Customer Service

Contact Aplos if you have any questions.

Forwarding Service Requested

John Appleseed
5175 Sample Drive
Waterloo, IA 50701

Enrollee: John Appleseed
Patient: John Appleseed
Member ID:
Group:
Group#:
Location:
Location Name
Dep Code:
Date: 1/01/24

Patient #: 00001041891
Provider: Memorial Health

Claim #: 230000000
Patient: John Appleseed

Provider: MEDICAL GROUP INC
Insured Name: Johnny Appleseed
Network: FAIROS powered by GOCUMET
Relationship: 0
Patient Acct #: 987654321

Charge #	Date(s) of Service	Total Charges	Description	Charge Reduction	Non-Covered Services	Ineligible Code	Deductible	Coinsurance/ Copay	Other Plan	Paid At	Benefits Paid	
01	02/20/2024	\$100	Manual Therapy	\$143	\$0		\$0	\$0	\$0	\$0	\$42	
02	02/20/2024	\$15	Blood Sample/Euh	\$25	\$0		\$0	\$0	\$0	\$0	\$10	
03	02/20/2024	\$60	Culture/Serum/Bacteria	\$45	\$0		\$0	\$5	\$0	\$0	\$10	
Claim Sub-Total:		\$100										
Patient's Responsibility:		\$25.00										

Accumulator Information

Member Name	Description	Amount Remaining
Johnny Appleseed	Individual Annual Deductible	\$7,500.00
Johnny Appleseed	Individual Annual Out of Pocket	\$7,900.00
Johnny Appleseed	Family Annual Deductible	\$15,000.00
Johnny Appleseed	Family Annual Out of Pocket	\$15,000.00

Comments

223531113 ANY CLAIM COMMENTS WOULD GO HERE

Ineligible Code Description

38 IF THERE ARE INELIGIBLE CHARGES, THEN THE INELIGIBLE CODE DESCRIPTION WOULD BE HERE

Procedure Code Description

For more information about your health plan, you can call your Concierge team member at the number on your ID card for help.

How to Access Tier 1 Providers:



Member Journey with Exemplar Care



Meet Allison
An employee who suffers from chronic back pain.

She is enrolled in virtual Direct Primary Care with Exemplar Care.

She visits the member app and schedules a virtual appointment.

She sees the physician and pays \$0. Depending on her condition, they may direct her to a Tier 1 provider such as DMOS, Iowa Radiology or UnityPoint Health.

Member Journey with UnityPoint Health



Meet Allison
An employee who suffers from chronic back pain.

She utilizes UnityPoint Health for her condition.

She visits the member app to find a list of participating UnityPoint clinics and hospitals.

UnityPoint is Tier 1. Her service cost is subject to her copay or deductible.

She receives the appropriate care at the best cost and outcome for her.

How to Access Tier 2 Providers:



On the rare occasion Exemplar Care and the Tier 1 options cannot assist Allison, she can go to any physician of her choice.



Alpos Health Plans utilizes an Open Network solution via Fairos



When Allison needs to visit a hospital or see a physician, she can choose any hospital or physician she wants



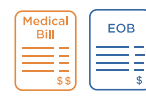
She shows her Member ID Card at the front desk



She receives treatment



Days later, she gets a medical bill



She compares the medical bill & EOB



If the bill matches the EOB, she pays it

99% of the time, the member journey ends here.



If the bill does not match the EOB, she has a Balance Bill



Allison uploads the Balance Bill to the member app



Her bill is reviewed by a team of advocates



Her Fairos Member Advocate works with the provider and the administrator to resolve



Allison receives frequent updates on her Balance Bill




Fairos settles her Balance Bill

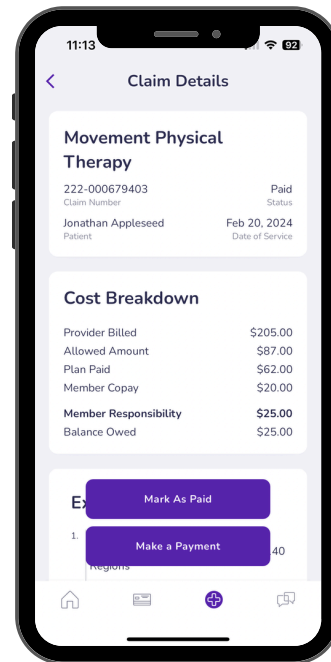


Allison pays the appropriate amount to her provider.

How to pay your medical bill

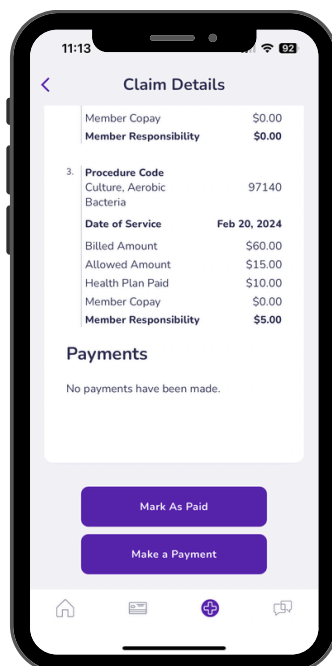
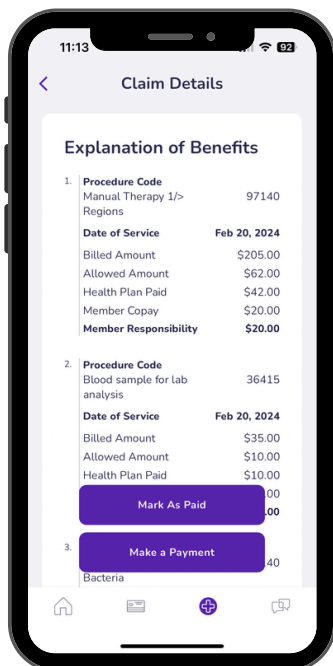
STEP 1:

- Access your EOB in your member app.
- Select the  icon to see claims.



STEP 2:

- Compare your medical bill's price to your digital Explanation of Benefits (EOB) before making any payment.

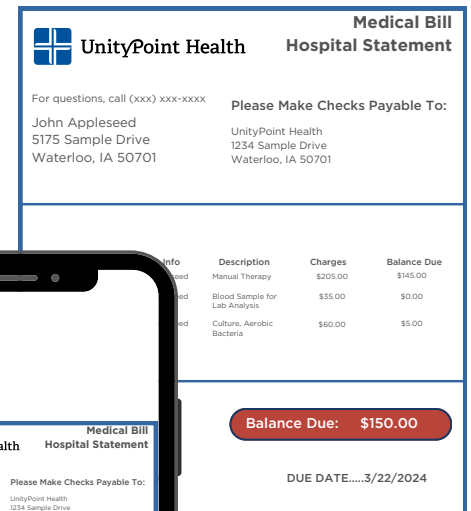
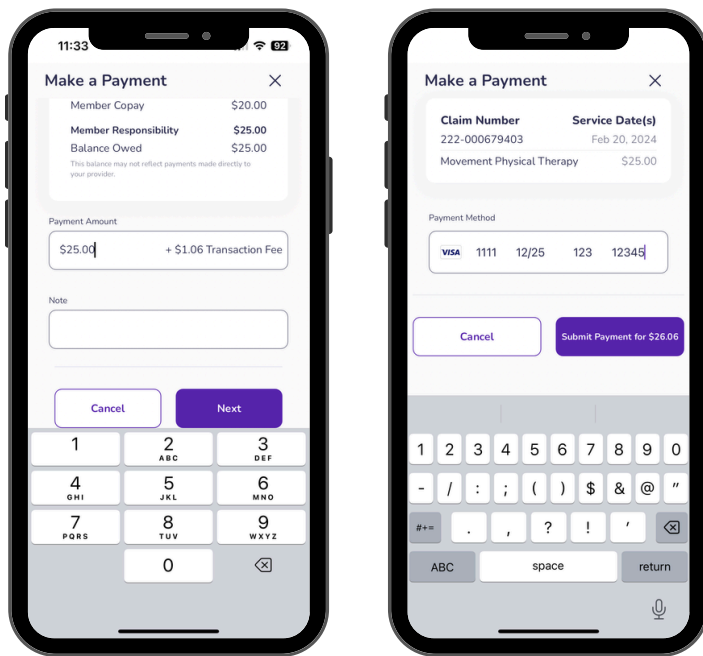


UnityPoint Health		Medical Bill Hospital Statement		
For questions, call (xxx) xxx-xxxx		Please Make Checks Payable To:		
John Appleseed 5175 Sample Drive Waterloo, IA 50701		UnityPoint Health 1234 Sample Drive Waterloo, IA 50701		
Service Date	Patient Info	Description	Charges	Balance Due
02/20/2024	John Appleseed	Manual Therapy	\$205.00	\$20.00
02/20/2024	John Appleseed	Blood Sample for Lab Analysis	\$35.00	\$0.00
02/20/2024	John Appleseed	Culture, Aerobic Bacteria	\$60.00	\$5.00
			Balance Due:	\$25.00
Pay Online: www.unitypoint.org		DUE DATE....3/22/2024		

How to pay your medical bill

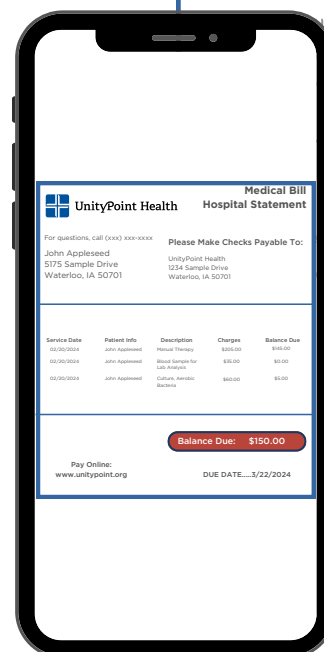
STEP 3:

- If the medical bill amount aligns with your patient responsibility on the EOB, you can pay it electronically within your member app or pay your provider directly.



STEP 4:

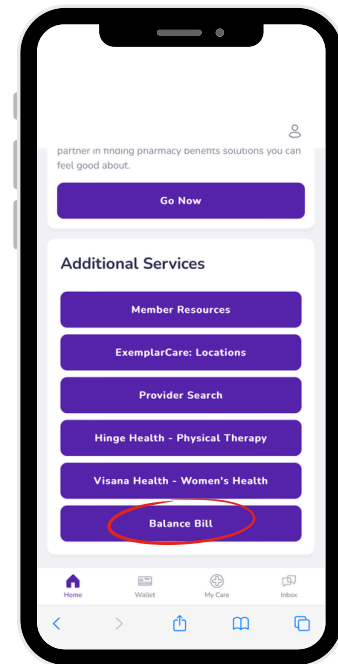
- If the medical bill amount doesn't match your patient responsibility, you most likely have a balance bill.
- Take a picture of the bill and continue to step 5.



How to pay your medical bill

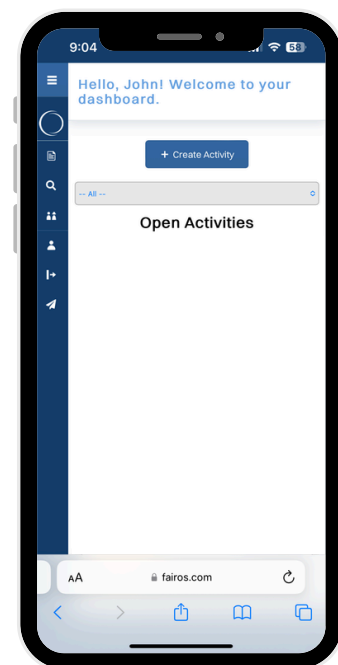
STEP 5:

- In the member app select Balance Bill.
- This will take you to the FairOS Portal.



STEP 6:

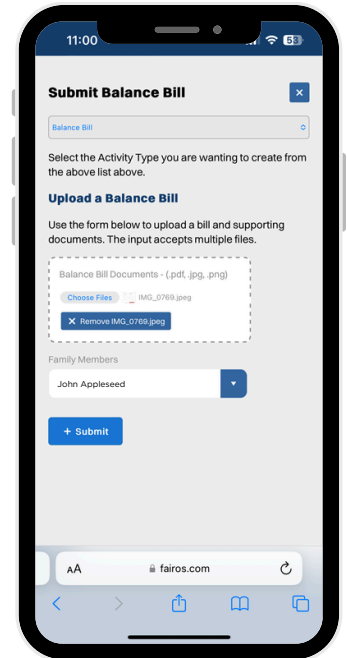
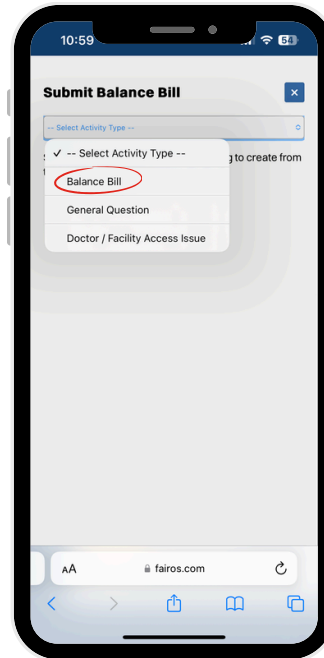
- Once in the FairOS Portal, Select "Create Activity"



How to pay your medical bill

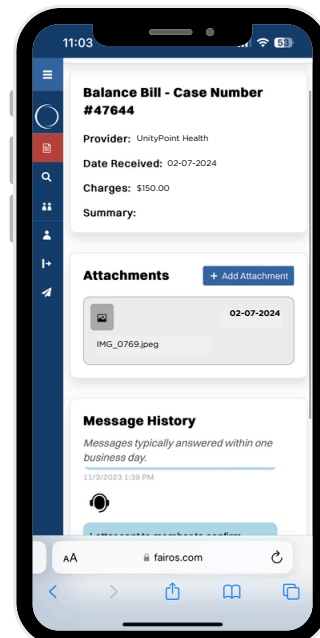
STEP 7:

- Select Balance Bill from the dropdown menu.
- Upload Balance Bill documents.
- Select which member the bill applies to.
- Submit the activity.



STEP 8:

- Select activity to see the case number, balance charge, and to message your Fairos Member Advocate.
- Expect regular updates via phone and/or email at a minimum of every 15 days from advocate until Balance Bill is settled.



How to read your Explanation of Benefits (EOB):



Claim #:	123456789	Provider: MEDICAL GROUP INC	Relationship: 0
Patient:	Johnny Appleseed	Insured Name: Johnny Appleseed	Patient Acct #: 987654321
		Network: FAIROS powered by OCCUNET	

Charge #	Date(s) of Service	Total Charges	Description	Charge Reduction	Non-Covered Services	Ineligible Code	Deductible	Coinsurance/ Copay	Other Plan	Paid At	Benefits Paid
01	02/20/2024	\$205	Manual Therapy	\$143	\$0		\$0	\$20	\$0		\$42
02	02/20/2024	\$35	Blood Sample/Lab	\$25	\$0		\$0	\$0	\$0		\$10
03	02/20/2024	\$60	Culture/Aerobic Bacteria	\$45	\$0		\$0	\$5	\$0		\$10
Claim Sub-Totals		\$300									
Patient's Responsibility:		\$25.00									

Accumulator Information		
Member Name	Description	Amount Remaining
Johnny Appleseed	Individual Annual Deductible	\$7,500.00
Johnny Appleseed	Individual Annual Out of Pocket	\$7,900.00
	Family Annual Deductible	\$15,000.00
	Family Annual Out of Pocket	\$15,800.00

Comments

223531113 ANY CLAIM COMMENTS WOULD GO HERE.

Ineligible Code Description

38 IF THERE ARE INELIGIBLE CHARGES, THEN THE INELIGIBLE CODE DESCRIPTION WOULD BE HERE.

Procedure Code Description

97140 Manual Therapy
 36415 Blood Sample/Lab
 97140 Culture/Aerobic Bacteria


Payment		Check Date	Check No.	Amount
Payment To	MEDICAL GROUP INC	02/20/24	9876	\$62

1. Patient name
2. Service provider
3. The Preferred Provider PPO discount, if any applied to each service provided.
4. Service date.
5. The charge for each service provided.
6. Ineligible amount code.
7. The level of benefits the charge is being paid at, according to the plan.
8. The benefits being paid for each service provided.
9. The total amount that the patient is responsible for.
10. A total of the services or charges that were not covered or ineligible under the plan for this claim.
11. The total deductible and/or co-insurance amount, if applicable to charges submitted on this claim.
12. Accumulator amounts remaining in the Plan Year.
13. Any comment, ineligible amount explanation or additional information needed to process the claim.
14. Explanation of denial.
15. The service provided.
16. Who the benefits were paid to.
17. The date the check was issued, the check number, and the amount the check for benefits being paid.

What to look for on your EOB:



- Locate the patient name and patient responsibility.
- Be sure to pay your doctor the amount that is shown as your patient responsibility.
- **Do not pay any more than what is indicated as your patient responsibility on your EOB.**



Forwarding Service Requested

John Appleseed
5175 Sample Drive
Waterloo, IA 50701

Explanation of Benefits

RETAIN THIS FOR TAX PURPOSES
THIS IS NOT A BILL

Customer Service

Contact Aplos if you have any questions.

Enrollee: John Appleseed
Patient: John Appleseed
Member ID:
Group:
Group#:
Location:
Location Name
Dep Code:
Date: 1/01/24

Patient #: 00001041891

Provider: Memorial Health

Claim #: 230000000
Patient: John Appleseed

Provider: MEDICAL GROUP INC
Insured Name: Johnny Appleseed
Relationship: 0
Network: FAIROS powered by OCCUNET
Patient Acct #: 987654321

Charge #	Date(s) of Service	Total Charges	Description	Charge Reduction	Non-Covered Services	Ineligible Code	Deductible	Coinsurance/ Copay	Other Plan	Paid At	Benefits Paid
01	02/20/2024	\$205	Manual Therapy	\$143	\$0		\$0	\$20	\$0		\$42
02	02/20/2024	\$35	Blood Sample/Lab	\$25	\$0		\$0	\$0	\$0		\$10
03	02/20/2024	\$60	Culture/Aerobic Bacteria	\$45	\$0		\$0	\$5	\$0		\$10
Claim Sub-Totals		\$300									
Patient's Responsibility:		\$25.00									

Accumulator Information

Member Name	Description	Amount Remaining
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Comments

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Ineligible Code Description


38 IF THERE ARE INELIGIBLE CHARGES, THEN THE INELIGIBLE CODE DESCRIPTION WOULD BE HERE.

Procedure Code Description

What to look for on your Medical Bill:



- Locate the patient name and the balance due.
- Next you must compare the patient responsibility on the EOB with the balance due on your medical bill.

**UnityPoint Health**

Medical Bill Hospital Statement

For questions, call (xxx) xxx-xxxx

Please Make Checks Payable To:

John Appleseed
5175 Sample Drive
Waterloo, IA 50701

UnityPoint Health
1234 Sample Drive
Waterloo, IA 50701

Service Date	Patient Info	Description	Charges	Balance Due
02/20/2024	John Appleseed	Manual Therapy	\$205.00	\$20.00
02/20/2024	John Appleseed	Blood Sample for Lab Analysis	\$35.00	\$0.00
02/20/2024	John Appleseed	Culture, Aerobic Bacteria	\$60.00	\$5.00


Balance Due: \$25.00

Pay Online:
www.unitypoint.org

DUE DATE.....3/22/2024

Compare your EOB with your Medical Bill:





Explanation of Benefits

RETAIN THIS FOR TAX PURPOSES
THIS IS NOT A BILL

Customer Service

Contact your Aplos if you have any questions.

Forwarding Service Requested

John Appleseed
5175 Sample Drive
Waterloo, IA 50701

Enrollee: John Appleseed
Patient: John Appleseed
Member ID:
Group:
Group#:
Location:
Location Name
Dep Code:
Date: 1/01/24

Patient #: 00001041891
Provider: Memorial Health

Claim #: 23000000
Patient: John Appleseed

Provider: MEDICAL GROUP INC
Insured Name: Johnny Appleseed
Relationship: 0
Patient Acct #: 987654321
Network: FAIROS powered by OCCUNET

Charge #	Date(s) of Service	Total Charges	Description	Charge Reduction	Non-Covered Services	Ineligible Code	Deductible	Coinsurance/ Copay	Other Plan	Paid At	Benefits
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02	02/20/2024	\$35	Blood Sample/Lab	\$25	\$0		\$0	\$0	\$0		
03	02/20/2024	\$60	Culture/Aerobic Bacteria	\$45	\$0		\$0	\$5	\$0		
Claim Sub-Totals		\$300									
Patient's Responsibility:		\$25.00									

Accumulator Information

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Johnny Appleseed	Individual Annual Out of Pocket	\$7,900.00
	Family Annual Deductible	\$0.00
	Family Annual Out of Pocket	\$0.00

Comments

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Ineligible Code Description

38 IF THERE ARE INELIGIBLE CHARGES, THEN THE INELIGIBLE CODE DESCRIPTION WOULD GO HERE.

Procedure Code Description

John's **patient responsibility** on the EOB does not match the **balance due** on his medical bill, which means he has received a **Balance Bill**.

So, what does John do? He simply pays the provider \$25.00 and calls Aplos immediately for next steps.



Medical Bill

Hospital Statement

For questions, call (xxx) xxx-xxxx

John Appleseed
5175 Sample Drive
Waterloo, IA 50701

Please Make Checks Payable To:
UnityPoint Health
1234 Sample Drive
Waterloo, IA 50701

Service Date	Patient Info	Description	Charges	Balance Due
02/20/2024	John Appleseed	Manual Therapy	\$205.00	\$145.00
02/20/2024	John Appleseed	Blood Sample for Lab Analysis	\$35.00	\$0.00
02/20/2024	John Appleseed	Culture, Aerobic Bacteria	\$60.00	\$5.00

Balance Due: \$150.00

Pay Online:
www.unitypoint.org

DUE DATE.....3/22/2024

The EOB says John owes **\$25.00**

The medical bill says John owes **\$150.00**



aplos

HEALTH PLANS