

HealthbyChoice Incentives



*Helping your employees, and your
bottom line, stay healthy.*

Make healthier choices with lower costs

HealthbyChoice IncentivesSM is a health plan and wellness program that offers a strong incentive for your employees to make healthier choices – better benefits with lower costs.

At the same time, it enables you to offer great benefits while saving up to 13% on your health care premiums over the cost of comparable plans.

Where the savings are

HealthbyChoice Incentives:

- Uses a combined rate, thanks to its dual-benefit design, which results in lower employer premiums.
- Incorporates “aligned copayments,” which means employees pay higher copays for higher cost health care services. This further reduces employers’ health care premiums.
- Encourages healthier lifestyles among employees, which often translates into less absenteeism and increased productivity.

It works for you

HealthbyChoice Incentives is easy to implement. Because it’s a turnkey solution, there’s little for you or your company to do. Priority Health handles the program administration. We also make a wide array of web-based tools and resources available to your employees to support them in making healthier lifestyle choices.

continued >

HealthbyChoice Incentives **at-a-glance**

- Promotes healthy lifestyles for your employees
- Turnkey solution
- Six HMO options, five PPO options and five POS options
- Wellness resources, from fitness classes to web-based tools
- Available for groups with two or more eligible employees
- Up to 13% savings over comparable plans
- Full replacement policy

How it works

HealthbyChoice Incentives is easy to use and understand for employers and employees. It features six HMO options, five PPO options and five POS options. You select the program(s) that best meet(s) your company's needs.

Each option includes two levels of benefits:

- The **Choice** level provides outstanding benefits that save members on copays, deductibles/out-of-pocket costs and coinsurance.
- The **Standard** level of benefits provides great coverage too but requires members to pay more for their copays, deductibles/out-of-pocket costs and coinsurance.

The first 90 days

All plan members and their covered dependents start out with the Choice benefits. Within 90 days of their effective date of coverage, members and their spouses must meet two requirements to maintain this level of benefits:

1. Complete an online health risk assessment (HealthQuotient™)
2. Have their physician complete a qualification form that states that they meet the criteria for three health indicators:
 - Non-tobacco users
 - Body mass index (BMI) under 30
 - Blood pressure under 140/90

continued >

Those who don't meet the health indicator criteria on the qualification form can still maintain the Choice level of benefits. They simply:

- Complete a fasting cholesterol test
- Complete a fasting blood sugar test
- Agree to follow their physicians' treatment plans

Day 91

After 90 days, members who met the Choice benefit level requirements maintain that benefit level for the remainder of the plan year. Those who didn't meet the requirements are automatically transferred to the Standard level.

Renewal

At the next enrollment date, members spend the first 90 days of the new plan year on whatever benefit level they were on as of Day 91 of the previous year. During this 90-day period, members and their spouses have the opportunity to qualify for or re-qualify for the Choice level of benefits.

Learn how much easier life can be for your company with **HealthbyChoice** Incentives. Contact your agent or call Priority Health toll free at 800 942-0954.



Life just got a little easier.®