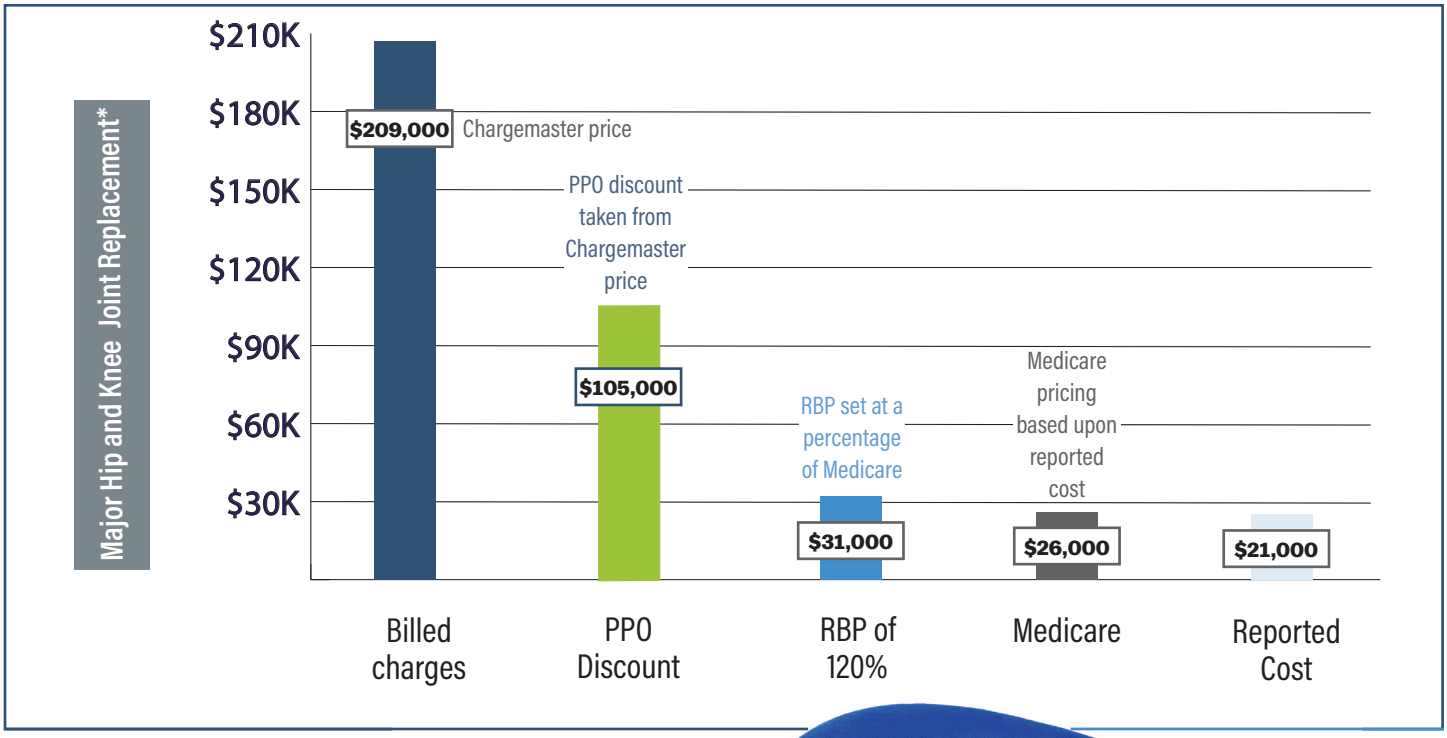
Reference-based Pricing at a Glance
with EVHC

Reference-based pricing (RBP) is a great option for employers seeking a way to lower their claims costs. So how does RBP work?

With reference-based pricing, reimbursement is based upon a percentage of what Medicare would typically pay for a specific service, not on a discount of the facility's chargemaster.



The chargemaster can be excessive. Here are some **actual charges** found during a bill review.**

*ELAP, American Hospital Directory, 2020
** AMPS

At EVHC, we have several ways to bring employers dynamic RBP programs that grow with their needs and the industry's demands.

Four Models

Our dynamic reference-based pricing models can grow with employer needs and industry demands.

FULL REPLACEMENT
Most Aggressive

- No primary network
- No out-of-network programs
- Balance bill protection

HYBRID
First-Year Strategy

- PPO for professional claims
- RBP for facility claims with balance bill protection

OUT-OF-NETWORK
Keep Primary Network

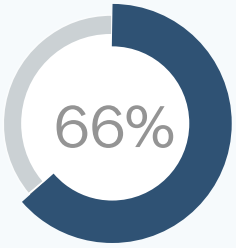
- Wrap Network Alternative
- Wrap PPO network with RBP for out-of-network claims

DUAL-OPTION
(Network + RBP)

- Ultimate Flexibility
- Gives members a choice between a national PPO network plan or a full replacement RBP plan

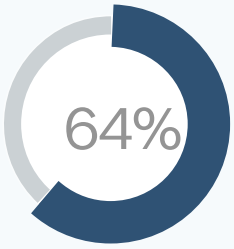
The Savings are Real *EVHC - 2021*

Savings



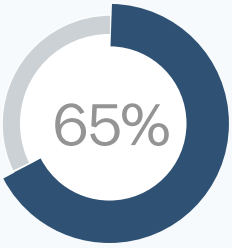
Full Network Replacement RBP Solutions

Savings



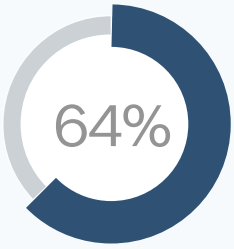
Hybrid RBP Solutions

Savings



ClearHealth Out-of-Network RPB

Savings



Total (Full Network Replacement and Hybrid RBP Solutions)

We Work With: amps, elap services, HST, ClearHealth Strategies

*"Savings" represents the discount off billed charges, based on EVHC' claim experience. This does not include vendor fees (vendor payments through claims have been excluded from the calculation). This includes additional payments due to appeals paid by 4/30/2020, this does NOT include ALL additional payments due to appeals, because not all appeals have been reported and resolved for the claims incurred in this time period.

Solution Comparisons

Not all reference-based pricing plans are created equal. Depending on the type of solution you're looking for, we have options.

Here's a high-level look at the RBP solutions we offer and how they work:

	amps	elap services	Clear Health Strategies	HST
Payment Strategy	Average of Medicare +50% and CCR*+35% CCR is capped at a max of 175% of Medicare	Higher of Medicare +20% or Cost +12% (non-Imagine Health facilities)	Customization using the Medicare-based pricing methodologies	Average of Medicare + 40% Hospital- 140% of Medicare Professional -Average of Medicare + 20% (authorized to negotiate Hospital charges up to 200% of Medicare or 150% of cost)
Fee Structure	Percentage of gross billed charges, capped at $25K per claim	Percentage of gross billed charges (percentage of savings on Imagine Health and Spring Tide negotiations)	Percentage of savings	PEPM
PEPM Pricing Availability	Yes	No	Yes	Yes
Recommended Sales Strategy	Full PPO Replacement, Hybrid with OON Solution, Dual Option RBP/PPO	Full PPO Replacement, Hybrid with OON Solution, Dual Option RBP/PPO	OON Solution	Full PPO Replacement, Hybrid with OON Solution, Dual Option RBP/ PPO
Narrow Network Options	Yes	Yes	No	Yes
Provider Finder Tool	AMPS Provider Finder Cost, Quality, RBP Acceptance Rate *Coming 2021 Q4*	ELAP Guide Services Cost, Quality, RBP Acceptance Rate	No	HST Connect Cost, Quality
Co-Fiduciary	Yes	Yes	No	No
Legal Backing	Yes	Yes	No	Yes
Balance Bill Protection	Yes	Yes	No	Yes
Member Advocacy	Yes	Yes	No	Yes
Forensic Auditing	Yes	Yes	No	Yes
Product Offering	AMPS RBP: CareConnex, Negotiation	ELAP Max, ELAP Plus, Imagine Health, Professional Solution	Clear Health OON	Value Drive Health Plan Services, Path Finder, HST Connect, Patient Advocacy Center, Sentry Services, HST Care Connect Services (Direct to Employer)
ID Card Requirement	Logo and Assignment of Benefit Disclaimer	Logo, Unique Provider URL, Plan Limit Disclosure	Plan Limit Disclosure; Subject to Reference-based Pricing	Plan Limit Disclosure; Assignment of Benefits Waiver Disclosure
Contract	AMPS	ELAP	EVHC	EVHC
Negotiations	Yes	Yes	Yes	Yes

*CCR - Cost to Charge Ratio

This table is meant to give a high-level comparison of our RBP solutions. It does not include all the features and capabilities of each solution. For more details, please reach out to your EVHC sales representative.

Dual Offerings with Reference-based Pricing

The savings with reference-based pricing is real. But some members may be more comfortable with a more conventional structure. For companies who want the cost savings of reference-based pricing and the flexibility to offer their members a choice, EVHC has dual offering solutions.

Cigna Network*

We've worked with Cigna to create a robust dual offering. **Here's how it works:**

- Offering must be reference-based pricing OR Cigna network (not a wrap)
- Employee chooses between the two options
- 25+ Available to groups with at least 25+ lives in the Cigna network
- All dual option plans should be identified during the presale process.

For more information, contact your EVHC sales executive.

*Contact your EVHC sales executive for full details and rules of engagement.

EVHC