



Endorsed Health Plan Options For APMA Employer Members



Integrity

We are your trusted insurance advisor. We care about what product is most suitable for you based on your unique situation. You can count on us to be objective and focused on your best interest. We have the expertise you need to bring the most value to your business and employees.

Excellence

Excellence is a philosophy...it's an attitude that boldly says, "We are committed to you and your success." The level of your success is contingent on the team you surround yourself with. The Ark Group team brings over 100 years of combined industry experience and a national perspective to the table for you to leverage for the benefit of your business and your employees.

Innovation

Cutting Edge Technology, Custom Benefits & Products and Next Generation Third Party Administration



2020: Year of Covid-19

Due to the Covid-19 pandemic, APMA and their benefits partners decided to postpone the roll out of the new member benefits program due changes in insurance regulations and not knowing what the claims cost of the pandemic was going to be.

After one year of experience, APMA and their health partners are now comfortable, ready and **excited** to roll out the new benefits program.

Your Custom Benefit Solution

- With our proprietary health package, we can bring the best solution to your groups.
- Our proprietary plan design will integrate a level funded major medical plan, GAP benefit, Accident benefit and Critical Illness benefit to decrease your out-of-pocket expenses, drive down the monthly premium costs and deliver a better renewal rate.
- Medicare options are available for employees over the age of 65.

IMPORTANT NOTICE: Major Medical product for individuals under age 65 is not a part of this product offering



APMA Sample Health Plans

Our plan can save anywhere from 15%-40% on your current health plan premiums, while providing better benefits.

Better Benefits.
Quicker Care.
Less Expensive.

Health Plan Comparison

Network Options	Cigna / Aetna / PHCS / First Health					
	Sample Plan A: Copay Low		Sample Plan B: Copay High		Sample Plan C: HSA	
	Network	Non-Network	Network	Non-Network	Network	Non-Network
Deductible Individual/Family	\$1,500/ \$3,000	\$3,000 / \$6,000	\$3,500/ \$7,000	\$7,000 / \$14,000	\$5,750 / \$11,500	\$11,500 / \$23,000
*Net Deductible with GAP Individual/Family	\$500/\$1,000	\$1,500/\$3,000	\$500/\$1,000	\$3,500/\$7,000	\$1,550/\$3,100	\$2,750/\$5,500
Out-of-Pocket Maximum Individual/Family	\$3,000 / \$6,000	\$6,000 / \$12,000	\$6,000/ \$12,000	\$12,000 / \$24,000	\$6,400/ \$12,800	\$12,800 / \$25,600
*Net Out-of-Pocket Maximum with Acc or CI Individual/Family	\$0/\$0	\$0/\$0	\$0/\$0	\$0/\$0	\$0/\$0	\$0/\$0
Coinsurance After Deductible	80%/20%	50%/50%	70%/30%	50%/50%	80%/20%	50%/50%
Primary/Specialist/Urgent	\$35/\$50/\$75	Ded/Co-Ins	\$35/\$50/\$75	Ded/Co-Ins	Ded/Co-Ins	Ded/Co-Ins
Inpatient Hospitalization	Ded/Co-Ins	Ded/Co-Ins	Ded/ Co-Ins	Ded/Co-Ins	Ded/ Co-Ins	Ded/Co-Ins
Out-Patient Surgery	Ded/Co-Ins	Ded/Co-Ins	Ded/ Co-Ins	Ded/Co-Ins	Ded/ Co- Ins	Ded/Co-Ins
X-Ray / Lab	Ded/Co-Ins	Ded/Co-Ins	Ded/ Co-Ins	Ded/Co-Ins	Ded/ Co-Ins	Ded/Co-Ins
Emergency Room	Ded/Co-Ins	Ded/Co-Ins	Ded/ Co-Ins	Ded/Co-Ins	Ded/ Co-Ins	Ded/Co-Ins
Generic Prescription Drugs	\$15 Copay	Not Covered	\$20 Copay	Not Covered	Ded/ Co-Ins	Not Covered
Preferred Brand Drugs	\$45 Copay	Not Covered	\$65 Copay	Not Covered	Ded/ Co-Ins	Not Covered
Non-Preferred Brand Drugs	\$60 Copay	Not Covered	\$100 Copay	Not Covered	Ded/ Co-Ins	Not Covered
Specialty Drugs	Ded/Co-Ins	Ded/Co-Ins	Ded/Co-Ins	Not Covered	Ded/ Co-Ins	Not Covered

*The GAP, Accident, and Critical Illness benefits are administered by separate insurance carriers.

Our insurance solutions are transparent and engaging. Our proprietary plan design approach delivers risk financing that eliminates catastrophic exposure!

Our Level-Funded, Proprietary Health Packages are structured to accomplish the following objectives:

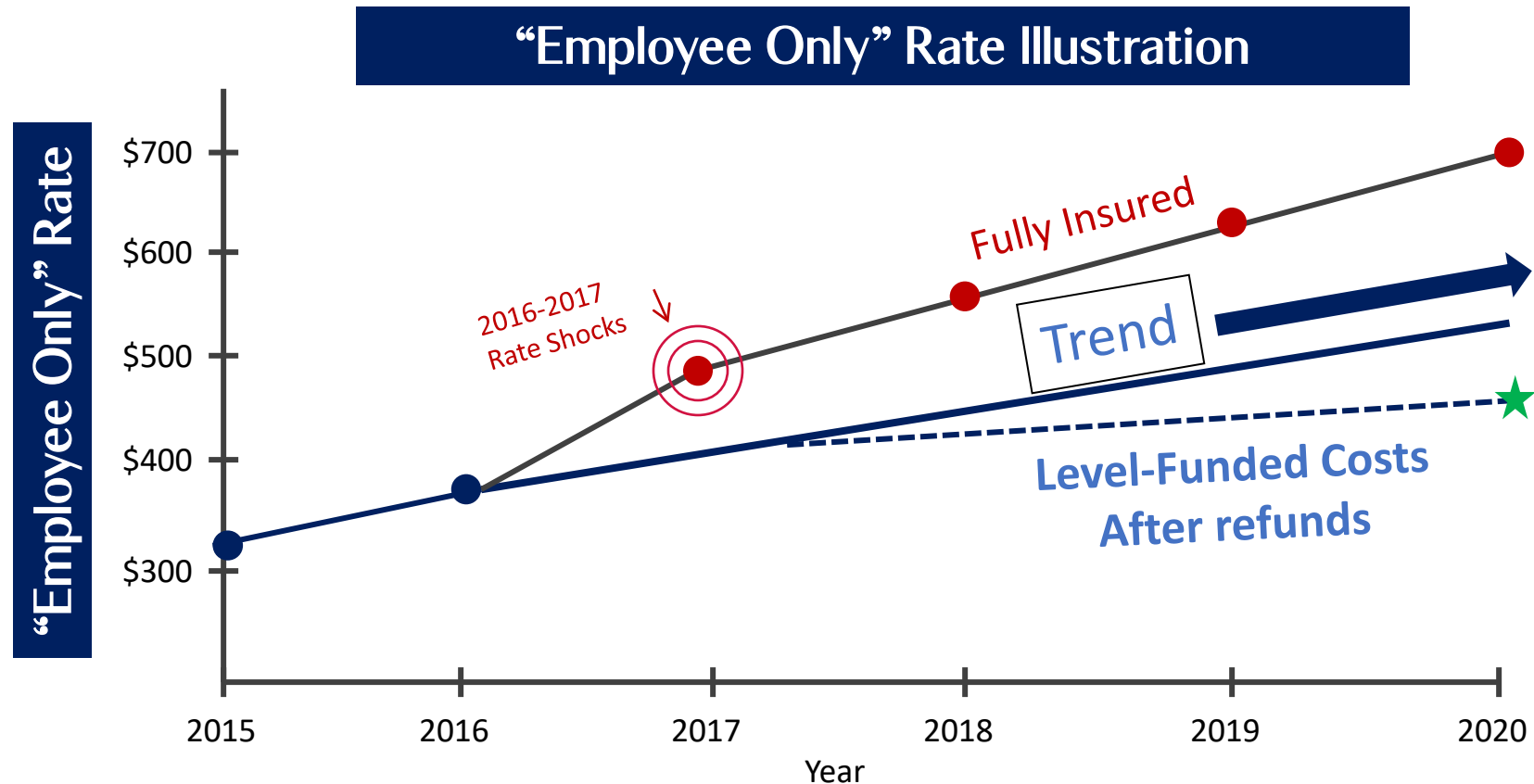
1. Better manage the actual cost of healthcare for the group
2. Protect the employer from any catastrophic health risk exposure
3. Provide better benefits, for less expensive
4. Provide tools to the employer and employees that help them proactively manage their health care risks
5. Position the employer to retain any underwriting profits

What is a Level Funded Plan?

Level Funding is a variation of Self-Funded. It is a newer and more innovative option for smaller employers who are looking for solutions to the rising cost of group health insurance. A Level-Funded plan has the “look and feel” of a Fully Insured plan but provides an employer with the Transparency they need, which positions them to help their employees become better healthcare consumers.

Around 65% of Employers receive money back at the end of the year due to the total amount of claims being lower than what was projected.

Why Level Funding Now?



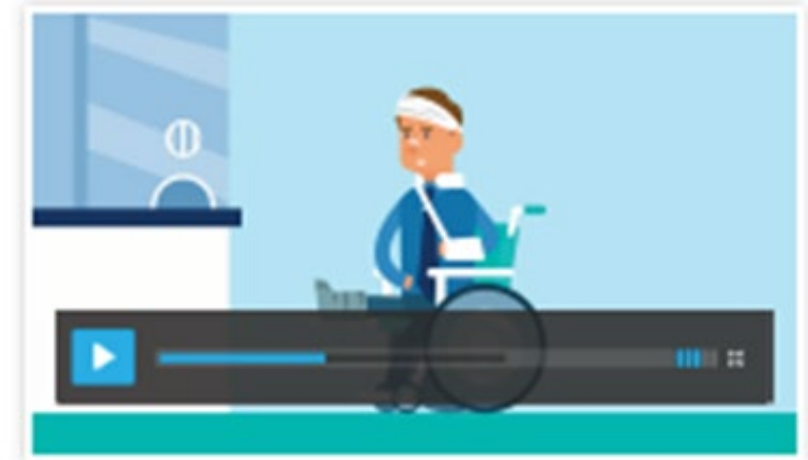
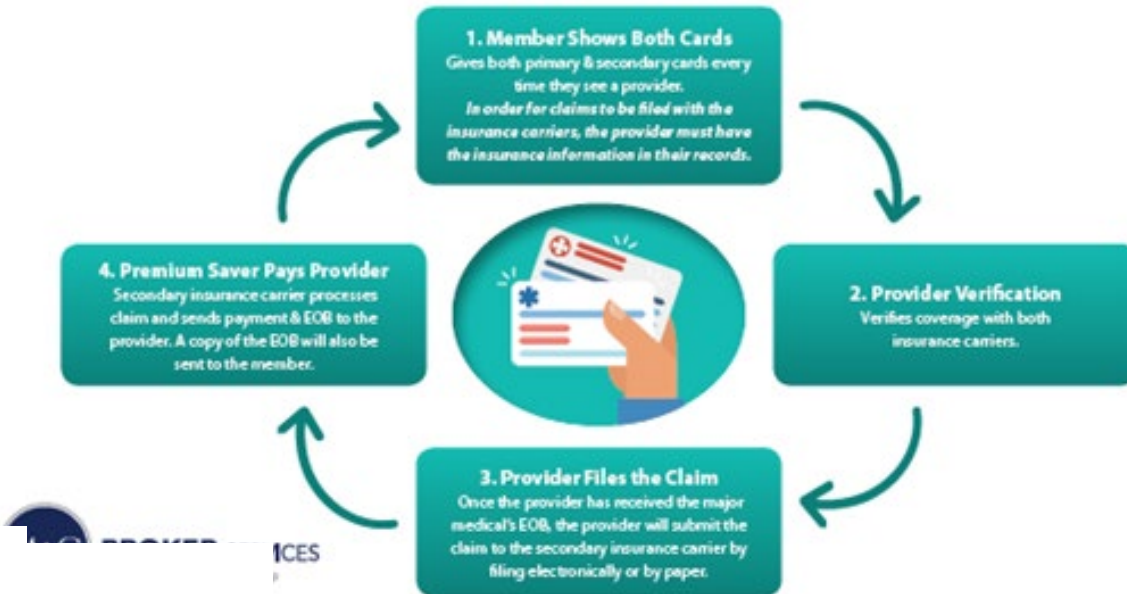
This sample chart illustration is provided for educational purposes only. Actual results may vary and are not indicative of future performance.

TOOLS TO NAVIGATE YOUR GAP PLAN

Our Claims Process is Simple!

The employee simply presents their primary and secondary insurance cards every time they see their provider. The provider and insurance carriers do all the work and the member pays the final bill.

This Is called the Two-Card System!



Client Portal

Premium Saver clients can register and view or download their Explanation of Benefits (EOBs) by visiting:

<https://my.mwadmin.com/register/insertgroupnumberhere>

The group number is required for the registration process. Members can obtain the group number from the Group Administrator.

View the video at www.premiumsaverplan.com

Benefit Description	Benefit Amount	Additional Explanations
Inpatient Medical Benefit	\$10,000	Benefit amount does not change for Spouse or Child. Medical expenses caused by covered accidents are reimbursed up to the maximum benefit amount shown. The benefit amount listed is available per plan year.
Outpatient Medical Benefit	\$10,000	Benefit amount does not change for Spouse or Child. Medical expenses caused by covered accidents are reimbursed at 80% of Usual and Customary charges, up to the maximum benefit amount shown. The benefit amount listed is per plan year
Critical Illness Benefit	\$10,000	Benefit amount does not change for Spouse or Child. Cash benefit is payable upon diagnosis of the following ten (10) covered conditions: Cancer, Renal Failure, Heart Attack, Stroke, Major Organ Transplant, Multiple Sclerosis, Coronary Artery Bypass Surgery, Alzheimer's, Amyotrophic Lateral Sclerosis, Terminal Illness.
Accidental Death & Dismemberment	Employee: \$25,000 Spouse: \$5,000 Children: \$1,000	Ages 70-74, benefit reduces to 65% of original face amount. Ages 75-79, benefit reduces to 40% of original face amount. Ages 80+, benefit reduces to 20% of original face amount.

**Automatically
included in our health
insurance plan!**

**The Ark Accident/CI Combo is
custom designed to help
employees offset the out-of-
pocket medical expenses on your
Primary Health Insurance Plan**



Telemedicine is Simple.

- ✓ **It's convenient** – 24/7/365 access from anywhere in the US
- ✓ **It's unlimited** – \$0 Copay; NO fees or per-use charges
- ✓ **It's easy** – Just call or click; speak with a doctor in less than 15 minutes
- ✓ **It's quality** – US Board Certified & State Licensed Doctors and Specialists
- ✓ **It's proven** – Our affiliated network now reaches over 30 million Americans and counting
- ✓ **It's comprehensive** – For the body, mind and pocketbook
- ✓ **It's for your ENTIRE Household!**

Using Telemedicine can help avoid as many as 70% of in person visits!

Telephonic Counseling

The Right Care At The Right Time

1. In any given year, 25% of the population experiences some type of diagnosable mental health condition (National Institute of Mental Health)
2. 38% of high school seniors have used an illicit drug in the past year (NIDA)
3. Suicide is the 4th leading cause of death among ages 18–65 year olds (NIDA)
4. 75 percent of the general population experiences at least “some stress” every two weeks (National Health Interview Survey)
5. Stress in society is so prevalent that the U.S. Public Health Service has made reducing stress one of its major health promotion goals.
6. Over 60% of visits to primary care physician are for stress related symptoms.

Confidential and Unlimited

1. 24/7 Availability to master's level counselors
2. No copay or fee to the member
3. Immediate crisis support
4. Comprehensive problem assessment and resolution
5. Supportive counseling and subsequent sessions
6. Education
7. 100% follow up with original counselor
8. Custom referral (if needed) to medical behavioral health plans or local community resources

We are here for you and your family!

What is Healthcare Bluebook?

Healthcare Bluebook™ is an added benefit so members can shop for care, compare facilities, save money, and get the best quality for their medical services.

Did you know that in-network prices for the same procedure can vary by over 500% depending on the facility chosen?

Bluebook's web and mobile application make it easy to save money on hundreds of common medical services and procedures by showing the cost ranges in the member's area and providing them with a selection of **Fair Price™** (green) facilities.

We also provide detailed information on the quality of common inpatient procedures (those that require a hospital stay). We'll help you to easily identify and select a facility that has a high-quality rating.

The **Fair Price™** is the amount you should reasonably expect to pay for a service or procedure and is based on the actual amount paid on the claim, not the billed amount, reflecting the discounts that the health plan has negotiated with the facility.

Here's an example of dramatic price differences between one facility and another.



Healthcare Bluebook™

Knee MRI

\$435

\$5,123+





Customer Success =
Life LESS Complicated!

Proactive. Positive.

- We are Customer Focused
- Every Customer is Valued
- End to End Customer Support
- Claims are our opportunity to shine
- Customer Success Experience
- All Calls Recorded

Our Process

Step 1 – Complete the basic Interest Form at: www.myvipbenefits.com/apma.

Step 2 – Employee receives and completes a basic data questionnaire.

Step 3 – Once the data questionnaires are complete, employer will receive firm quote with in four business days.

Step 4 – Employer accepts offer and communicates decision to The Ark Group.

Step 5 – Employer completes required paperwork and employees enroll.

Simple. Effective.

A grayscale photograph of two people shaking hands. The person on the left is wearing a white long-sleeved shirt, and the person on the right is wearing a dark suit jacket over a light-colored shirt. The background is blurred, showing what appears to be an outdoor setting with trees and a building.

Enrollment begins July 1st!

We look forward to meeting you!

The image shows a modern office interior with large glass windows. Several business professionals are silhouetted against the bright light coming from the windows. In the center, two men are shaking hands. To the left, a group of people is standing and talking. To the right, a woman is walking. The floor is highly reflective, showing clear reflections of the people and the windows. Outside the windows, a beach and palm trees are visible under a warm, golden sunset sky. The text "Thank You!" is overlaid in the center in a large, white, serif font.

Thank You!