



Group Health Plans

Helping you build a healthy business

2019





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“Nothing is more important than the health and well-being of your employees and their families.”



We never forget that the majority of our members get their health care coverage through their employer. When you choose HAP, your employees become our responsibility. It's a responsibility that we take seriously, because nothing is more important than the health and well-being of your employees and their families.

You may have seen some changes at HAP. We want you to know that they have been strategic and deliberate. We know exactly where we are going and how to get there. Our goal is and always will be to make HAP the most member-centric health plan in Michigan.

But some things will not change. HAP remains committed to making sure as many people as possible have access to quality, affordable health care and coverage. This is a commitment our members have come to expect from HAP, and we will continue to make it our driving force.

As we approach 60 years of doing business (a milestone we will hit in 2020), HAP remains one of the largest health plans in Michigan. We are poised for growth, and we look forward to reaching new markets with innovative products in 2019 and beyond.

At the heart of it all is our partnership with you, our valued employer customers and the agents who serve you. You continue to be the lifeblood of our company. It's an honor to partner with you – a relationship that we hope will last for many years to come.

Sincerely,

Terri Kline
President and CEO

The HAP difference

Benefits to build a healthy business

A quality benefits package has become crucial to attracting a talented workforce and keeping them healthy. HAP's dedicated account executives can help you select a plan that offers superior care and cost management. We can:

- **Find a benefits package** that meets your business needs.
- **Take advantage of innovative care management** options that support at-risk and chronically ill employees.
- **Help your employees improve care outcomes** by coordinating their medical and pharmacy benefits.
- **Implement high-impact workplace wellness programs** that engage your employees in reaching optimal health.



We're here for you and your employees

At HAP, we know that each business and each person has individual needs. Whether it's help with enrollment or finding a doctor, our account management and customer service teams are here to answer questions and help resolve issues.

This year, we're taking our commitment to providing exceptional customer service one step further. We've moved from one personal service coordinator to a team of personal service coordinators to improve how new members get help. This means your employees will get their questions answered faster and easier.

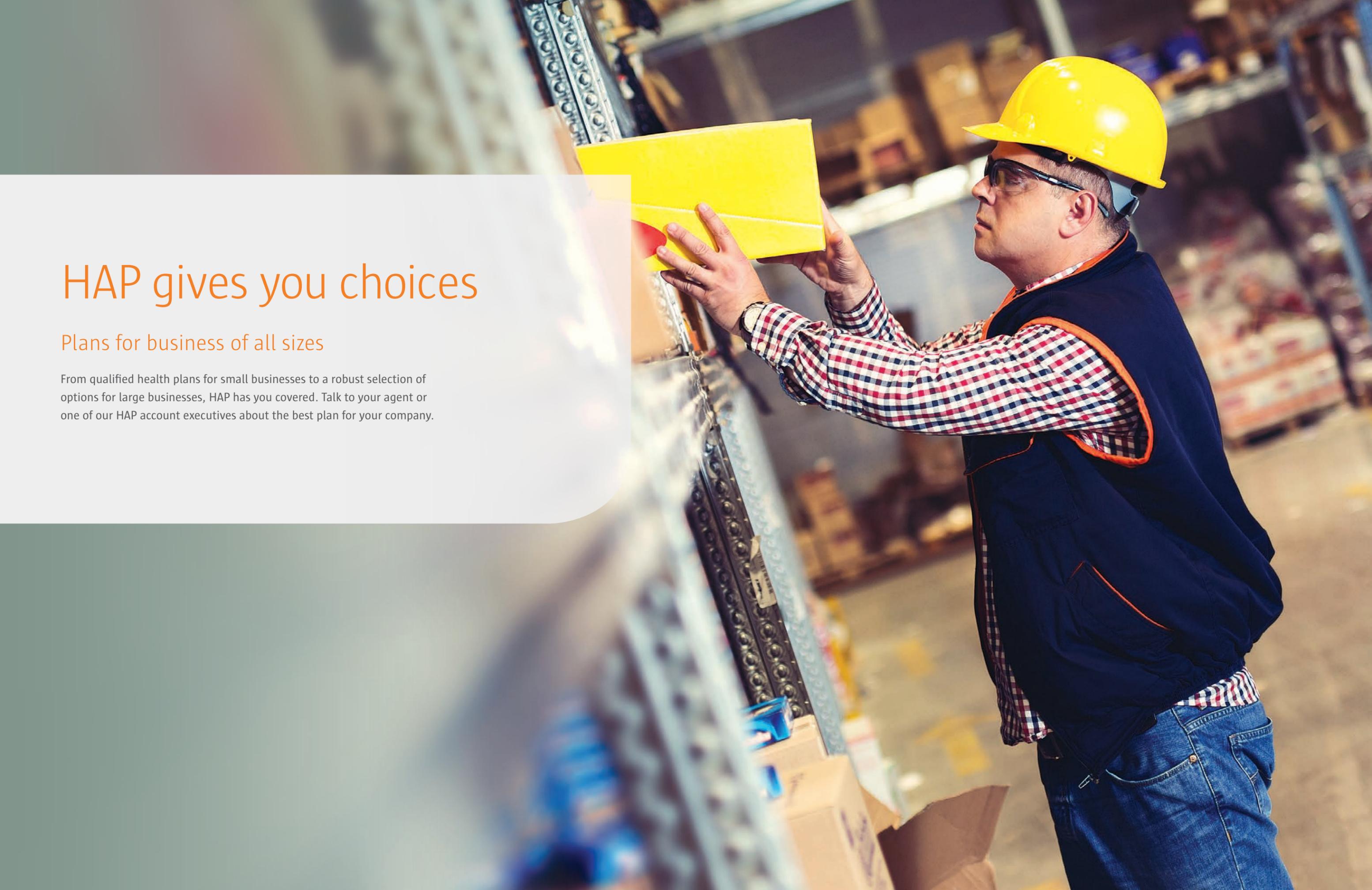
For you

- ✔ 24/7 account access
- ✔ Expert support staff
- ✔ Commitment to finding the best, easiest and most cost-effective ways to deliver health care

For your employees

- ✔ Industry-leading customer service
- ✔ State-of-the-art digital resources
- ✔ Top-notch worksite wellness programs
- ✔ 24/7 telehealth services





HAP gives you choices

Plans for business of all sizes

From qualified health plans for small businesses to a robust selection of options for large businesses, HAP has you covered. Talk to your agent or one of our HAP account executives about the best plan for your company.

Fully insured plans

Our fully funded plans offer the coverage your employees need and the peace of mind that comes with fixed health care costs.

	HMO	PPO	EPO
Members must choose a PCP	Yes	No	No
Referrals for specialists required by HAP	No*	No*	No*
Out-of-network coverage	No	Yes	No
Out-of-network emergency care	All HAP members have worldwide emergency and urgent care coverage as well as telehealth coverage.		

*Specialist's office may require a referral

Consumer-driven health plans

When your employees have health care buying and decision-making power, it can motivate them to engage in their health and well-being. HAP offers a variety of consumer-driven health plans that can be paired with health savings and health reimbursement accounts. HAP offers information, financial and support tools to drive cost-effective health care spending.

Students Away at School program

Your employees can have peace of mind knowing their college students can get care when they need it.

HMO and EPO coverage

Students ages 17 through 25 who are covered by a parent's plan while away at school will be covered outside of HAP's network for emergency or urgent care, plus a wide range of non-emergency services (with prior authorization), including:

- Routine allergy injections, flu shots and immunizations
- Required maintenance visits for chronic conditions, such as asthma or acne
- Office visits for a birth control prescription or to continue birth control
- Prescription drugs (according to your health plan)
- Telehealth services through American Well® (Telehealth does not require a prior authorization)

PPO coverage

Students covered by a parent's HAP PPO plan will be covered for medical care outside of HAP's network through Cigna®.

Students Away at School doesn't cover dependent children who live with a custodial parent outside our service area. Costs for care and prescription drugs outside HAP's service area may be higher, so getting care at home is still best.

For more information about Students Away at School, visit hap.org/studentcoverage.

Group Medicare plans

Do you have employees who are aging into Medicare? Rest assured, HAP has multiple Medicare plan options for individuals and employers. Your Medicare-eligible employees and retirees will receive high-quality coverage with access to a full suite of programs that support healthy living.

	For your Medicare-eligible employees who are:		
	Still working	Retiring with benefits	Retiring without benefits
Groups with more than 20 employees	Members can stay on their current HAP Commercial health plan.	HAP offers: <ul style="list-style-type: none"> • Medicare Advantage employer group waiver plans (EGWP) 	HAP offers: <ul style="list-style-type: none"> • Individual Medicare Advantage plans with or without Part D • Medicare Supplement plans
Groups with fewer than 20 employees	Members can stay on their current HAP Commercial health plan, but Medicare becomes primary. That means they will need to sign up for Part B coverage.		

Plan Advisor tool for small groups

HAP's online tool can help you choose the right plan for your needs. Just answer a few simple questions about group size, care flexibility and funding preferences and the Plan Advisor will show you the health plans best suited to your business. You can review plan options, compare them and ask for a quote.

Visit hap.org/employers/small/plans to use this tool.



Self-funded and shared-funding plans

With self-funded and shared-funding plans, you can maintain control over your health care spending. We'll provide first-rate account and member services, a vast provider network and half a century of experience. Let's work together to build a plan that works for you.

HAP's self-funded and shared funding plans are administered in partnership with ASR Health Benefits.

Choose from several options for small or large businesses. Decide how much you want to pay for employee insurance costs and what administrative services you need. We'll help you pick the best option based on your control, cost and risk preferences.

Self-funded and shared-funding plan options include:

- **Complete customer service** – We give every customer a dedicated account team, including an account executive and an account coordinator.
- **Customized plans** – We'll work with you to design a plan that meets your needs and those of your employees. HAP will create the benefit plan, and we'll provide the summary plan descriptions for employees. We also regularly review plans and provide guidance.
- **Transparency and insight** – We're committed to full transparency, with a set of standard reports and tools designed to address all the needs of a self-funded plan. You'll be able to choose from detailed funding reports and plan analytics that can be delivered securely where and when you want them.



Contact your agent or HAP account executive or visit hap.org/fundingoptions for more information.

HAP's service areas and networks

Care where you need it

With a long history and deep roots in Michigan, HAP has built provider networks that offer our members some of the best health care available across the state. We continue to build outstanding networks that include leading doctors and hospitals.

Worldwide emergency, urgent care and travel assistance

Outside our service areas, HAP members are covered worldwide for emergency and urgent care. HAP's partnership with Assist America provides members with additional emergency travel assistance, including services for lost luggage, travel documents, hospitalization, emergency evacuation and more.



Large group service area and network

HMO

Service area:

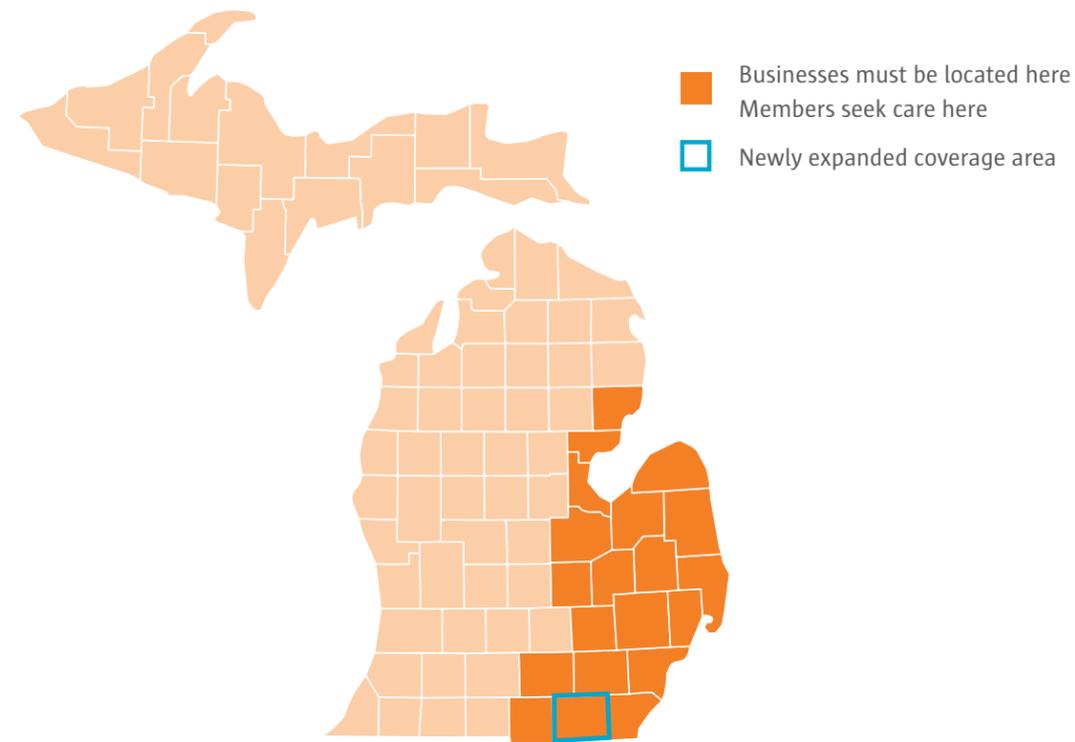
Arenac, Bay, Genesee, Hillsdale, Huron, Iosco, Jackson, Lapeer, Lenawee*, Livingston, Macomb, Monroe, Oakland, Saginaw, Sanilac, Shiawassee, St. Clair, Tuscola, Washtenaw and Wayne.

With our fully insured HMO plans, your business must be located within one of these Michigan counties.

Network:

- Employees with a HAP **HMO** large group plan can seek care through our HMO network in Michigan.

HMO Service Area and Network



*Coverage in Lenawee County will be effective Jan. 1, 2019, pending state approval.

PPO and EPO

Service area:

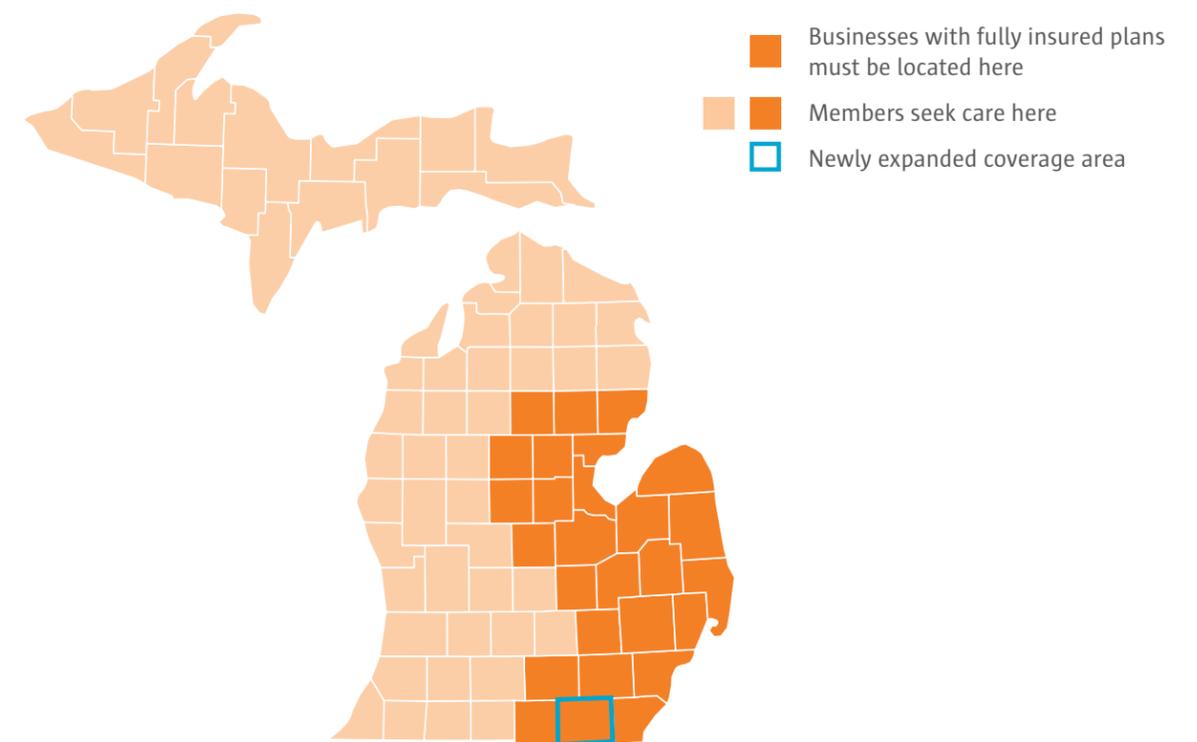
Arenac, Bay, Clare, Genesee, Gladwin, Gratiot, Hillsdale, Huron, Iosco, Isabella, Jackson, Lapeer, Lenawee*, Livingston, Macomb, Midland, Monroe, Oakland, Ogemaw, Roscommon, Saginaw, Sanilac, Shiawassee, St. Clair, Tuscola, Washtenaw and Wayne.

With our fully insured PPO and EPO plans, your business must be located within one of these Michigan counties.

Network:

- Employees with a HAP **PPO** large group plan can seek care through our statewide PPO network in Michigan and northwest Ohio** or use the Cigna® nationwide network when outside of that network.
- Employees with a HAP **EPO** large group plan can seek care through our statewide PPO network in Michigan and northwest Ohio. They can use the Cigna nationwide network if they permanently reside outside of Michigan.

PPO and EPO Service Area and Network



**Seven counties in northwest Ohio: Defiance, Fulton, Henry, Lucas, Ottawa, Williams and Wood.

Small group service area and network

HMO

Service area:

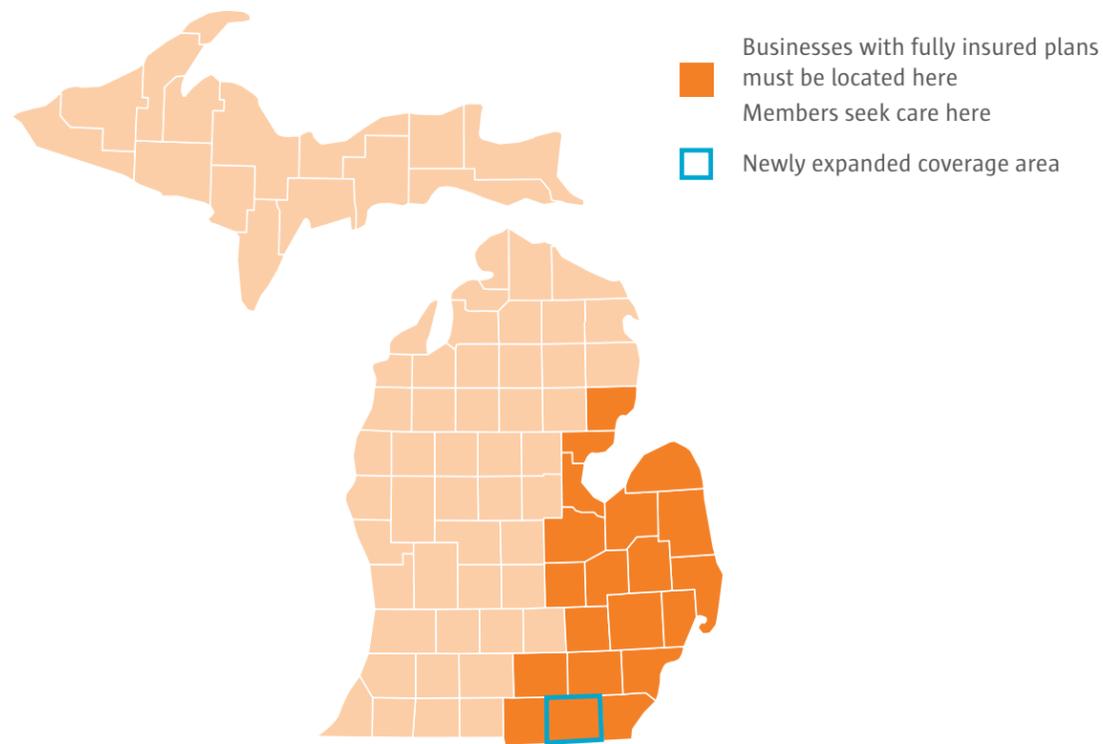
Arenac, Bay, Genesee, Hillsdale, Huron, Iosco, Jackson, Lapeer, Lenawee*, Livingston, Macomb, Monroe, Oakland, Saginaw, Sanilac, Shiawassee, St. Clair, Tuscola, Washtenaw and Wayne.

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Network:

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HMO Service Area and Network



*Coverage in Lenawee County will be effective Jan. 1, 2019, pending state approval.

PPO and EPO

Service area:

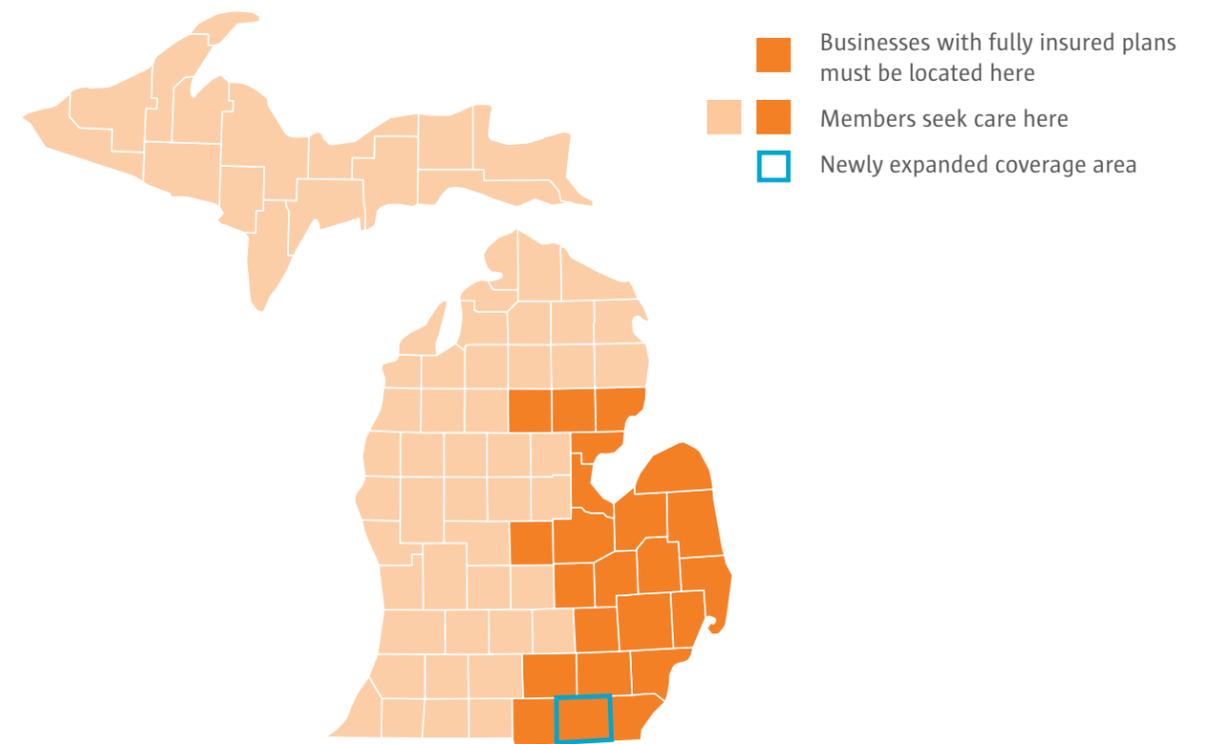
Arenac, Bay, Genesee, Gratiot, Hillsdale, Huron, Iosco, Jackson, Lapeer, Lenawee*, Livingston, Macomb, Monroe, Oakland, Ogemaw, Roscommon, Saginaw, Sanilac, Shiawassee, St. Clair, Tuscola, Washtenaw and Wayne.

With our fully insured PPO and EPO plans, your business must be located within one of these Michigan counties.

Network:

- Employees with a HAP **PPO** small group plan can seek care through our statewide PPO network in Michigan and northwest Ohio** or use the Cigna® nationwide network when outside of that network.
- Employees with a HAP **EPO** small group plan can seek care through our statewide PPO network in Michigan and northwest Ohio. They can use the Cigna nationwide network if they permanently reside outside of Michigan.

PPO and EPO Service Area and Network



**Seven counties in northwest Ohio: Defiance, Fulton, Henry, Lucas, Ottawa, Williams and Wood.

Why choose HAP?

Basics and extras

You need a health plan that can deliver on care and cost. But we know health benefits aren't enough. You and your employees need the extras that help keep people healthy and out of the doctor's office.

Looking beyond care management

You don't wait until your car breaks down to get an oil change. But that's exactly what traditional health care has done by treating people only when they get sick or develop chronic conditions.

HAP has adopted a model that focuses on keeping your employees healthy and out of the hospital.

Population health management

Population health management is our approach to providing health care to your workforce. It works to prevent those who are well from becoming ill, while improving the quality of life and enhancing health outcomes for those with chronic conditions. To do this, we:

- **Examine health trends within our membership.** We address them by evaluating and improving the personal, social, economic and environmental factors that influence health outcomes.
- **Anticipate the needs of your sickest employees.** These are the ones that drive high health care costs. We work to improve the care management process to optimize their treatment.

More than 90 percent of America's health plans

measure their performance using the Healthcare Effectiveness Data and Information Set. HEDIS is a registered trademark of the National Committee for Quality Assurance.

In 2017, HAP ranked in the 90th percentile regionally and nationally for HEDIS measures pertaining to:

- Diabetes care
- Colorectal cancer screening
- Alcohol and other drug dependence treatment
- Immunizations for adolescents
- Weight assessment and nutrition and physical activity counseling for children and adolescents
- Spirometry testing for chronic obstructive pulmonary disease (known as COPD)



How our health care model benefits you

Population health management helps you manage employee health care costs by implementing strategies to improve individual health. Since healthy employees are more productive employees, we work to:

- Increase participation and engagement and encourage member accountability.
- Target programs and services to specific subgroups based on risk.
- Maintain or improve the physical and psychosocial well-being of individuals.
- Address health disparities.
- Connect members to community health resources.
- Partner with physician groups and health systems to identify risks and get the right care to the right patient at the right time.

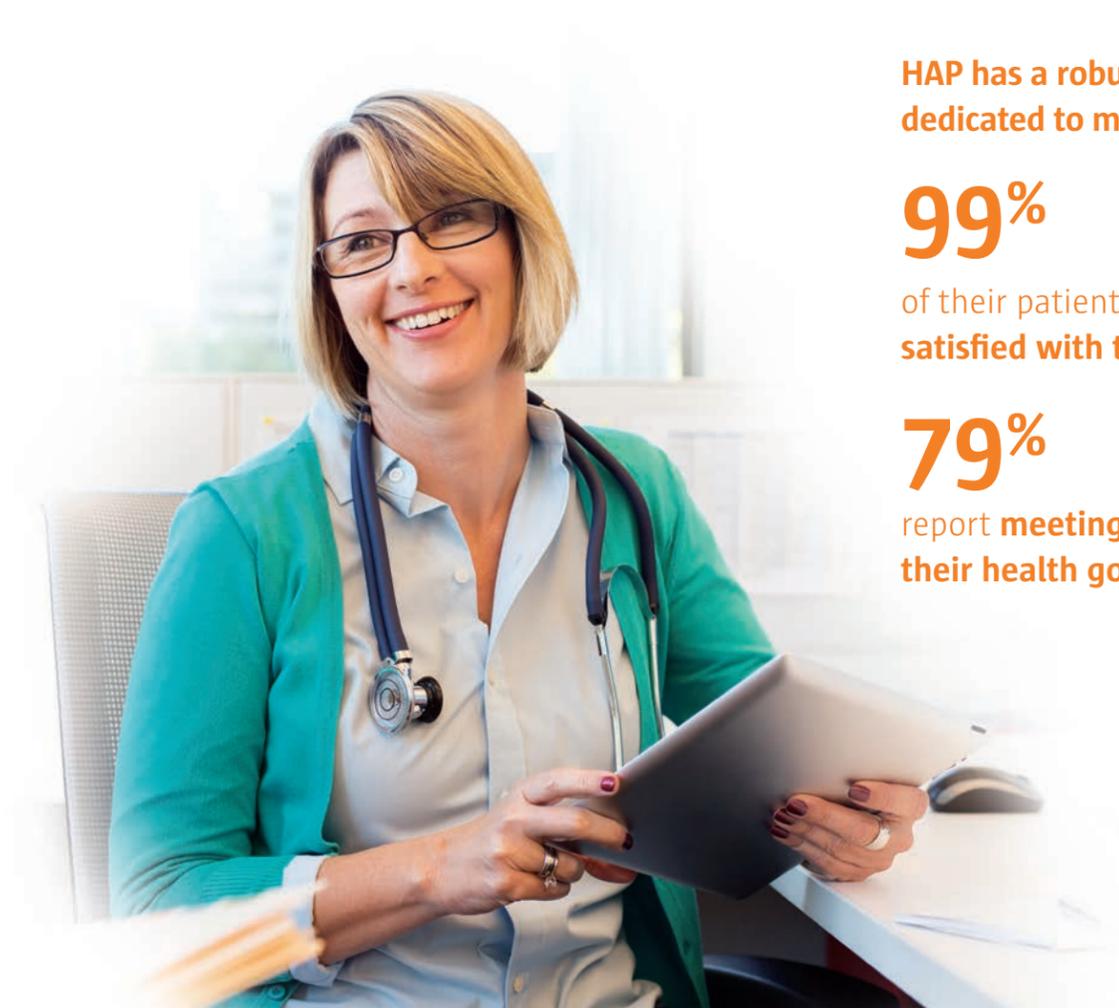
HAP has a robust clinical team dedicated to managing care.

99%

of their patients report being **satisfied with their care**

79%

report **meeting all or most of their health goals**





Formulary management

Over **92%** of our claims are for generic drugs.

The national pharmacy benefit manager average is **85%**.

Pharmacy + medical benefits = better outcomes

Pharmacy benefits are the fastest-growing segment of our national health care costs. They now exceed inpatient hospital costs. Managing them is key to minimizing the impact this trend has on your business.

At HAP, we combine comprehensive medical and full-service pharmacy coverage to help lower spending, encourage appropriate utilization and manage population health. Our care coordinators get a complete picture of procedures, services and medications. It's an approach that keeps your employees healthy and your health care costs down.

Best-in-class pharmacy benefits

We manage appropriate medication use through our:

Formulary management

Over 92% of our claims are for generic drugs. The national pharmacy benefit manager average is 85%.

Specialty drug program

Our specialty drug management program is a high-touch program. It was developed with expert physicians and pharmacists to achieve optimal outcomes.

Cost management initiatives

We keep overall costs in line, while still covering more expensive therapies for members who need them.

For more pharmacy information and covered drug lists, go to hap.org/Rx.

New pharmacy benefit manager

We're thrilled to announce our partnership with an industry leader in pharmacy benefit management. As of Jan. 1, 2019, Express Scripts® will be HAP's pharmacy benefit manager for all of our product lines. Their proven expertise will allow us to streamline operations for improved customer experience.

Home-delivery pharmacy service

Pharmacy Advantage is our home delivery partner for specialty drugs and 90-day medication fills. Their highly trained clinical pharmacists provide complete pharmacy services to our members with acute and chronic conditions. Based in Troy, Michigan, they offer free, convenient home delivery throughout HAP's service area. And they specialize in hard-to-find medications so your employees can focus on life, not filling prescriptions.

Visit hap.org/Rxhomedelivery for more information.



Healthy programs for healthy companies

HAP is a recognized leader in worksite wellness. Whether it's smoking cessation, diet, exercise or stress reduction, we can help your team become healthier and more productive. As a HAP customer, your company can take advantage of a broad range of complimentary services and worksite wellness programs* to help educate and motivate your employees.

- **Reward Your HealthSM** provides incentives to drive health behavior changes and biometric improvements. It can be paired with all lines of business.
- **A small group worksite wellness toolkit** is available for employers with two to 50 employees. It helps you learn to create and implement a well-rounded, customized wellness program that meets your worksite needs.
- **Large group worksite wellness services and programs** are available to all your employees (regardless of coverage) if you have 51 or more employees. You'll receive program consultation and access to workshops, health screenings and on-site wellness activities, including:
 - Blood pressure screenings
 - On-site flu shots
 - Interactive health fair displays
 - Cooking and fitness demonstrations
 - Wellness workshops on topics such as stress management and healthy eating
 - Behavior change programs for weight loss, stress, smoking, exercise and more
 - Online resources and workshops
- **iStrive[®] for Better Health digital wellness manager** offers free tools and programs to help members assess their health and set and manage goals to improve well-being. iStrive is powered by WebMD[®] Health Services and personalized for each member. See hap.org/istriveworksite for more information.

For more information on worksite wellness, go to hap.org/worksite.

*There may be a nominal cost for non-members.



Absenteeism costs fall by about \$2.73 for every dollar spent on workplace wellness.

– Harvard Business Review

In 2017, HAP worksite wellness programs and events welcomed

14,475 participants

In 2018, HAP reward programs welcomed

37,263 participants



42,872 HAP members completed an iStrive health assessment in 2017.

Reporting for better decisions

The more you know about your employees' health and health care use, the better informed your health care decisions are going to be. HAP uses claims data to evaluate benefit use, understand trends, and find opportunities. For fully insured groups with 100 or more enrolled employees, we can provide the information to help improve the health of your employees — and your bottom line.

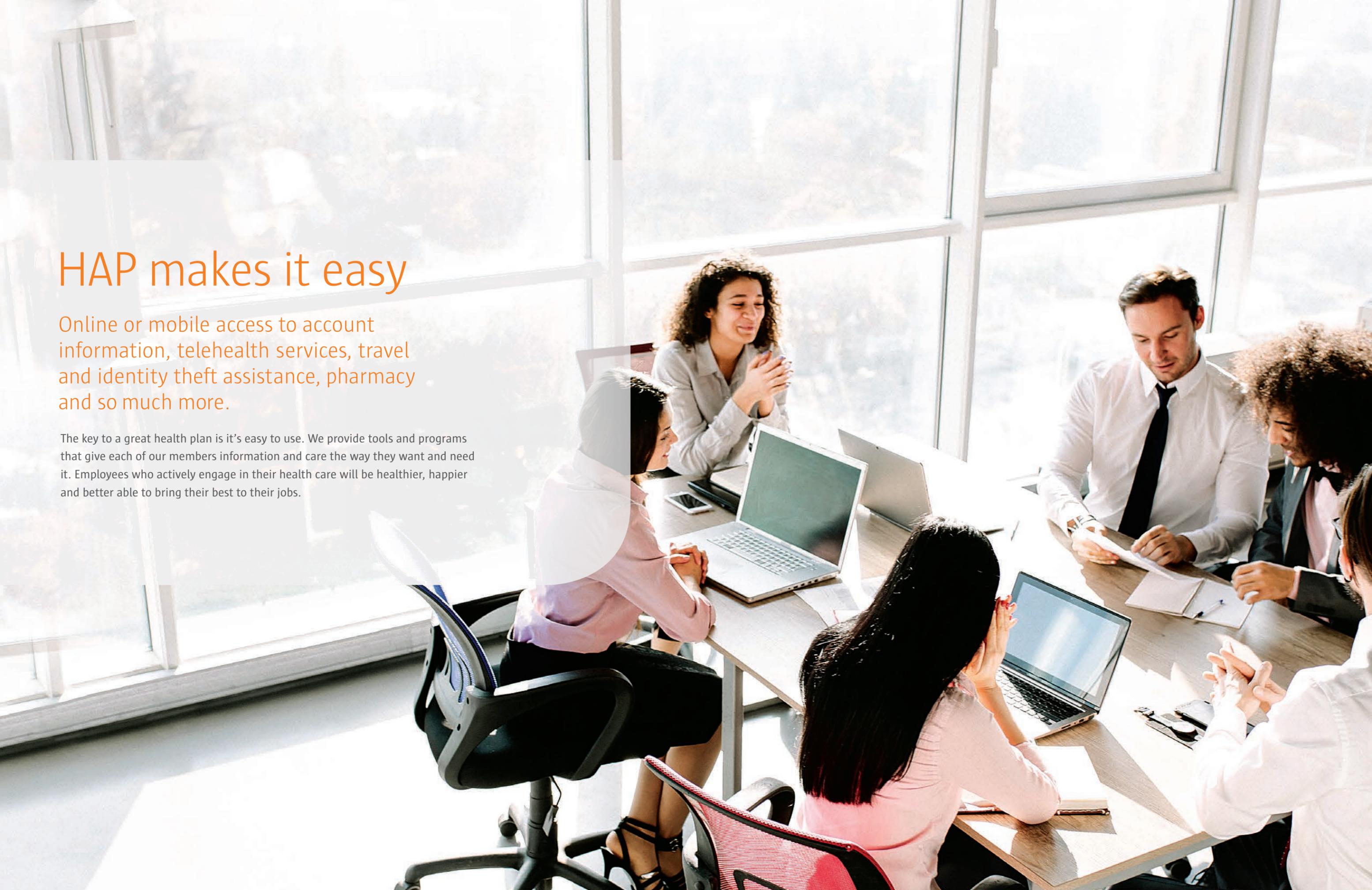
- **Claims information:** High-level information on your spending trends can show where your dollars are going and help you make health plan decisions.
- **High-cost claimants:** Information about your group's high-cost claimants can help you focus your wellness, care management and member engagement efforts.
- **Health benefit costs:** See your claims listed by place and type of service. And see pharmacy benefits by drug name and class level.

For more information or to request a report, **call your HAP account executive.**

HAP makes it easy

Online or mobile access to account information, telehealth services, travel and identity theft assistance, pharmacy and so much more.

The key to a great health plan is it's easy to use. We provide tools and programs that give each of our members information and care the way they want and need it. Employees who actively engage in their health care will be healthier, happier and better able to bring their best to their jobs.



Anywhere access

HAP puts health, wellness, discounts and plan information in the palm of your hand.

hap.org

For members

Everything a member needs to know is at **hap.org**. By logging in, members have 24/7 access to free and secure digital self-service tools such as important plan documents, claim information, iStrive digital wellness manager, the Health Care Cost Estimator and more.



HAP's OnTheGo mobile app makes accessing tools and information even easier. It features a digital member ID card, one-touch calling to providers and access to our health information library.

For employers

Log in at **hap.org** for 24-hour access to view documents and invoices and manage enrollment and eligibility.

Telehealth services

Getting health care online has never been easier. HAP has partnered with American Well® to provide members with telehealth services. Licensed and board-certified doctors are available 24/7 for live, online visits via mobile phone, tablet or computer to treat nonemergency illnesses, such as colds, flu, headache, rashes, sinus infections and pinkeye.

Visit **hap.org/telehealth** for more information.



With the Amwell mobile app: Connect to a doctor anytime and anywhere – round-the-clock medical care is as close as your pocket or purse.

Assist America emergency travel assistance and identity theft protection

HAP is there, even when you're far from home. Through our partnership with Assist America, we offer global emergency medical services for members who are ill or injured while traveling.

Assist America also offers free identity theft protection with safe, continuous monitoring and fraud support.

Visit **hap.org/assistamerica** for more information.



Assist America's mobile app offers one touch connection to their 24/7 call center.

HAP Member Discounts

To make staying healthy a little less expensive, HAP offers savings on health and wellness-related activities and services for our members. Many of our HAP Member Discounts partners are local companies and venues that also call Michigan home.

Visit **hap.org/member-discounts** for more information.



The **HAP Member Discounts app** sends mobile alerts when members are near an eligible discount.

iStrive for Better Health®

Members have access to our digital wellness manager with free, personalized health and wellness tools powered by WebMD.



Set health goals and track your progress with the **Wellness at Your Side app** from WebMD. Our members have a fast, easy way to access their HAP iStrive® for Better Health account.

Visit **hap.org/istrive** for more information about iStrive for Better Health.

Health Care Cost Estimator

The key to cost-effective care is knowing what health care costs. HAP's Health Care Cost Estimator allows members to compare costs among providers, different places of service and different treatment options. Members can reduce their out-of-pocket costs by comparing and choosing the best option for their treatment needs.

Visit **hap.org/costestimator** for more information.

Call us

HAP Customer Service

Your employees can call the number on their member ID card for HAP's best-in-class customer service.

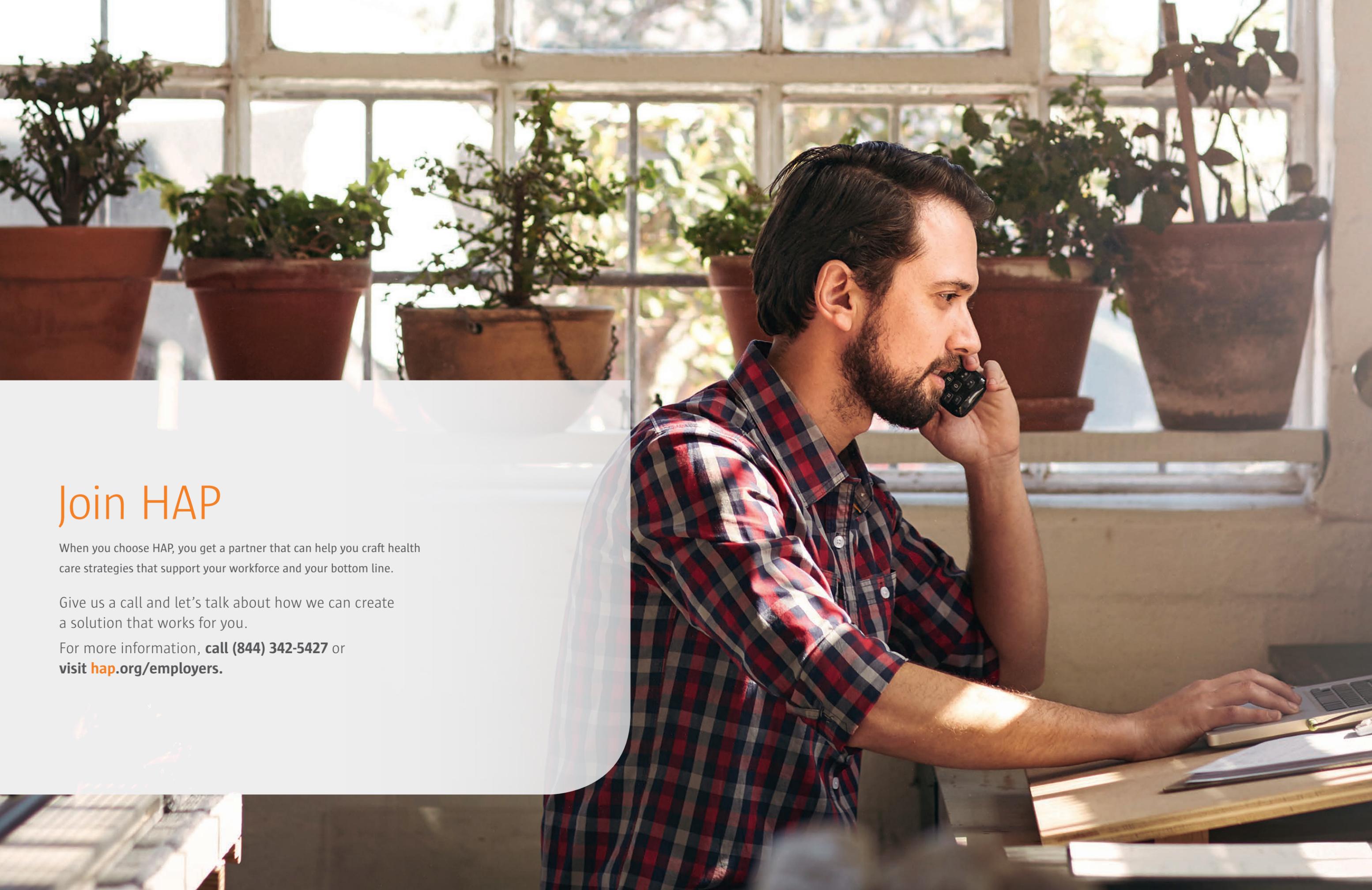
HAP Direct Service

You can get answers and assistance at the HAP Direct line for employers and producers at **(800) 950-7455**.



77% of Americans own a smartphone, according to the Pew Research Center. Over half of them use it for health information.

HAP puts health, wellness, discounts and benefit information in the palms of your employees' hands.



Join HAP

When you choose HAP, you get a partner that can help you craft health care strategies that support your workforce and your bottom line.

Give us a call and let's talk about how we can create a solution that works for you.

For more information, call (844) 342-5427 or visit hap.org/employers.



Individual • Group • Medicare • Medicaid
hap.org | hap.org/blog

Subsidiaries

Alliance Health and Life Insurance Company® | ASR Health Benefits | HAP Midwest Health Plan | HAP Preferred Inc.

HAP and its subsidiaries do not discriminate on the basis of race, color, national origin, disability, age, sex, gender identity, sexual orientation or health status in the administration of the plan, including enrollment and benefit determinations.

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