

A Maine-based health insurance  
and plan administrator pioneer  
**that has your back**

# Broker Guide 2023



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# Community Health Options Overview

Founded in 2011 and located in Lewiston, Maine, Community Health Options (Health Options) is a health insurance pioneer that has your back. We are a local, nonprofit option that was created to serve Members, not profit off them. We strive to keep costs low, while providing the benefits your clients deserve.

We are one of Maine's largest carriers for the individual health insurance market and proudly partner with nearly 1,200 groups, a number that continues to grow. Across all plans, we have a robust network of 48,000 providers including clinicians, hospitals, and pharmacies in New England. Plans include New England or national networks with a choice of PPO, HMO, and HMO tiered options for premium savings.

With a high retention rate within employer group business, high recommendation rates from our brokers, and high Member service scores, we are proud to know that Health Options delivers excellence for all our stakeholders. We look forward to our ongoing partnership with the broker community, and stand ready to work closely with you in the upcoming year.



Partner with  
**1,200 businesses**

Network of **48,000 providers**  
including clinicians, hospitals,  
and pharmacies in New England

**PLUS** a supplemental network  
providing national coverage  
on select plans



## Health Options At-a-Glance

- Flexible plans to fit varying needs, large groups **50+**, small groups 2-50 and individuals on and off the exchange
- NCQA Health Plan Rating of **4 stars** in 2022
- **\$2.41 billion** in payments to providers
- **52% reduction** in hospital readmission rate (2018 to 2021), working hard to keep Members healthy and their costs low
- **\$6 million** saved in Site of Care Program since 2019, helping Members save money, keeping premium increases low
- **\$120 million** in capital surplus in 2021, demonstrating financial health
- **Excellence** in fast, accurate claims processing with an average turnaround time of **≤ 1 week**
- Average Member caller satisfaction rate of **99%** for courtesy and respect, speed of answer, and receipt of information

Health Options cares about our employees as much as our Members. We understand the importance of a healthy, fulfilled workforce in achieving business and retention goals. This means better service and lower costs for you. We were again ranked among Maine's **Best Places to Work**. The wellness of our own employees is paramount to our success, and we are proud to have received this honor in 2013, 2015, 2017, 2019, and most recently in 2021.



# Medical and Care Management

## Medical Management

Our Medical Management team includes a variety of healthcare professionals who work together to remove barriers, making it easier for Members to obtain medications and durable medical equipment. These specialists serve as a connection between Members and providers assisting with communication and education.

## Care Management

Programs are available to aid Members through a broad spectrum of services. These include transitions of care such as hospital to home, disease management, chronic condition management, cancer care, maternity/postpartum care, and behavioral healthcare. Our Care Management team partners with a range of local agencies to assist with community supports and other well-being related issues.



## MANAGING SERIOUS ILLNESS OR INJURY

When it comes to serious illness, our Nationally Accredited complex care management programs provide compassionate, personalized support for metastatic cancers, pediatric intensive care, and transplants. Assistance includes contacting providers, inpatient facilities and national transplant networks.

- Members with special care needs who are transitioning from a prior health insurance carrier will be paired with a Complex Care Manager to assist with transition to their new Health Options' plan.
- Members identified with high health risks have access to complex care management resources.

## HOSPITAL READMISSION PREVENTION PROGRAM

With a **52% reduction** in readmission rate (2018–2021), we are working hard to help Members get well while reducing the costs associated with readmission to the hospital. In-house specialists coordinate with Care Management to assist Members at high risk of readmission. Examples include partnering with home health agencies, community agency care teams and other local agencies.



# Medical and Care Management

## Care Management (continued)

### SITE OF CARE PROGRAM

Our Site of Care Program has saved millions of dollars in healthcare costs for our Members by offering the ability to transition certain medications and infusions to a preferred site of care, including a Member's own home. This program delivers a meaningful choice with **reduced out-of-pocket cost savings** and **increased quality of life**. An incentive program may be available for select medications and select sites of care.

### SUBSTANCE USE DISORDER

Our Care Management team works closely with Members and dependents who are seeking treatment for substance use disorder. Our team provides **high-quality, cost-effective, and convenient in-network program options**. This also includes transitional support after discharge from an inpatient behavioral health or substance use facility.

We're working every day to keep costs low and give you the healthcare benefits you expect and deserve.

### Care Management Success Story

Recently, a Member diagnosed with cancer was referred to a Boston medical facility for treatment and a stem cell transplant. The Member had significant financial barriers, unreliable transportation, and was living in a home that contained mold. The Care Management team made a referral to the Maine Area Agencies on Aging which worked with our Member to arrange payment plans for a reliable car and a safe, new mobile home. The agency also helped the Member apply for monies from the Lymphoma Society, resulting in a \$5,000 grant to help with medical expenses.



# Pharmacy Management

Health Options' in-house pharmacists support the development of a competitive and cost-effective prescription drug formulary in partnership with our Pharmacy Benefits Manager (PBM), Express Scripts, Inc. A number of our large group health plans allow employers to choose between two prescription benefit pricing groups. The only difference is the Member cost by tier. This allows employers to select the plan that aligns with their budget and goal for employee co-pays.

## Special Insulin Provision

Members requiring insulin **will have a cost-share not to exceed \$35** for up to a 30-day supply on all plans.

## ACA Preventive Drug Coverage

Under the Affordable Care Act (ACA), pharmacy benefits cover certain categories of preventive care drugs and products at 100% in all plans when ACA preventive care requirements are met. This means there is no cost-share (deductible, co-payment or co-insurance). These drugs will be designated with ACA on the formulary. To view the ACA included medications in the formulary, [click here](#).

## HSA Plus Preventive Drug Coverage

All HSA Plus Plans include a carefully created preventive drug list containing medications to help prevent the development of and reduce the risk of complications due to chronic conditions and illnesses. These prescription drugs are identified on the formulary with an H.S.A. notation. The drugs indicated as H.S.A. bypass the deductible. Members pay only the applicable co-insurance or co-payment amounts. To view the H.S.A. designated drugs, visit [healthoptions.org](https://healthoptions.org). Details on specific formulary coverage will be available to Members in the Member portal.

## Easy-to-Use Formulary

All plans include a carefully created prescription drug formulary that emphasizes the prevention and management of chronic conditions and illnesses. Designations by drug indicate whether the drug is included under HSA coverage or the Chronic Illness Support Program offered on many Health Options plans. To view the prescription drug formulary visit [healthoptions.org](https://healthoptions.org).



# Pharmacy Management

## Pharmacy Benefit Manager

Our pharmacy benefit manager, Express Scripts®, offers a portal that gives Members a high degree of control over their prescription ordering and prescription costs with auto-generated comparisons and suggestions for lower cost Rx options. **In a recent prescription drug utilization review, our team found that 88% of filled Member prescriptions were for generics**, which means our Members are saving money, making it easier to adhere to prescribed medications. This means healthier employees. For more information on the drug formulary visit [healthoptions.org](https://healthoptions.org).



Our pharmacy benefit manager, Express Scripts®, offers a portal that gives Members a **high degree of control over their prescription ordering and prescription costs.**

In a recent prescription drug utilization review, our team found that **88% of filled Member prescriptions were for generics**, helping our Members save money.



# Group Administration and Member Service

Health Options' advanced administrative systems are fully integrated and have been built with the satisfaction of our Members, groups and brokers in mind. Our systems are managed by our Maine-based professionals who understand the local healthcare market.

## Fast, Accurate Claims Processing

Our best-in-class claims management processes and systems have been refined through managing millions of claims. Our in-house claims professionals ensure Members' claims are paid quickly, and complex cases receive the extra attention necessary. This creates satisfied employees, employers and providers.

- Average turnaround ≤ 1 week
- Sophisticated adjudication process
- Collaboration with in-house medical management for complex claims
- Detailed high-cost claims review process.
- Pre- and post-pay audit program to ensure claims processing accuracy

## Convenient Employer and Member Portals

It is easy for your clients to manage benefit administration. They will have access to our convenient administrative portal, where they can handle employee census data and pay or manage their monthly invoices. Employees can utilize our convenient 24/7 Member portal where they will find all the information they need to stay on top of their health plan's benefits and services, including checking claim status, downloading forms and documents, and learning more about their benefits.

I find the plans provided by Health Options to be well balanced and fair and feel similarly about the premiums. I love that it is a Maine based company with local people that can relate and my clients always love that too! Anytime I reach out to a Health Options contact, I am responded to quickly, accurately and with excitement.

— A.H.,  
Broker Satisfaction Survey



# Group Administration and Member Services



## Member Services Excellence

Our Maine-based, in-house customer service representatives from Lewiston to Fort Kent handle Member, prospective Member, broker and provider calls and earn high satisfactions scores. You can be assured that your employees will not waste time trying to get answers. The Health Options' Member Services team is led by two guiding principles:

### PROMISES DELIVERED

When we make a promise to do something, we keep our promise. We always have your back. We are committed to Members' satisfaction every day. In recent post-call surveys with our Members, we earned **99% satisfaction for courtesy and respect, 98% for receipt of information needed and 98% for the speed of answer.**

### WE DON'T ISSUE HOMEWORK

If a matter requires follow-up or more information is needed from a provider, pharmacy, or another department at Health Options, we will advocate for our Member to get the information needed, or be sure to connect them with the right people.

### MEMBER SURVEY RESULTS:

**99%** satisfaction for courtesy and respect

**98%** satisfaction for receipt of information needed

**98%** satisfaction for speed of answer

“Community Health Options has impressed me with their responses to my emails.

I have had other insurers and they never helped me the way you have so far.

A big shout-out to the email team and **the great job you provide on a daily basis!”**

— Member Survey



# Broker Support

We know you are important to our success and your time is valuable. That is why Health Options has designed systems and tools that make your job easier.

## Comprehensive Broker Portal

The broker portal will help you perform various electronic tasks from quoting a new group to managing current group service. The portal also contains information on the history of commissions paid and agency activity for new groups, individuals, and renewals. You will have the same capabilities as a group administrator and will have access to various reporting options as well as the ability to review billing transactions and make payments on behalf of your clients. Our tool can be used by agency account managers (assistants) who may have varying levels of access.



### EASY-TO-USE FEATURES

- Enter new group from quote to enrollment
  - Upload all necessary documents
  - Enter employee and employer demographics
  - Submit/make payments
  - View payment and invoice history
  - Quote/proposal new groups and renewals
- Review commission information
- Add/term/update employee demographics
- Individual enrollment
- Multiple self-serve reporting options with enrollment and demographic data



# Broker Support

## Specialized Claims Resource

While our claims process is fast and accurate, there are times you may have questions or want additional information for your clients on specific claims. To assist you, our Member Services' phone line enables you to direct your claims questions to a specialized claims resource who is very experienced and empowered to assist you.

Check the [Contact Us](#) section for details on the information required according to HIPAA guidelines to receive data on individual or group claims.

## Claims Assistance

**Call Member Services  
(855) 624-6463**



**PRESS 5 for Broker**



**PRESS 2 for Claims**

## Training

Training and education are important components of our service for Members, brokers, and employers. We provide a variety of training and education opportunities.



Our annual training for brokers is hosted each year at the start of each Open Enrollment season. These sessions are designed to review the latest in organizational capabilities, plan options, and updates to benefits. It is also a great time to connect with Health Options' subject matter experts.



We provide on-demand training for brokers when a refresher is needed or a new broker is onboarded. We also provide various learning sessions for Members.



The Business Development team conducts and facilitates in-person or remote enrollment education meetings for your groups.



We provide timely and relevant communications to the broker community to update you on changes to benefits throughout the year.



Member education and communication tools are constantly created and shared to assist your clients in improving Members' health, wellness, and out-of-pocket costs. Current health and disease education are available on-demand in the Member's portal.



# Broker Support

## Sales Tools

Health Options supports you with attractive and informative electronic sales booklets for individual, small, and large groups as well as ASO. These booklets can be downloaded and emailed or printed.

## Ease of Implementation

When it comes to doing business, Health Options' electronic paperless quoting and onboarding system can seamlessly move employee census data through the process, from quote to enrollment and onboarding. We can even connect with your group clients' Human Resource Information System (HRIS) to receive employee updates and send health reimbursement account data to Group Dynamic, Inc.

“Systems for quoting and enrollment are extremely easy to work with. Much easier than some of your larger competitors.”

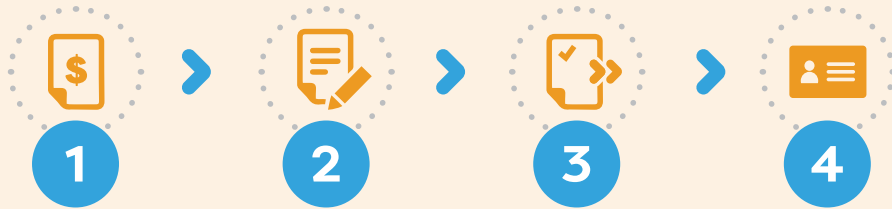
— K.O.,  
Broker Satisfaction Survey



# Broker Support

## Understanding the Enrollment Process

### INDIVIDUAL ENROLLMENT PROCESS



#### PROPOSAL

Enter demographic information, select a plan and email proposal.

#### APPLICATION

Fill out the enrollment application and sign form.

#### SENT TO MEMBERSHIP

Application is sent to membership for processing.

#### MEMBER

Employees/broker select plans & enroll.

*Note: Steps 1 & 2 are broker functions.*

### GROUP ENROLLMENT PROCESS



#### PROPOSAL

Enter company and employee information, select plans and create proposal.

#### APPLICATION

Fill out the group application and submit.

#### CARRIER APPROVAL

Carrier reviews and approves group application.

#### OPEN ENROLLMENT

Employees/broker select plans & enroll.

#### REVIEW & SUBMIT

Approve and submit employee enrollments.

#### SENT TO MEMBERSHIP

System sends employee enrollment information to membership.

#### ACTIVE GROUP

Group is active.

*Note: Steps 1, 2 & 5 are broker functions. Step 4 is an optional broker function.*



# Partnership

We know what it means to be a good partner. **With a year over year retention rate of 94% or greater within our employer group clients, and 90% of brokers scoring Health Options 8 out of 10 for ease of doing business, we are proud to know that Health Options is delivering high satisfaction among employers and brokers.**

We offer easy access to local, Maine-based account management and senior leadership, and we have solid relationships with the broker community. We are happy to hear endorsements from brokers like you.

Health Options is a pioneer that has your back. You can always count on us to work hard to keep your clients' costs low and deliver the benefits they deserve. Reach out and let us show you how. **Contact Business Development at (207) 402-3353 or email at [BusinessDevelopmentInfo@Healthoptions.org](mailto:BusinessDevelopmentInfo@Healthoptions.org)**

**“Incredible Team and underwriting, excellent communication”**

— V.M.,  
Broker Satisfaction Survey

**“The broker support team is responsive and good to work with. The plan designs and costs are in line with the market demand.”**

— P.W.,  
Broker Satisfaction Survey



# Contact Us

## Business Development:

(207) 402-3353

[BusinessDevelopmentInfo@Healthoptions.org](mailto:BusinessDevelopmentInfo@Healthoptions.org)



## Assistance with Broker Portal:

CONTACT ACCOUNT MANAGEMENT  
OR BUSINESS DEVELOPMENT:

(207) 402-3353

## Member Services

(855) 624-6463



Press 5 for Broker



Press 1  
Group Admin/  
Group Sales

Press 2  
Claims

Press 3  
Other  
Inquiries

[memberservices@healthoptions.org](mailto:memberservices@healthoptions.org)



# Contact Us



**When calling Member services, HIPAA guidelines require the details listed below:**



## **BROKER CALLING ON BEHALF OF A MEMBER:**

- Provide the broker NPN number, your name, the first and last name of the broker (if you are calling on behalf of the broker), and the agency name.
- Provide three complete pieces of the Member information: ID number, first and last name (in that order), date of birth, last 4 of the social security number, address including state and zip code, telephone number with area code, email address.
- Provide a business relationship with the Member if you aren't the broker of record in our system, or the policy has been termed.



## **BROKER CALLING ON BEHALF OF A GROUP:**

- Provide the broker NPN number, your name, the broker's name (if you are calling on behalf of the broker), and the agency name.
- Provide three complete pieces of the group information: group name, group number, group address, or group phone number with area code.
- State a business relationship with the group if you are not listed as the broker of record in our systems.



## **BROKER/ASSISTANT EMAILING ON BEHALF OF A MEMBER:**

- Provide (or must be contained within their email signature) three pieces of information from the agency-broker list: NPN number, Member's name, the first and last name of the broker (if you are emailing on behalf of the broker), agency name, agency phone number, agency fax number or agency address.
- Provide three complete pieces of the Member information: ID number, first and last name (in that order), date of birth, last 4 of the social security number, address including state and zip code, telephone number with area code, or email address.
- Provide a business relationship with the Member if you aren't the broker of record in our system, or the policy has been termed. Once verified, all Member information may be disclosed, including claim information.



# Appendix - Sales Tools

► VIEW MATERIALS FOLLOWING APPENDIX OR CLICK  
ON ANY LINK TO OPEN THE SALES MATERIAL

## **Company Profile**

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