



May 12, 2016

From time to time, BEN-E-LECT will send out informational pieces or bulletins which we call eBlasts. They will be short, generally covering 3-4 issues, informing or addressing current actions or facts that we hope will be helpful.

The intent is to make the benefit plan your employer provides to you easier to access and a better value for you, your staff mates, and your families if covered.

Before we get into the eBlast, let me first say a thank you for the patience and grace extended to BEN-E-LECT and its staff over the past few months. One of the side-effects of the Affordable Care Act is that over 70% of all employers providing group health plans to their employees renewed during the October-December 2015 period followed by the traditionally large renewal months January, and February. I mention this because that caused a slowdown in processes and workflow never before seen in the insurance industry. Unfortunately, it affected the timeliness of our responses and service to employer, employees and to our Broker Partners. It was a hectic time, often overwhelming the most patient of people, so we say thank you to all of your team.

In this eBlast we will discuss impact on and status of claim and administration services, an internal conversion, how to access information, and Empowr™.

But, before I get started, one more time let us say **thank you!**

Empowr™...

Many of you may recognize the term Empowr™ as BEN-E-LECT's web portal for members and employers. It actually stands for "Employer Online Web Resource". Generally, Empowr™ is a covered member's gateway to understanding his or her benefit plan and to follow how claims are processed and benefits are paid. Unfortunately, due to a system conversion, we had planned for over a year and initiated in February, Empowr™ has not been functioning as usual. More about the conversion later.

We know that you need access to information about your plan and the benefits your employer provides to you so until Empowr™ is up 100% live we want to be sure you know who to call and how to access information.

Who to call when you need help...

Every employer contact has a team of people assigned specifically to it. For example, you have a Benefit Advisor "BA" assigned to your employer contact for specific customer service requests and you may contact this same BEN-E-LECT person each time you need help. Of course the difficulty with going to the same BA is that if that BA is on another call, which they often are, you may need to leave a voicemail.

But, there are many other BEN-E-LECT staff to assist you and if your questions or concerns are general in nature you may wish to just ask for anyone in the customer service department. Simply tell our Director of First Impressions (receptionist) that you need to speak with customer service and you will be directed to the next available representative.

If your matter is urgent or complex and you speak to someone other than your BA that team member will make your BA aware so that your issue can be resolved.

We expect Empowr™ to be live again shortly, but until then we do not, and more importantly your employer does not, want you to be without access to care and service.

Our Customer Service Team can be reached at:

Phone 888-886-7973 or 559-733-1240

Email customerservice@benelect.com

Internal System Conversion (what the heck does that mean)...

For more than a year, we have been working on an internal conversion within our BEN-E-LECT claims and administration system. We have processed health, dental, vision, and life plans on our Eldorado Computing System for 15 years and find it to be the best in the industry. But, in December 2014 we felt it was time to make changes (conversion) in our system that we had been delaying for some time, but were certain would provide many efficiencies and advantages for you and us. And it will!

But, wouldn't you know that the conversion preparation would all come together just as we entered 2016 with all of the stuff going on related to the 4th quarter renewals. But, the conversion became a reality. After more than a year of planning and preparation everything was ready to convert. We had no choice at that point but to pull the lever and make it happen. Tough luck, huh!

I tell you this because, while the conversion affected almost every aspect of how we administer and provide service for a client's plan, for the most part no one realized the conversion occurred. All systems for eligibility, claim processing and payments, history, and customer service converted with little or no issue. However, Empowr™, your BEN-E-LECT web portal, went off line so members could not look up their personal information. If members tried to use Empowr™, they couldn't, or at best they could access only part of it. Our IT team is working on Empowr™ and say that it is close to being whole in the next week or so. No offense to our great IT folks but we'll wait to celebrate once it is back up 100% and reliable.

We did not announce the conversion ahead of time because we did not want to concern anyone especially since we intended it to be invisible to everyone. I kind of wish we would have announced it so I could now brag about the success of it. Actually, I would brag about our great staff who prepped and completed a system conversion during the biggest renewal season our industry has ever experienced.

To be frank, we didn't think the majority of our clients utilized Empowr™, and that it was just an "extra" thing we added to our portfolio of available services. We now recognize that many of our valued members use Empowr™ and rely on it consistently. So, you have our commitment that we will bring it back up online as soon as is humanly possible. In the meantime, please give our customer service team a call whenever you have questions or need a little help.

Impact on administration & claim processing...

I know it can sound like an excuse (it even does to me sometimes) but the impact or effect of the 2015 4th Quarter renewals caused havoc and delays in some of our most important services. We are through it all now and back to normal but I wanted to give you a current status report to help you be more aware and able to feel confident again in your BEN-E-LECT plan.

Claim processing...

Currently the team is processing claims received 7-10 days ago, which is our goal. We call that claim turn around. But here is what you felt. From Jan 1, 2015 through Nov 30th 2015, 95% of claims received were processed and paid in less than 10 days. If we extend that period from Jan 2015 through March 2016 the figure drops to 80.1% of claims processed and paid in under 10 days. You can see that the 4th qtr renewals had an impact. But, as I said we are currently at our goal turn-around and intend to stay there.

Administration...

This is the processing of an employer's eligibility changes, adds and terms. Currently the team is processing your eligibility changes in under 10 days. Their stated goal is 7-10 days. But, due to the 4th qtr renewal volume, during the Dec 2015 to Mar 2016 period these changes were taking up to 23 days. That caused members to not show on your billing even though they were actually covered or show on your billing even though they were not covered. This caused frustration to us all but as I said the team is back under 10 days and will remain there. All appropriate adjustments will be, or have been reflected on your billing statement.

Finally...

Looking forward, we know that fourth quarter this year will be less painful because we won't have the same high volume of employers switching carriers, plans, changing benefits and moving. However, we are still taking steps to further simplify processes and streamline our renewals and underwriting as much as possible to help us avoid the experience we all shared in the past few months. We will also be looking for creative incentives and ways to help employers move from a December 1st renewal date to another month outside of December or January. If you have any thoughts or ideas for a creative incentive, please let me know.

BEN-E-LECT considers the employers, employees and brokers it serves as partners in the effort to provide the best benefits possible. I know that sounds strange when related to healthcare, your health plan and in these cynical times. But the truth is that, as a Third Party Administrator "TPA", we have been hired by you, the employer to see that your benefits are the best possible and we do want you to know that you have a partner in BEN-E-LECT so don't hesitate to give a call.