

Self-Funded Administrative Solutions With a Human Touch



We're here to be your third-party administrator



Under a self-funded plan, you establish the right balance between control and risk. With PacificSource, you're getting claims administration, best-in-class clinical services, and a robust provider network.

- Administration services
- Pharmacy and clinical resources
- Stop-loss insurance

Better well-being is good business

PacificSource is committed to collaborating with you to create a healthcare plan that elevates employee well-being with:

- **7** Strategies aimed at increasing healthcare value
- Resources and best practices to ensure high-quality care
- Transparency and flexibility that enable cost savings

We take health personally

Personalized service and member support are at the core of what we do.

We strive to make every interaction with us a positive one: Our local teams help members get the care they need—quickly, completely, and with compassion. We build strong partnerships with providers, so they can coordinate the best care possible. And we invest in our communities to improve access to care and improve the well-being of those around us.

What's in it for you?



Added control Control what happens to your plan.



Customized benefits Address benefit needs and ensure consistency across geographic regions.



Fewer responsibilities Simplify with reduced regulatory requirements.



Reduced taxes Limit insurance premium tax burden.



Optimized cash flow Fund claims only as they're being paid.



Transparency Access claims and financial reporting.

Play to your strengths

When it comes to your organization, you know best. When it comes to administrative services, we bring the depth of resources necessary to help keep your employees healthy and cared for. It's accomplished by working closely with you to identify your unique needs, and then creating a plan that's flexible, stable, cost-effective, and transparent.

Working alongside you with superior service

With PacificSource, you can count on exceptional service and support. Our account managers work alongside you to build and refine a benefit program to meet your specific objectives so that your employees—and your bottom line—get the most from your health plan.

Employers—and their employees appreciate the range of offerings

More than a business component to drive down costs and optimize cash flow, consider the administrative services PacificSource offers to make sure employees are receiving quality, evidence-based, cost-effective care.



Competitive Network Solutions



Claims Administration



Creative Plan Design Options



Total Health Management



Pharmacy Services



Network Contracting







Calculation of COBRA rates



Extensive Data Analytics & Reporting



Telehealth Services



24-Hour NurseLine



Exceptional Customer Service



Online Enrollment



Wellness Programs and Consulting



ID Card Production and Mobile App ID



Core Plan Document with Customized Benefits

Performance by the Numbers

We pride ourselves on friendly, professional service at every level of our organization.



We take making a difference seriously



As an employer, your most pressing challenges around health insurance are for us to address. It's why we're here:

- **7** To get ahead of the rising costs of healthcare
- **7** To create clarity for what you and your employees are paying for
- **7** To keep you informed about what's available and the best fit

To improve affordability for better outcomes, we're laser focused on investing in all the right places:

- Optimizing quality through carefully selected providers
- Aligning priorities around cost reduction through heightened access to care
- **7** Preventing redundancies in care through better member outreach



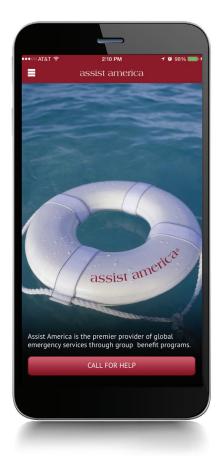


Coverage across the USA

Our provider networks are cost-effective and stable, and **give employees access to high-quality, in-network providers throughout the country.** Any plan you design is supported by a strong network of providers. No matter where your employees are, they're able to get the care they need when they need it.

Global Emergency Services from Assist America®

For employees away from home and traveling abroad, Assist America is a value-added third-party option to cover the need for medical referrals, critical care monitoring and, if plan coverage applies, evacuation to the nearest facility. Once under the care of a physician or medical facility, PacificSource coverage applies.





Choosing a network

Your network choice determines the doctors, hospitals, and other healthcare providers to best serve your employees. Either way, it comes with the convenience of having one point of contact with PacificSource as your administrator—and great healthcare for your employees. See the comparison chart on the right.

Voyager and Navigator from the employee point of view



As our preferred provider organization (PPO), **Voyager** offers our broadest network of providers and allows employees to choose their doctors across a four-state service area and beyond. With its expanded choice of in-network healthcare professionals, **Voyager** is designed to support a company culture that is broad in geography and prefers a more self-directed experience.



With **Navigator**, the member's personal provider navigates care within a well-coordinated network of health professionals focused on the individual throughout their health journey.

How Navigator benefits you, the employer

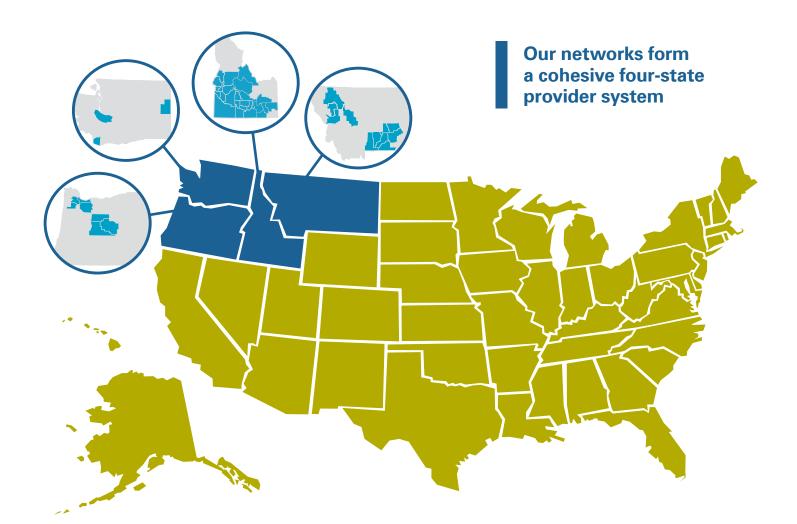
Employees experience seamless accountable care, the result of the efficiencies and expertise of a dedicated team of providers. Navigator benefits you and your employees through:

- Controlled costs
- Clinical integration
- Unified communications

Which network is right for you?

	Voyager	Navigator
Cost	\$\$	\$
Broadest access to in-network providers and facilities	*	
Coordinated-care experience at select provider groups and facilities		*
Primary care doctors, specialists, and hospitals work together as a team		*
Plan allows members access to specialists without a referral	*	*
In-network providers when traveling nationwide	*	*
Out-of-network provider access	*	*

Access to care for wherever you are



Navigator allows member-first access

Navigator is available for purchase in certain counties. Unlike other competing coordinated care options, Navigator members can access in-network care across Idaho, Montana, Oregon, and Washington.

Are your employees traveling beyond the Northwest?

With Voyager and Navigator, either way: When traveling outside the service area, employees are able to stay in-network beyond the four-state enterprise through our partnerships with First Choice Health[™] Network (in Alaska) and First Health Network.[®]

Manage your employees' benefits through our online tools

Secure, convenient access to your health plan



Manage enrollment status

Add or delete members, and update member information.



Run reports

Know who and how many members are in your group.



ID cards

Request ID cards and print temporary ones.



Info on-demand

Get plan documents, summary of benefit coverage (SBCs), and more.



Keep in touch

Expect quick, convenient access to all the answers you need.



Pharmacy Network Coverage

Healthcare works better when information flows easier. By processing pharmacy claims along with the medical services, you're doing a lot more than looking out for your employees. Pharmacy coverage bolsters everything from doctor-recommended medication treatment plans to educating prescribers for better outcomes. It's a level of integration to give us deeper, real-time insight that reduces waste and elevates quality of care.

You have the flexibility to design a pharmacy plan that benefits all of your employees. Ask about PacificSource's Pharmacy Benefit Management offerings. With the buying power of CVS Caremark[®] and the national network of locally developed programs and our in-house customer service team, we're saving employees time and money.



Coordinating evidence-based care for better outcomes



You can expect PacificSource to provide salient analytics and turn them into actionable insights. Armed with the right information, you're able to pinpoint savings opportunities, be more prepared for sudden change, and control expenses based on the specialized care needs of your employee population.

Real-time transparency

You have a dedicated team to assist with questions about stop-loss reporting, submissions, and notifications. Our tools give you dashboard reporting, precise pharmacy updates, along with flexible billing and file-format options.

Clinical services

For better clinical outcomes, specialized teams representing pharmacy, medical, behavioral, and dental health collaborate to review member health from a "whole person" perspective.

Accountable partners

Collaborative and clear accountabilities with providers allow us to ensure quality and alignment of priorities around cost reduction and member outreach. Our reimbursement model emphasizes value over volume; it drives the right care, in the right setting, at the optimal cost.

Large claims

Facility claims over \$10,000 and professional claims more than \$5,000 are automatically routed for additional review before being released for payment.

Care management

You and your employees are taken care of with additional care management support, which includes:

- Support for chronic disease, expectant mothers, tobacco cessation, and more.
- Palliative care coordination for patients—and their families and caregivers—who are confronted with end-of-life conditions.

The Continuum of Care

We use assessment tools to identify an individual's needs and anticipate what might be around the corner. We help remove member obstacles to interact and engage. We use a combination of personal service, proven partner offerings, and technology to provide best-inclass information and decision-support tools. Who benefits? You, and your employees.



PacificSource Healthy Life

Programs that encourage healthy choices and habits.



Condition Support

For members with chronic illness (such as diabetes, asthma, CAD, CHF, COPD).



Utilization Management

For members with specific but temporary care needs (such as pregnancy and birth).

Care Coordination/Case Management

For members with moderate follow-up care needs.



Complex Case Management

For members with more intensive ongoing care needs.

Count on flexibility for a smooth implementation





PacificSource provides a smooth transition throughout the implementation process. A dedicated implementation team coordinates with you to ensure an understanding of plan benefits and administrative needs. The team facilitates everything from employee enrollment to care coordination. The goal? Support a consistent and outstanding member experience.



To assist with initial enrollment, an account manager is available to attend your organization's benefit meetings to answer member questions in person. We're always eager to assist with education on plan offerings and making sure everyone has the tools they need.

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We bring a deep support structure that advocates for your unique needs and preferences. Whatever the size of group and number of variables, we remain flexible and nimble, ready to exceed expectations for a future of ongoing results. PacificSource helps to elevate the employee experience. We work to improve people's health and reduce the cost of care.

Let's collaborate. Together, we'll create administrative solutions for better results. Contact a PacificSource team representative.

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