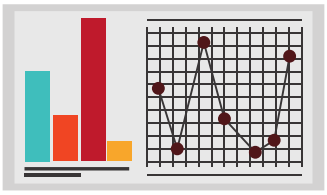
HEALTH BENEFITS CONSULTING SUITE

Bim Group has teamed up with Claros Analytics in order to deepen and expand our consulting capabilities for clients. Three powerful tools allow us to model the impact of plan changes, identify the risk/reward profile of alternative self-funded plan structures, and calculate a group's projected claims experience.

RICH DATA

The model's detailed claim distributions are based on a claims data set that has more than 10 million lives and more than $100 billion in billed charges. The data set is updated annually in order to capture and utilize the most recent healthcare trends. The size and richness of the database allows for the development of claim distributions that reflect 34 medical service categories, 8 pharmaceutical categories and over 200 claim size ranges.



HEALTH BENEFITS CONSULTING SUITE TOOLS

ACTUARIAL ADVISOR

- ✓ Compare, evaluate and customize plan options
- ✓ Determine the expected financial impact of a plan change
- ✓ Understand the claim impact of mergers & acquisitions, provider networks, demographics and stop loss levels
- ✓ Calculate a Manual rate for underwriting negotiation support

EXAMPLE

Evaluation of Plan Design Change Impact

Company Name:	ABC Company				Plan Effective Date:	1/1/2020	
Plan Comparison	Current Plan Design		Proposed Plan Design		Current vs. Proposed		
	In Network	Out of Network	In Network	Out of Network	In Network	Out of Network	
Deductibles							
Individual	1,500		2,500		1,000	0	
Family	3,000		5,000		2,000	0	
Coinsurance	80.0%		80.0%		0.0%	0.0%	
Max. Out of Pocket							
Individual	2,000		4,500		2,500	0	
Family	4,000		9,000		5,000	0	
Copays							
Emergency Room	200		200		0	0	
Urgent Care	75		75		0	0	
Physician - Primary Care	25		30		5	0	
Physician - Specialist	50		60		10	0	
Rx	Retail	Mail Order	Retail	Mail Order	Retail	Mail Order	
Generic	10	10	10	10	0	0	
Brand - Formulary	30	75	30	75	0	0	
Brand - Non-Formulary	60	180	60	180	0	0	
Specialty					0	0	
					Projected Impact		
					Difference	% Change	
Expected Annual Plan Cost	1,174,615		1,015,135		-159,479.73	-13.6%	
Plan Cost Share* (%)	83.2%		74.4%		-8.8%	-10.5%	
Participants' Cost Share* (%)	16.8%		25.6%		8.8%	52.2%	
Participants' Cost Share* ($)	703		1,034		330.48	47.0%	

* Deductible + Coinsurance + Copays; does not include employee contributions

RISK DECISION SUPPORT

- ✓ Enables us to evaluate the opportunity for a group to move from a fully insured to a self-funded plan
- ✓ Evaluate the appropriate specific deductible level and how an aggregating specific corridor can be used to maximize return on premium
- ✓ Monte Carlo simulation runs thousands of plan year claim scenarios that enables credible evaluation of the likelihood of key events and outliers
  - Models likelihood of outperforming Fully Insured
  - Predicts the likelihood of incurring an aggregate claim

EXAMPLE

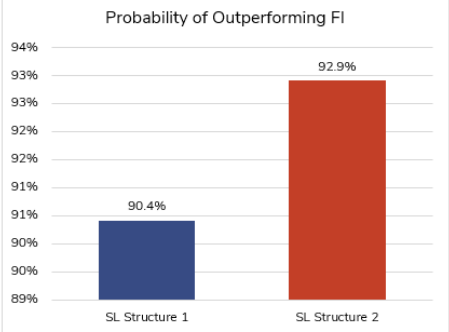
Fully Insured to Self-Funded Analysis

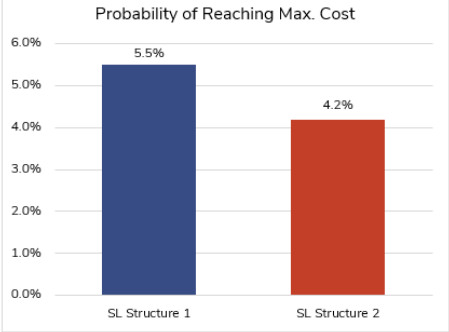
Fully Insured Rate (FI)	SL Structure 1	SL Structure 2
Fully Insured Premium	$1,834,294	$1,834,294

Self-Funding	SL Structure 1	SL Structure 2
Specific Deductible	100,000	70,000
Aggregate Margin	125%	125%
Expected Cost to Self Insure	$1,557,310	$1,562,562
Expected Savings/(Expense) vs. FI	$276,984	$271,732
Probability of Outperforming FI	**90.4%**	**92.9%**
Aggregate Attachment Point	$1,597,588	$1,527,980
Maximum Cost*	$1,821,491	$1,815,232
Probability of Reaching Maximum Cost	5.5%	4.2%

* Maximum Cost is the Aggregate Attachment Point plus Expenses

Expected Cost to Self Insure	SL Structure 1	SL Structure 2
Estimated Claims Payable by the Plan	$1,343,844	$1,291,862
Stop Loss Premium	$227,770	$285,004
Administration Expenses	-$14,305	-$14,305
Total Expected Cost to Self Insure	$1,557,310	$1,562,562





PLAN MIGRATION FORECAST

EXAMPLE

Utilizing up to three years of claims data, the predictive solution normalizes data for large claims, and adjusts yearly for changes in demographics, plan design and other factors. The plan's migration algorithm can then forecast where plan participants are expected enroll given past benefit decisions and simulated future requirements. The solution can also model the impact of participant cost sharing and contributions, allowing benefits managers to complete the annual budgeting process.

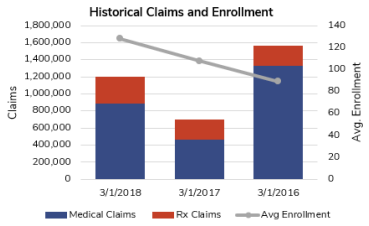
Experience-Base Claims Projection

Projection date	1/1/2020
Projected claims below pooling point - per capita per month	461.41
Projected claims below pooling point - Total	1,509,363

Claims Experience

Period (12 months beginning)	3/1/2018	3/1/2017	3/1/2016
Avg. Enrollment	128	108	89
Medical Claims	884,160	461,484	1,327,728
Rx Claims	311,966	236,139	233,834
Total Claims	1,196,126	697,623	1,561,562
Claims Per Capita/Month*	484.20	358.88	404.35
Experience Year Weight	80.0%	15.0%	5.0%
Composite Per Capita Claim Cost	461.41		

*normalized, and trended to projection date based on adult equivalents.



Large Claims Incurred

Period (12 months beginning)	3/1/2018	3/1/2017	3/1/2016
	105,899		856,286
	97,402		106,975
	89,014		

