

Self-funded Toolkit

How to Pick a Benefits Partner





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Making impactful decisions about benefits and wellbeing ranks high among a business's pivotal choices.

Drafting Requests for Proposals (RFPs) for vendors handling Third-Party Administration (TPA), wellbeing programs, and digital healthcare platforms isn't an everyday task.

With the mental health crisis, escalating healthcare costs, and the quest to attract and retain top talent, employee benefits and health programs remain foundational to any business strategy. The array of options and plan types can leave your benefits team feeling overwhelmed and pose challenges for your employees.

Clarity in benefits is crucial for everyone's success.

Your benefits partner should be laser-focused on enhancing plan design and outcomes, leading to a healthier, more engaged employee community and a more robust bottom line. Simplifying benefit plan structures and enhancing outcomes is key, allowing your HR team to redirect their efforts towards elevating the employee journey and boosting productivity. Achieving this goal entails teaming up with a vendor who offers a flexible, all-encompassing approach that addresses the core components of a successful plan.

As you navigate through evaluating your choices, we've outlined what we believe are the essential elements to consider in a benefits partner to steer you toward a brighter, more empowered future.



Consolidation

No one wants the headache of managing multiple platforms. Your benefits administrator and vendor partners should help solve your platform problems, not create new ones. Look for partners who can:

- Combine benefits management, holistic wellbeing, and comprehensive health navigation into a unified platform, maximizing efficiency and scalability.
- Streamline the experience for internal benefits teams and employees with a single sign-on process, reducing complexity and providing seamless access to care and health platforms.
- Anticipate and guide at-risk members to suitable care management teams through integrated benefit programs that communicate with one another, facilitated by an integrated benefits platform.





Cost-management

A big part of managing a health plan is managing costs. Partner with a TPA who stands guard over your financial assets while offering top-tier care quality.

These partners should empower you and:

- Give you direct access to a range of tools and strategies for effectively controlling costs.
- Through meticulous audits pinpoint fraudulent activities, waste, and abuse, alongside payment integrity checks and extensive claim review.
- Allow you as the plan owner to set tailored audit thresholds, claim review triggers, and prior authorization standards, all expertly managed by the TPA to ensure cost efficiency and quality care alignment.

Data and analytics

As the custodian of your plan, it's essential to take ownership of your data, spanning from claims specifics to financial analytics. Transparent data holds the key to unraveling healthcare costs, illuminating spending trends, and uncovering avenues for savings.

- Collaborate with a TPA that empowers you to make informed decisions and is adept at uncovering inefficiencies and areas of excessive expenditure.
- Maximize your purchasing influence by focusing on effective programs rather than investing in solutions for non-existent issues within your workforce.
- Data serves as a powerful tool offering deep insights into your employee base, enabling the creation of programs that directly enhance their well-being and contribute to potential plan savings.
- You deserve a healthcare plan that is both cost-efficient and accountable to you. Each dollar allocated in your plan should work towards enhancing your population's health and elevating your company's overall performance.



Seamless technology integration

A personalized health platform incorporates best practices seamlessly into benefits plans, maintaining the flexibility for customized programs tailored to brokers' and employers' needs.

- Embracing cutting-edge technology means harnessing the power of artificial intelligence (AI) and social determinants of health (SDOH) to enhance member experiences and outcomes.
- Through an integrative approach, each employer benefits from a uniquely customized platform while adhering to essential best practices for optimal efficiency.



Personalized for the member

Member engagement plays an important role in providing exceptional experiences. Your TPA partner should be an ally in ensuring your members receive the right communication at the right time.

- Don't overlook consistent employee communication or a platform that identifies members promptly and guides them to the right channels.
- Delivering a personalized and distinctive member experience throughout the entire care journey, from service interactions to payment and claims management, is key to fostering strong connections.
- By aligning member-specific health and wellness objectives with health plan data, we can streamline information for members, reducing confusion and boosting their engagement with the plan.





About Personify Health

Virgin Pulse and HealthComp have merged to become Personify Health, the company driven to engage and empower people to live healthier lives. By bringing industry-leading health plan administration, holistic wellbeing, and navigation solutions together, all in one place, we have created the industry's first and only personalized health platform. With decades of experience and global operations, we empower diverse and unique businesses – and diverse and unique people – to engage more deeply in health at a lower cost. Through our proprietary combination of data-driven personalization, science-backed methodology, and concierge-level clinical expertise, our end-to-end platform makes it easier to proactively address people's needs across their lives. With a personalized, holistic, and powerfully simple experience, we are redefining industry expectations and what it means to manage health.



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