Benefitfocus®

Transform Health Data into Actionable Information with Health Insights

INTEGRATE | ANALYZE | FORECAST | MONITOR

Put Your Health Care Data to Work.

Benefitfocus offers a dynamic health care data analytics solution. Our Health Insights software receives claims and member data from multiple sources and transforms it into actionable information, enabling efficient benefit plan management, planning, and analysis. This integration of established software, advanced analytics and purpose-built machine-learning models lets us analyze claims in structured ways to help organizations identify and control health care costs.

Our customers include employers, insurers, TPA/ ASOs and broker/consultants. Health Insights integrates more than 300 data sources, many refreshed daily. We serve more than 50 payer and broker organizations, nearly 5,000 employer health plans, and 4 million members.*

Health Insights provides:

- Health cost transparency for employee benefits stakeholders
- Integration of multiple data sources into one data warehouse
- Data mapping, validation, reconciliation and balancing
- Easy-to-use analytics software for financial and clinical analysis
- Ability to analyze, monitor and forecast health plan costs

* Aggregate count of distinct members across our Health Insights databases as of 3/31/2026.

Data Integration & Warehousing

Getting a complete picture of all your health costs may be challenging. Employer-sponsored health plans typically work with multiple carriers, payers, pharmacy benefit managers and other vendors. Health Insights integrates data from hundreds of sources, consolidating information in one data warehouse to give our customers a clear picture of their total health costs.

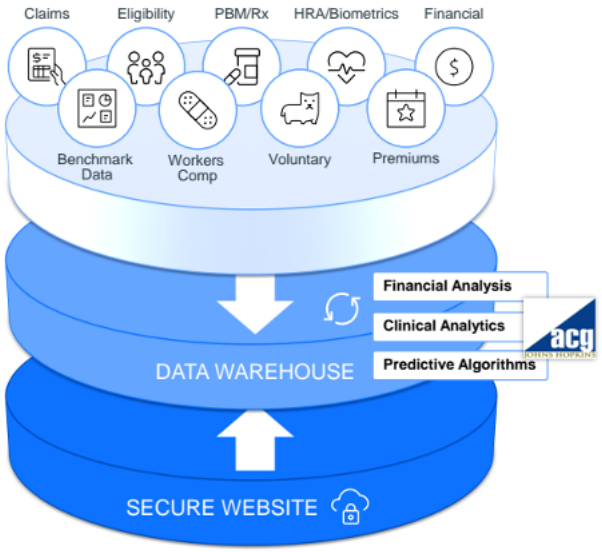
Key Features

- Consolidate data in one place
- Keep your data secure
- Access clean, normalized data
- Provide more opportunity for strategic analysis
- Integrate multiple forms of data
- Data enriched with clinical and predictive modeling
- Access enriched price transparency data*

* Available through our collaboration with Deerhold, Ltd.

Data Management, Validation and Quality

Data is still only data until it is integrated, normalized, validated and "cleansed." We understand the challenges of integrating and validating health and benefits data from disparate sources. Ensuring data quality is perhaps the most important aspect of this process. We do the heavy-lifting with the intent to ensure data supplied by payers, providers and other sources is transformed into actionable information to support informed decision-making. Once data is validated through our quality control processes, it is made available to multiple users through our secure, web-based data analytics software applications.



Data Analysis and Reporting

Health Insights is a web-based software application that provides easy-to-use analysis of health benefit plan performance and flexible reporting options. The application offers the ability to benchmark plan performance and organize health claim data on demand while comparing diagnosis, procedure, provider and other elements. Data can be reviewed at the plan level or drilled down to individual claims and Explanations of Benefits (EOBs). Integrated custom filtering allows users to access specific information on any data element provided. Gain immediate, in-depth and user-friendly access to health plan data via a secure online portal.

Key Features

- Identify high-cost claimants
- Evaluate total plan performance
- Compare plan performance to industry benchmarks
- Analyze utilization trends over multiple periods
- Drill down to procedure, diagnosis, provider and EOB
- Utilize ad hoc report builder with custom filtering

Employers

Health Insights gives employers a comprehensive view of their total health benefits costs, in one location.

- Identify cost drivers and trends
- Analyze procedures, diagnoses and providers
- Automate reporting to CFO, HR and others
- Drill down from plan level to individual claims
- Benchmark plan performance to industry standards

Carriers and TPAs

Use of Health Insights can help drive efficiency and automation in client plan utilization and reporting; saving carriers and TPAs time and resources.

- Access plan information immediately without IT resources
- Integrate multiple employers, offices and regions
- Provide employer group access to analytics and reports
- Utilize a suite of stop-loss and case management reports
- Design and build plan models quickly

Brokers and Advisors

With Health Insights, brokers and advisors have a consolidated view of all their customers and all data sources, which can help increase efficiency and client retention.

- Provide standard and specialized client reporting
- Consolidate clients' data into one data warehouse
- Compare client health plans to book of business
- Benchmark plan performance to industry standards
- Create plan models using actual plan data

Consultants and Vendors

Approved vendors and consultants can access specific information on employers or plans without having to invest in information technology resources.

- Analyze client activity, performance and benchmarks
- Create custom ad hoc reports
- Drill down from plan-level to individual claims
- Provide access to client data at multiple levels
- Access data updated as often as daily

Sample Listing of Analysis and Reporting Applications

The applications listed below are an example of the more than 70 standard data analytics applications available through Health Insights.

Claim Analysis Overview: Graphical summary of claim expenditures

Monthly Cost Summary: Per-month summary of claim expenditures

Normative Comparison Summary: Summary–level view of enrollment, cost, utilization and benchmark information

Utilization Benchmark Summary: Comparison of utilization patterns between plan and selected national normative values

Large Claimant Claim Summary/ Detail: Review high-claims members and the costs incurred

Type of Service Overview: Overview of utilization costs by major types of service

Plan Experience Summary: Eligibility and plan cost summary on a per-month basis

Rank Order Analysis: Summary of top payees, providers, diagnoses, procedures and drugs sorted by services and/or amounts

Shock Claim Summary: Summary of expenses for high-cost claimants, with customizable threshold

Stop-Loss Trigger Diagnosis: Listing of members that have been treated for diagnoses deemed to be indicators of potential high costs*

Claimant Cost Range Summary: Summary of claims cost, including paid, plan payment, member and dependent responsibility

Preventable Conditions: Summary of conditions related to behavior and costs associated with these conditions

Key Utilization Indicators: Summary of employee census and benefits analysis

Claim Cost by Age Group: Review age groups incurring claim costs

Prescription Drug Summary: Prescription costs and dispensing information

*Benefitfocus is not a stop-loss insurance provider.

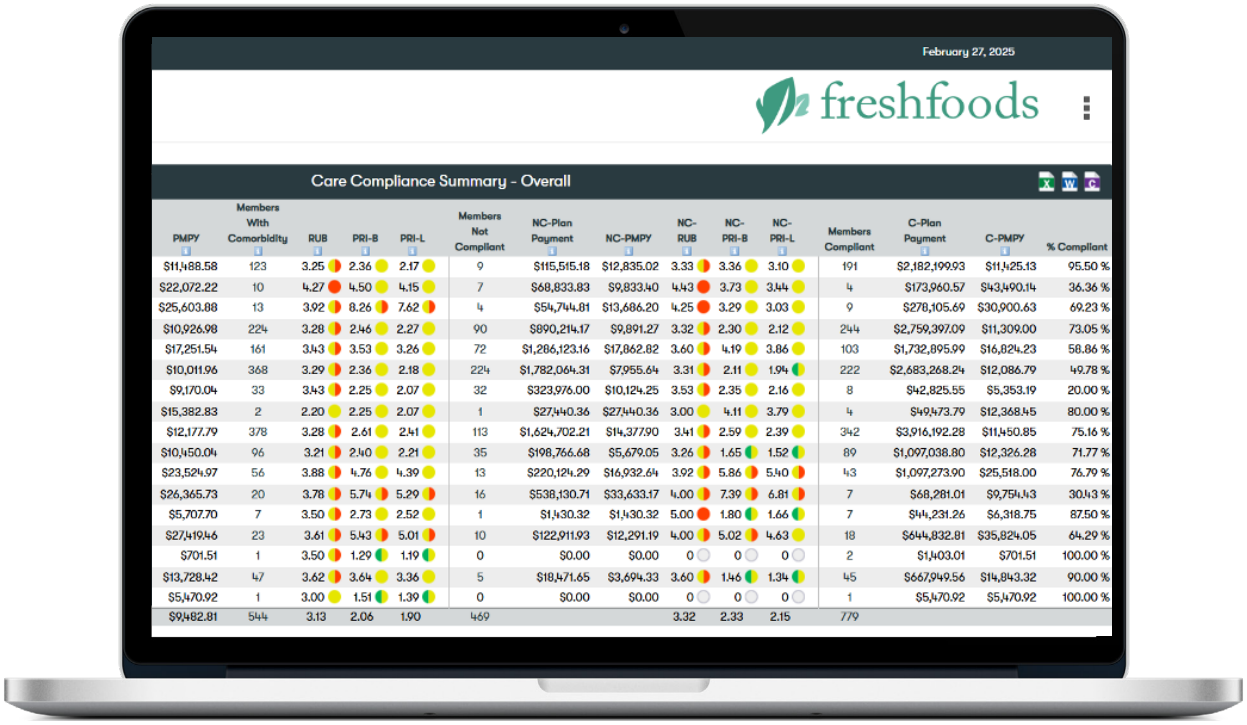
Advanced Clinical Analysis

Featuring the Johns Hopkins Adjusted Clinical Groups® (ACG®) System (version 14.0.1)

Health Insights Advanced Clinical Analysis puts the power of clinical predictive modeling into the hands of Health Insights users. Advanced Clinical integrates key analytical components, including population risk, gaps in care and episode grouping, into our data analytics applications. Health Insights has integrated the Johns Hopkins ACG® predictive modeling engine and benchmark data to allow users to accurately identify members with chronic conditions, assess plan risk and predict future costs.

Key Features

- Identify potential high-risk and high-cost individuals
- Create and monitor member populations such as diabetics or wellness participants
- Produce member scorecards to monitor case management
- Evaluate ROI on wellness, onsite clinic and case management programs



PMPY	Members With Comorbidity	RUB	PRI-B	PRI-L	Members Not Compliant	NC-Plan Payment	NC-PMPY	NC-RUB	NC-PRI-B	NC-PRI-L	Members Compliant	C-Plan Payment	C-PMPY	% Compliant
$11,488.58	123	3.25	2.36	2.17	9	$115,515.18	$12,835.02	3.33	3.36	3.10	191	$2,182,199.93	$11,425.13	95.50 %
$22,072.22	10	4.27	4.50	4.15	7	$68,833.83	$9,833.40	4.43	3.73	3.44	4	$173,960.57	$43,490.14	36.36 %
$25,603.88	13	3.92	8.26	7.62	4	$54,744.81	$13,686.20	4.25	3.29	3.03	9	$278,105.69	$30,900.63	69.23 %
$10,926.98	224	3.28	2.46	2.27	90	$890,214.17	$9,891.27	3.32	2.30	2.12	244	$2,759,397.09	$11,309.00	73.05 %
$17,251.54	161	3.43	3.53	3.26	72	$1,286,123.16	$17,862.82	3.60	4.19	3.86	103	$1,732,895.99	$16,824.23	58.86 %
$10,011.96	368	3.29	2.36	2.18	224	$1,782,064.31	$7,955.64	3.31	2.11	1.94	222	$2,683,268.24	$12,086.79	49.78 %
$9,170.04	33	3.43	2.25	2.07	32	$323,976.00	$10,124.25	3.53	2.35	2.16	8	$42,825.55	$5,353.19	20.00 %
$15,382.83	2	2.20	2.25	2.07	1	$27,440.36	$27,440.36	3.00	4.11	3.79	4	$49,473.79	$12,368.45	80.00 %
$12,177.79	378	3.28	2.61	2.41	113	$1,624,702.21	$14,377.90	3.41	2.59	2.39	342	$3,916,192.28	$11,450.85	75.16 %
$10,450.04	96	3.21	2.40	2.21	35	$198,766.68	$5,679.05	3.26	1.65	1.52	89	$1,097,038.80	$12,326.28	71.77 %
$23,524.97	56	3.88	4.76	4.39	13	$220,124.29	$16,932.64	3.92	5.86	5.40	43	$1,097,273.90	$25,518.00	76.79 %
$26,365.73	20	3.78	5.74	5.29	16	$538,130.71	$33,633.17	4.00	7.39	6.81	7	$68,281.01	$9,754.43	30.43 %
$5,707.70	7	3.50	2.73	2.52	1	$1,430.32	$1,430.32	5.00	1.80	1.66	7	$44,231.26	$6,318.75	87.50 %
$27,419.46	23	3.61	5.43	5.01	10	$122,911.93	$12,291.19	4.00	5.02	4.63	18	$644,832.81	$35,824.05	64.29 %
$701.51	1	3.50	1.29	1.19	0	$0.00	$0.00	0	0	0	2	$1,403.01	$701.51	100.00 %
$13,728.42	47	3.62	3.64	3.36	5	$18,471.65	$3,694.33	3.60	1.46	1.34	45	$667,949.56	$14,843.32	90.00 %
$5,470.92	1	3.00	1.51	1.39	0	$0.00	$0.00	0	0	0	1	$5,470.92	$5,470.92	100.00 %
$9,482.81	544	3.13	2.06	1.90	469			3.32	2.33	2.15	779			

Clinical Prediction, Risk Score & Forecasted Costs

Patient Risk Stratification
Using the ACG® System, each member with a chronic condition is assessed for a variety of risk factors. This sophisticated predictive model allows the population to be stratified for health monitoring and care/disease management.

Analysis of Key Gaps in Care
Specific and standard care patterns within the Johns Hopkins ACG System are used to identify specific members with gaps in medical and pharmaceutical care.

Medical Care Episode Grouping
Episode grouping provides measurement of health care utilization and costs for key medical conditions, allowing comparisons of health care providers across a region or a specialty.

Key Biometric Values
Data supplied by a medical management or health risk assessment vendor, including lab values (cholesterol, lipids, etc.), BMI, blood pressure and more, provides additional clinical data for identification of high-risk members within the population.

Johns Hopkins ACG® System

The Johns Hopkins ACG System offers a unique approach to measuring morbidity that improves accuracy and fairness in evaluating provider performance, identifying members at high risk, forecasting health care utilization and setting equitable payment rates.

The ACG research and development team, characterized by excellence in both research and practice, has been performing risk measurement and case-mix categorization for more than 40 years. Around the globe, adjusted clinical groups are a standard tool used by several hundred private and public insurance plans, provider organizations, consultants and research institutes.

For more information, visit http://www.hopkinsacg.org.

Chronic Condition Compliance

Condition	Treatment Compliant	Non-Compliance Reason
Asthma	No	RX Gap - MPR (127.66%)
Rheumatoid Arthritis	Yes	N/A

Advanced Clinical Data Model
Advanced Clinical Analysis functionality uses the standard Health Insights data integration infrastructure and incorporates the Johns Hopkins ACG® clinical predictive modeling engine.

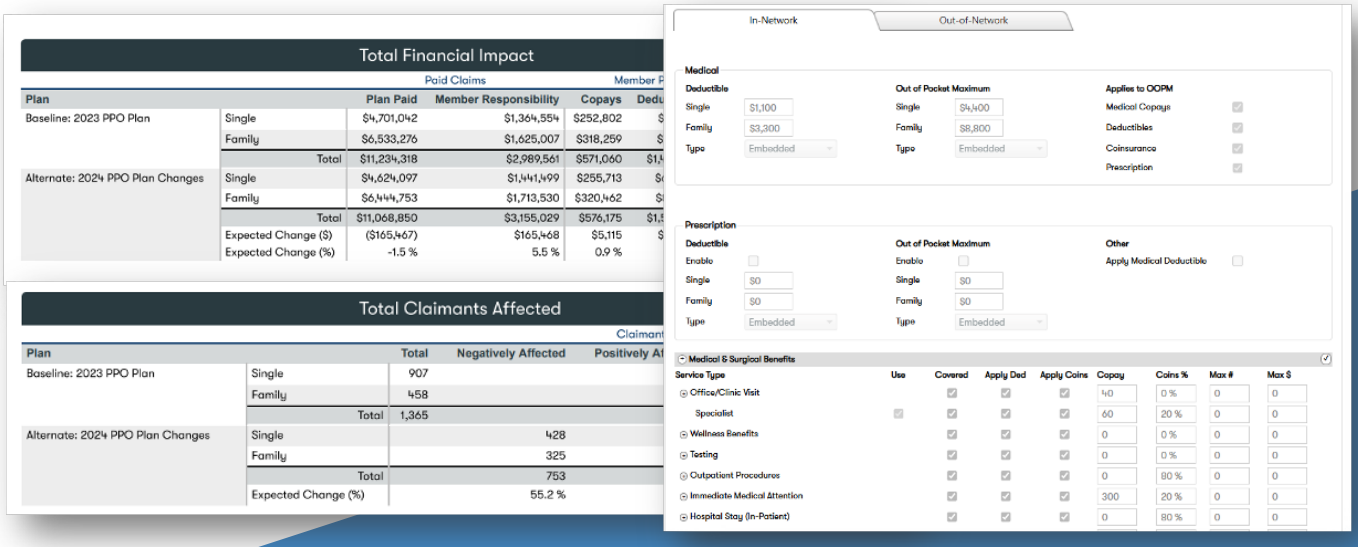
The Johns Hopkins ACG® System

Plan Modeling and Forecasting

Health Insights Plan Modeling and Forecasting is a robust data analytics application for quickly and efficiently evaluating health plan design modifications. This online technology essentially re-adjudicates previous claim history to develop a comprehensive view of future plan costs. The secure application allows employers, health plans, benefit administrators and broker/consultants to see simple or extensive plan design alternatives in minutes. When plan models are complete, they can be saved and posted to a secure website, printed in hard copy or PDF format, or accessed again at a later time to make additional modifications.

Key Features

- Create "what if" models using a variety of considerations
- Analyze variations in health plan design and insurance coverage
- Change co-pay, deductible, out of network and other parameters
- Calculate financial impact on employer and employee health care costs
- Trend for inflation or employee population changes
- Measure ROI on wellness, case management and other programs
- Add or remove benefit options



Don’t guess. Forecast.

With Health Insights Plan Modeling & Forecasting, employers and advisors can see the potential cost impact of plan design changes in near real time. This ability to evaluate changes based on historical data reduces guesswork and avoids reliance on assumptions.

Answer questions like these when making plan design decisions:

1. What would happen if we changed the co-pay amount for name-brand prescription drugs?
2. Which employees would be affected if we increased the deductible for out-of-network services?
3. How would plan utilization change if we adjusted the emergency room co-pay from $50 to $100?
4. How much would the plan save if we eliminated chiropractic benefits?

Enhance Forecasting with Advanced Clinical Predictive Modeling

Advanced Clinical Analysis functionality, featuring the Johns Hopkins ACG® System, enhances the plan modeling and forecasting process by including true clinical predictive modeling. Users can create more in-depth plan models by identifying potential high claimants, and evaluating associated risk and future costs. Advanced Clinical Analysis gives plan designers the tools needed to evaluate all plan options.

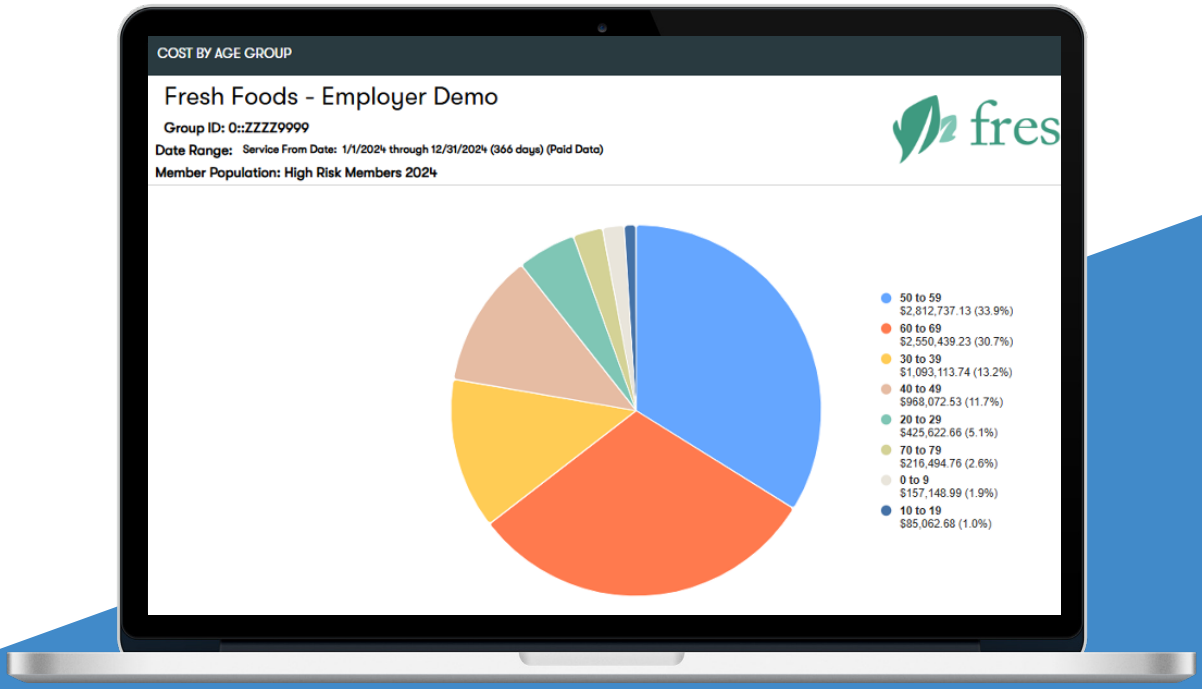
The Johns Hopkins ACG® System

Monitor Population Risk Management Strategies

Employers who carry the risk of costs associated with the health of their workforce and dependents are bombarded with expensive strategies that offer varying levels of evidence of a return on investment. Health Insights has developed a series of algorithms to arrange, question and analyze the data associated with health risk, disease management, pharmacy compatibility and productivity. This allows us to identify underlying cost and risk elements and pinpoint outcomes-driven solutions. Users can easily create member cohorts within the application for use on any report application.

Key Features

- Integrate specific data sets for analysis
- Determine various risk factors and causes
- Hypothesize validation through statistical analysis
- Assess risk mitigation program strategy
- Evaluate the effectiveness of intervention strategies (e.g., wellness, disease management)



In-Depth Risk Assessment and Analysis

Health Insights Population Risk Management provides in-depth data analysis incorporating multiple data sets (medical, pharmacy, health risk, biometric and more) into a relational database. This database and corresponding analysis, reporting and query system enable:

- Our experienced staff to guide you through a systematic approach to help identify employee health risks, evaluate causes, and develop evidence-based strategies to minimize those risks.
- Ongoing measurement of the efficacy of strategies put in place to increase quality of life and productivity for your employees and their dependents and help decrease health care costs.

Vendor Management and Accountability

Intervention solutions for vendor management and program accountability may include analysis to determine:

- What is the financial impact of the intervention programs?
- How effective has the program been at reducing risk factors?
- Has the program increased medication compliance?
- Did the program increase preventative measures among participants?
- Has the program reduced chronic disease severity?
- What is the relationship between health risk assessment measures and overall spending?

Health Insights helps organizations turn data into informed decisions. By combining integrated data, advanced analytics and proven forecasting tools, organizations can better understand costs, design benefit strategies to reduce risks and monitor those strategies to make continuous improvements.

Ready to learn more or see a demo of Health Insights?

benefitfocus.com/solutions/employers/contact

Benefitfocus®