

Question: Do you know if the following abusive practices are contributing factors to your costs?

1. Post Claim Underwriting Practices – Insurer tells the employer there was a large claim or claims in the past year that justifies the outrageous premium increase.
2. Refusal to Release Claim Experience – Ties in with #1. The employer and prospective insurance companies are unable to determine actual claim experience, which stifles competition.
Medical Benefits Costs Flying Out of Control!
3. Narrowly interpreting policy language as respects “Out-of-Network” expenses. Results in unexpectedly high levels of balance billing back to the employee/ insured.
4. Shifty and surreptitious claim dispute appeals process.
5. Accounting inflation of client loss ratios by allocation of certain administrative expenses to all customer claim accounts.



Legacy MedPlans (LMP)

**A Division of:
Legacy Risk Solutions, LLC**

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**Take Control of
Your Employee
Health Plan!**



Phone: 330-659-MEDS

Take Control of Your Employee Health Plan!

Double digit premium increases have become the norm! Sadly, no end appears in sight:

Anthem/WellPoint Inc. stated their intention to raise health insurance rates 39% in CA. (Feb. 11, 2010, Law 360)

It is my opinion that the cost of small group medical insurance (<100 ee's) is disproportionately higher than larger employer costs, due to profit minded abusive practices by group health insurance companies.

2009 - \$400MM judgment against United Health Group Inc. for alleged claim underpayments to plan members/customers.

2010 - \$37MM judgment against Assurant for self serving post claim underwriting practice.

Legacy MedPlans, (LMP), a division of Legacy Risk Solutions, LLC, was created to assist employers to **Take Back Control**. LMP works with your agent and insurance company or supervises a group of agents and insurers through an objective competitive process, to end abusive practices. **Legacy MedPlans sells no insurance products**, assuring the client independence and objectivity.

Mission: Assisting employers to obtain competitively priced, well designed plans

Vision: Committed to ending abusive health insurance industry practices

LMP Deliverables:

- **Empowerment** – Empowers management to make the necessary changes to the plan design in order to maintain an affordable plan into the future.
- **Leverage & Benchmarking** – LMP directs the negotiations with the insurer, with the leverage of working with other employer plans and the knowledge of what other employers offer as to design, costs, and employee contributions.
- **Education of Employees** – LMP is independent and objective, **selling no insurance product**. LMP has the credibility to inform your employees of the options and give them a good understanding as to the future consequences if changes are not implemented.
- **Lower Costs by Seeking Competitive Alternatives** – LMP has the tools that are needed to obtain release of the loss information and direct a transparent competitive process.
- **Knowledge** – At the conclusion of the process, the employer will know what similar employers are paying and the design alternatives available to control costs now and meet future needs.

FEES

Option I—Consultation and Design **\$1,000**

- Includes review of the existing medical plan and recommended design alternatives to meet future needs of the employer and employees.

Option II – Consultation, Benchmarking Cost and Design, Direct a Competitive Process and Employee Education

The following fees are banded by group size and include an **objective** review of competitive proposals and recommendations.

- Groups < 50 eligible ee's – **\$10,000**
- Groups > 50 but < 100 eligible ee's - **\$15,000**
- Groups > 100 eligible ee's – **\$20,000**

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