



10 Reasons to Consider the CPA Insurance Marketplace

1. Choices, choices, choices.

Unless you have a team of robots, your employees are unique – and so are their health care and benefits needs. With traditional small-employer sponsored group health insurance, employers typically must choose one carrier provider and a limited number of plan options. This inevitably leaves many employees without a plan that best suits their needs.

With over 100 different health plans through leading carriers such as Aetna, FloridaBlue (BCBSFL), Humana, United and Cigna, the CPA Insurance Marketplace (Marketplace) private exchange allows employees to choose their own plan. For employers who still want a group plan, there's an option that offers multiple choices.

2. Decision-support tools.

Is it possible to offer more options and keep the decision process easy for employees? Absolutely. This is where the Marketplace thrives. Employees can "Ask Emma," our interactive decision-support tool.

"Ask Emma" represents a whole new approach to benefits shopping, enrollment and education. The tool helps employees make more informed and personalized decisions about a range of benefits – all through an engaging experience.



askEMMA

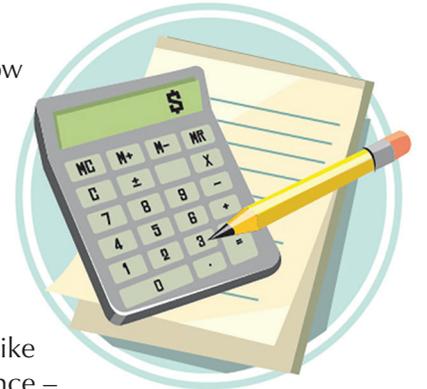
"Ask Emma" guides employees through the buying process by asking a few simple questions, then suggests the plans that fit their needs. Unlike other tools in the market today, "Ask Emma" is fully integrated into the shopping and enrollment platform for a seamless consumer experience.

3. Rein in rising health care costs.

Recruiting and retaining key employees is important to every company, and your employee-benefit program is a key part of the compensation you offer. Because of the rising costs of traditional employer-sponsored health insurance, defined contribution is gaining popularity throughout the U.S.

Employers decide how much, employees decide what works.

With defined contribution, employers give employees a set amount of money to spend on benefits – like an insurance allowance – that they use to shop for coverage that meets their needs. Instead of offering a "one-size-fits-all" health and benefits package, employers empower employees to choose the coverage that's right for them.



Employers set up rules regarding how the money is spent. For example, an employer who gives employees a monthly allowance of \$350 can decide that \$300 can be spent on health insurance and \$50 can be used for dental coverage, a vision plan or other benefits. Employers also have the option to continue offering some plans that are 100% employer-paid, such as long-term disability or life insurance.

4. Avoid annual group renewals.

Employers who offer group health plans know the routine when it's time to renew the health plan each year. Dealing with annual rate increases and changing provider networks is a pain and takes valuable time. "Should we change plans this year?" "Should we raise the deductible to control premium costs?" Employers commonly struggle with these decisions.

With the Marketplace, employers can use our platform of individual health plans that don't require an annual employer renewal. Employees are notified each year to log into their online account, review their health-plan choices and make any desired changes. Employers don't have to choose plans for employees or submit paperwork. Enrollments are handled electronically through the exchange portal.

5. Premium savings.

When comparing similar plan benefits, 2014 average individual major medical premium rates were less expensive than small group health insurance rates in most Florida counties. With each Marketplace proposal, a Member Benefits counselor provides a true cost comparison between your group plan and the comparable plans in the exchange. In most cases, moving to the Marketplace will decrease premiums for employers and employees.

6. Reduced administration.

All changes, additions, terminations and billing administration are handled through the Marketplace Online HR administration portal. Once the exchange is set up, there's little to no paperwork. Through their online account, employees can access their coverage information, print ID cards, search networks and request changes. This allows firm administrators to focus on activities more vital to your business.

7. Turnkey ancillary benefits.

Already plugged into your Marketplace is a voluntary ancillary-benefits platform similar to what a Fortune 500 company offers.

For many small employers, it's difficult to meet ancillary plan providers' contribution and participation requirements. The Marketplace removes these hurdles. Employees may purchase dental, vision, life, long-term disability, short-term disability, AD&D, ID-theft protection, 24/7 telemedicine, pet insurance, auto insurance and more. All are specially priced and completely voluntary for employees.



Administered By:

MB | **MemberBenefits**

Employers may contribute funds to help cover employees' costs – or not. Employers also can remove ancillary plans they don't want to offer. Ancillary benefits are provided by some of the best and most well-known providers in the U.S, including Guardian, MetLife, Lifelock, Teledoc and VPI.

8. Consolidated billing

The Marketplace makes paying premiums significantly easier. All changes made through the Marketplace administration portal automatically are reflected on a consolidated bill that may be viewed online any time. Member Benefits consolidates the billing on one statement for multiple products and providers, allowing employers to make one payment per month.

9. Consumerism

Rather than paying a percentage of the cost of benefits, which employees may overlook, the employer contribution is displayed as a balance in employees' accounts. Employees view the contribution as real dollars and are more involved in the spending process.

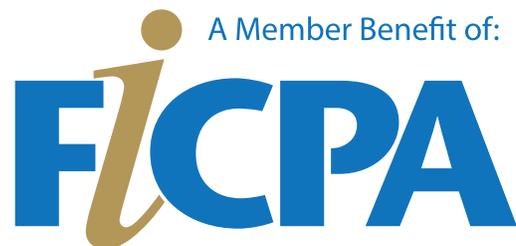
10. ACA compliance solutions

Member Benefits now offers a suite of compliance solutions to help employers navigate the new world of health care and benefits and comply with the complex provisions of the Affordable Care Act (ACA). Our tools are quickly and easily configurable and available on demand, with numerous scheduling and alert options, to meet your business needs. Leverage our team of experts and fully automated tools for ongoing support of your program and ACA compliance. **FACT**

Contact Member Benefits today for a proposal, demonstration and comparison of how your traditional group health plan compares to CPA Insurance Marketplace plans. Call (800) 282-8626 or visit www.memberbenefits.com/ficpa.

© 2014 Member Benefits, Inc.

A Member Benefit of:



Florida Institute of Certified Public Accountants