



EMPLOYER

# BENEFIT ADVISER

Helping you explore today's changing health benefit landscape

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## Federal Form Filing - 5500 & PCORI

This month Allied National will be mailing you the 5500 Filing Information Worksheet to help you with your annual federal 5500 filings and payment of the PCORI fee established under the Affordable Care Act.

Form 5500 must be filed electronically with the Internal Revenue Service by the last day of the seventh month following the end of the plan year, unless an extension has been granted. The deadline is July 31 for calendar-year plans.

Under the rules and requirements of the Employee Retirement Income Security Act, a self-funded employee benefit plan is required to make an "Annual Report" to the Department of Labor using the 5500 Report.

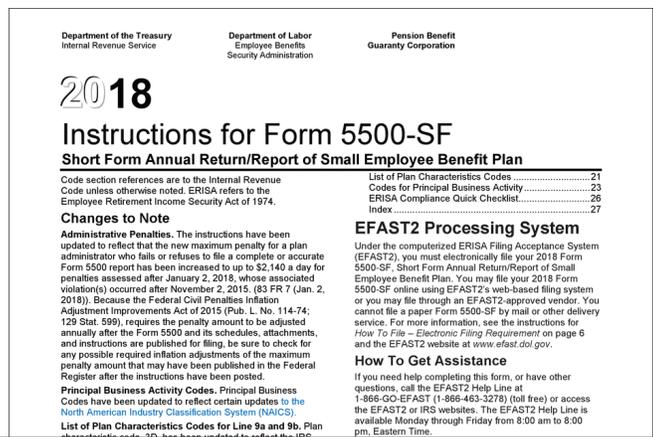
Small employers under 100 lives have a general exemption from making this filing if their plan is fully insured or unfunded.

However, small employers lose this exemption if they are considered self-funded because they are withholding employee funds and these contributions are held by a third party (other than an insurance company), such as a Third-Party Administrator in an account to pay claims benefits. Funding Advantage plans generally fall into this category of a "funded" plan.

Although Allied sends out the data and the information necessary to file the 5500 report, you are required to do this filing yourself. Small employers generally are able to file the 5500-SF (short form) version. This filing information also is available to you and your clients on the Allied Self-Service Site.

For the PCORI fee – this fee is scheduled to end in 2019. The PCORI fee will not be assessed for plan years ending **after** Sept. 30, 2019, however, for non-calendar-year plans that end between Jan. 1, 2019, and Sept. 30, 2019, your last PCORI payment will be due by July 31, 2020.

In an effort to help employers with these filings, we have an informational page on our website at [www.alliednational.com/5500](http://www.alliednational.com/5500) with detailed instructions on how to complete a 5500-SF filing and more information on PCORI. We hope you will refer to this page for assistance.



## Memorial Day

Allied National wishes you safe travels over this holiday weekend. Our offices will be closed on Monday, May 27.

## An Easy Way to Save Claims Fund Money

### Quarterly reports and Intervene Rx are key

The money in your Funding Advantage claims fund is used to pay your employees' medical claims. The less you and your employees use, the better chance you will get a refund and lower rates at your next renewal.

Fortunately, there is an easy way to help keep your claims costs down – monitor your company's prescription drug usage.

According to Allied National's statistics on Funding Advantage usage:

- 90% of prescription fills are generic drugs – representing one-third of overall drugs costs in employer health plans.
- 9% of prescriptions are brand names – representing another-third of drug costs
- 1% of prescriptions are specialty drugs – representing the final third of drug costs

While the overwhelming majority of drug prescriptions are generics, they're very low cost. You can save a lot of money if your employees request generic drugs instead of expensive brand names.

To determine whether your covered employees are relying on the more expensive drugs, check your quarterly Plan Utilization Report available in your Allied Self-Service Site. It provides details on the types of prescription drugs being used by members of your health plan and the costs associated with the drugs.

To help control the high cost of "specialty drugs," Allied has partnered with Intervene Rx, a specialty drug management company. Intervene works with members who are taking these drugs. InterveneRx works with the member to ensure that they're following proper protocols for these expensive drugs that can cost thousands of dollars a month to your health plan. We want to make sure they're benefiting from the drug's use and not experiencing adverse symptoms.

Prescription drugs costs are a significant cost factor in your health plan. This is one of the ways you can most easily impact your costs by encouraging members to seek lower cost alternatives to expensive prescriptions.



## The Tool Needed for a Balanced Benefits Package

Are you aware that one in four Americans suffers from a behavioral health condition? Even more Americans are unaware of the treatment options available to them.

Your Funding Advantage major medical plan provides members with tools from AiRCare to proactively manage their behavioral health issues through Allied HealthCare Assistant and our HealthChoices programs.

AiRCare is a behavioral health management company that focuses on proactively managing health, reducing barriers and improving

outcomes. They provide our members with outpatient coaching and help with inpatient care when necessary.

We could tell you how great they are, but instead listen to what other members are saying about how this program has helped them and changed their lives. Go to [alliednational.com/testimonials](http://alliednational.com/testimonials) and listen to what other members have to say about AiRCare.



## Not Feeling Well? Help is as Close as Your Smartphone or PC

Funding Advantage members have 24/7 access to a physician through their telehealth benefit. There's no need to take off from work or to leave home if you or your loved ones aren't feeling well. Average wait times are less than eight minutes.



Telehealth uses Smartphones, videoconferencing, the Internet and streaming video to treat members who have certain medical conditions. These conditions range from the cold and flu to rashes and migraines. Physicians can prescribe medications where allowed by law and medically necessary.

**Interested?** Major medical users should log into their Member Connection account to access their MeMD telehealth benefit. Look for the "Start a Virtual Care Visit" button. You also may call 855-236-9411. Once you register, you can have a phone or video consultation with a health care provider. Your cost depends on whether you have an HSA (\$49) or non-HSA (\$0) health plan. Either way, you pay less for a telehealth visit than for a traditional office visit.

For Cost Saver members, just call the Teladoc number on back of your Allied ID card and get started feeling better today.