Benefits Science ™
Technologies

Other analytics solutions help you to know things
We provide insight to do things with what you know

■ **DATA WAREHOUSING**

We gather disparate data into a single, secure and elastic data warehouse. Data is normalized to create a relational data base for in-depth analysis and resides in an extremely secure encrypted environment.

■ **DESCRIPTIVE ANALYTICS**

We show what has happened by identifying lag measures, high-level views of total block performance and drill down views of individuals by key metrics. We stratify risk at the member level; what each member is likely to cost the plan over the next 12 months.

■ **REPORTING**

Customized reports provide overview and detail of the health plan faster than ever before – 24 hours after monthly carrier feed.
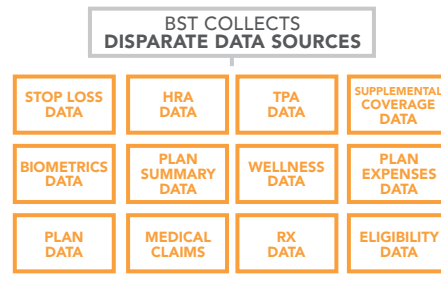
■ **PREDICTIVE ANALYTICS**

We define what is likely to happen next with greater accuracy than traditional methods. Advanced automation allows understanding at a granular level for each plan member. This transforms a tedious manual process into a fast automated one to identify financial drivers of next year's plan.

ONLY AVAILABLE AT BST - IT'S A GAME CHANGER

■ **PRESCRIPTIVE ANALYTICS**

We prescribe specific actions by considering millions of scenarios, removing unforeseen inefficiencies and eliminating less favorable options. In a matter of minutes, BST's Health Plan Optimizer designs plans that meet the specific needs of the members while respecting the budgetary constraints and goals of the employer.

BST COLLECTS DISPARATE DATA SOURCES

STOP LOSS DATA	HRA DATA	TPA DATA	SUPPLEMENTAL COVERAGE DATA
BIOMETRICS DATA	PLAN SUMMARY DATA	WELLNESS DATA	PLAN EXPENSES DATA
PLAN DATA	MEDICAL CLAIMS	RX DATA	ELIGIBILITY DATA

WE NORMALIZE INTO A **DATA WAREHOUSE**

WE ANSWER THREE QUESTIONS

DESCRIPTIVE ANALYTICS

① WHAT HAS HAPPENED ?

CLINICAL & FINANCIAL REPORTING

AND TIMELY, TARGETED INSIGHTS OF **FINANCIAL & CLINICAL COST-DRIVERS**

CUSTOMIZED **REPORTS**

PREDICTIVE ANALYTICS

② WHAT'S LIKELY TO HAPPEN NEXT?

MORE ACCURATE FINANCIAL PROJECTIONS

PRESCRIPTIVE ANALYTICS

③ WHAT TO DO ABOUT IT?

'WHAT IF' SCENARIOS PREDICTIVE SCORES

HEALTH PLAN MANAGERS GET A **CUSTOMIZED, ACTIONABLE PLAN**

HEALTH PLAN **OPTIMIZATION**

BST ADVANTAGE

Our proprietary algorithms and machine learning increase the speed, accuracy and availability of data producing a better view of how the plan is performing.

BST ADVANTAGE

Like other solutions, we provide clinical and reporting packages, but we go further by delivering insights into the financial drivers of the plan. We analyze more of the data, we look at it more often and with more granularity and we link insights to actions.

BST ADVANTAGE

Clinical and performance reports tied to key financial metrics – for timely, actionable insights based on actual plan performance.

BST ADVANTAGE

Our proprietary risk scoring methodologies are augmented by actuarial science, which improve accuracy by 10%-15%. Our optimized classification trees show projected financial costs, enabling cost analysis against the actual risk in minutes not weeks.

BST ADVANTAGE

Significantly expands the ability to evaluate benefits plan options to choose the most cost-effective, coverage-rich combination. BST's proprietary Health Plan Optimizer enables plan owners to consider *what if scenarios*. Our faster and more accurate predictive risk scoring allows consultants to spend more time with their clients.

Benefits Science
Technologies ™

We help you understand the past, monitor the present and design the future.
Time saving insights that keep your plan on track

WE DO THE HARD MATH SO YOU DON'T HAVE TO

■ DYNAMIC/CUSTOMIZABLE
Track plan performance in aggregate or by individual plan or division (location). See any 12 month period by simply changing the filter.

■ MEMBERS
Historical view showing number of members and employees on plan each month along with corresponding contract ratio.

■ CLAIM PAYMENTS
Total Medical and Rx claims paid each month. *Identify outliers driving abnormally high costs.*

■ ISL REIMBURSEMENTS
Automatically track and report by month. *Provides a checks and balances for reimbursements due from Stop-Loss carrier.*
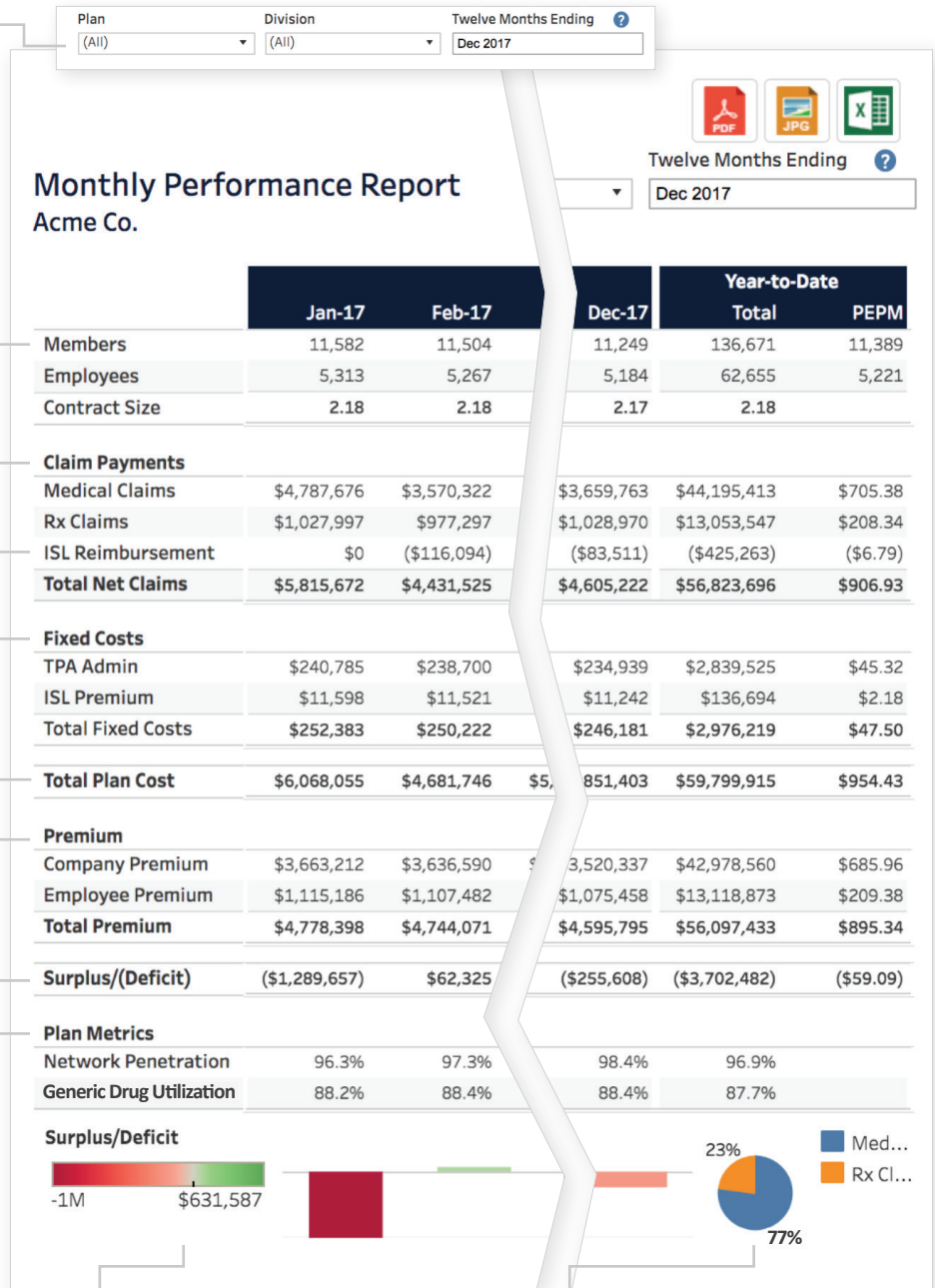
■ FIXED COSTS
Fixed costs accounted for as a line item by calculating the PEPM x census data. *Provides vendor accountability assuring accurate PEPM billing for services provided.*

■ TOTAL PLAN COSTS
Monthly and YTD reporting of total spend for healthcare cost. *No more guessing of what was spent on healthcare, reporting should be accurate to the dollar.*

■ PREMIUM
Premiums to fund health plan split by company and employee contributions. *Provides monthly/YTD overview of cost sharing between plan sponsor and employees.*

■ SURPLUS (DEFICIT)
Monthly and YTD reporting. *No more wondering whether the plan is preforming as planned!*

■ PLAN METRICS
Percentage of healthcare being consumed in network. Percentage of scripts being filled with generic drugs. *Visibility of where members are accessing care and utilization of generic drugs compared to specialty drugs.*

Plan: (All) Division: (All) Twelve Months Ending: Dec 2017

Twelve Months Ending: Dec 2017

Monthly Performance Report
Acme Co.

	Jan-17	Feb-17	Dec-17	Year-to-Date Total	PEPM
Members	11,582	11,504	11,249	136,671	11,389
Employees	5,313	5,267	5,184	62,655	5,221
Contract Size	2.18	2.18	2.17	2.18	
Claim Payments					
Medical Claims	$4,787,676	$3,570,322	$3,659,763	$44,195,413	$705.38
Rx Claims	$1,027,997	$977,297	$1,028,970	$13,053,547	$208.34
ISL Reimbursement	$0	($116,094)	($83,511)	($425,263)	($6.79)
Total Net Claims	**$5,815,672**	**$4,431,525**	**$4,605,222**	**$56,823,696**	**$906.93**
Fixed Costs					
TPA Admin	$240,785	$238,700	$234,939	$2,839,525	$45.32
ISL Premium	$11,598	$11,521	$11,242	$136,694	$2.18
Total Fixed Costs	**$252,383**	**$250,222**	**$246,181**	**$2,976,219**	**$47.50**
Total Plan Cost	**$6,068,055**	**$4,681,746**	**$5,851,403**	**$59,799,915**	**$954.43**
Premium					
Company Premium	$3,663,212	$3,636,590	$3,520,337	$42,978,560	$685.96
Employee Premium	$1,115,186	$1,107,482	$1,075,458	$13,118,873	$209.38
Total Premium	**$4,778,398**	**$4,744,071**	**$4,595,795**	**$56,097,433**	**$895.34**
Surplus/(Deficit)	**($1,289,657)**	**$62,325**	**($255,608)**	**($3,702,482)**	**($59.09)**
Plan Metrics					
Network Penetration	96.3%	97.3%	98.4%	96.9%	
Generic Drug Utilization	88.2%	88.4%	88.4%	87.7%	

Surplus/Deficit
-1M $631,587

23%
77%
Med...
Rx Cl...

■ DATA VISUALIZATIONS
Quick overview visual showing the best and worst months for total plan costs in the reported time period.

■ MONTHLY FINANCIAL RESULTS
Displays medical and Rx spend ratio over the reported time period.

DETAILS WHEN YOU NEED THEM: 150+ REPORTS (MONTHLY/AD-HOC) AND CUSTOM DASHBOARDS