

ACA OPEN ENROLLMENT SERVICES OVERVIEW



We offer a suite of comprehensive services designed specifically for those utilizing an Affordable Care Act (ACA) policy during their journey. Each service provides a unique layer of protection, providing financial security and peace of mind for both Intended Parents and Gestational Carriers. Reach out to your Dedicated Agent to learn more about these services and what is best suited for your unique needs.

ACA POLICY PLACEMENT

Guiding Intended Parents through the entire process of selecting the best plan for their unique journey is at the core of our Policy Placement service. From verifying that preferred providers are in-network to completing the application with the GC, we handle every detail. We ensure the policy is active, binder payments are processed, and the first two months' premiums are accurately applied to the account. This comprehensive service is designed to be both streamlined and time-efficient.

\$525
MATERNITY

PREMIUM BILL MONITORING

This service was created out of requests from agencies, IPs, and GCs. The ACA policy will cancel if the premium payments are not recorded in full, in a timely manner to the GC's account. Our Billing Team oversees the monthly premium payments to ensure the policy remains active and in good standing. If there are any payment issues, we immediately communicate to all parties to prevent any cancellations.

\$350 PER CALENDAR YEAR

\$500 FOR 2 YEARS

JOURNEY CLAIMS MANAGEMENT

If the GC has an Anthem plan, HMO plan, or more than one policy, we highly recommend Claims Management. Our Claims Specialists oversee EVERY aspect of the policy. From vetting every claim to confirmation that all provider bill amounts are accurate, we ensure the policy covers as it should and you are not billed inaccurately. Assistance is also provided with ensuring providers are in-network with chosen medical group for HMO plans. With Claims Management, the PBM service is also included.

\$1750
MATERNITY

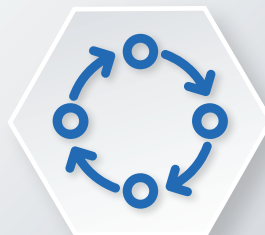


Guiding you through the entire process of finding, vetting, and placing an Affordable Care Act (ACA) policy for your Gestational Carrier, our knowledgeable and dedicated team ensures that you are fully informed about all policy options and that the application process is streamlined.

Our experienced team stands by the services we provide, and policies we place throughout the entire length of your journey.



Our widespread approach for every ACA policy placed allows you peace of mind knowing the maternity coverage is accurate and complete.



**Since 2014,
ART Risk Solutions
has placed over 10K
Gestational Carriers
on surrogacy friendly
ACA policies.**








CALL TODAY!
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ACA POLICY PLACEMENT

SERVICE INCLUDES



INITIAL PHONE CONSULTATION

.....
Introductory phone consultation with experienced Insurance Agent to understand your specific insurance needs.



CONFIRMATION OF IN-NETWORK PREFERRED PROVIDER AND HOSPITAL

.....
Provider verifications are completed for preferred OB GYN and hospital (if provided) to confirm each are in-network for specific plans.



PHONE APPOINTMENT WITH GC TO COMPLETE APPLICATION

.....
Phone appointment is completed with Gestational Carrier and licensed Insurance Agent to complete policy application.



CONFIRMATION OF ACTIVE POLICY

.....
Once policy is confirmed active, specified parties will be provided with confirmation via email.



BLOCK POLICY VALIDATION AFTER POLICY ACTIVATION

.....
Complying with CA Law Family Code Section 7962, a block Policy Validation will be emailed to Agency/Intended Parents within two months of effective date.

\$525



VERIFICATION OF SURROGACY FRIENDLY LANGUAGE

.....
Review policy language and verify that all policy options are surrogate friendly.



PLAN CHOICE GUIDANCE WITH SIDE-BY-SIDE PLAN COMPARISONS

.....
Secondary phone consultation completed to provide guidance in choosing a plan with side-by-side plan comparisons to ease the decision making process.



ON-GOING COMMUNICATION TO SPECIFIED PARTIES

.....
On-going communication via phone and email is provided to specified parties with updates about progress of application process.



CONFIRMATION OF MONTHLY PREMIUM PAYMENTS

.....
Confirmation that monthly premium payments are correctly applied to the policy for the first two months of active policy.



CLIENT PORTAL

.....
IPs and GCs can check on the policy application status at any time, using our ART Risk Client Portal.



CANCELLATION POLICIES:

If request for quote is cancelled prior to application being complete, cancellation fee of \$250 will apply.
If the policy is cancelled after application is completed, the full fee of \$525 will be considered earned by ART Risk Solutions.

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ACA PREMIUM BILL MONITORING

**BEST TIME TO PROCURE:
DURING ACA POLICY PLACEMENT**



You and your Gestational Carrier already have so much to keep up with, it is easy to lose track of payment deadlines. We can take this off your to do list. Our ACA Premium Bill Monitoring Specialists manage all ACA monthly premium payments for your journey, ensuring the policy remains paid and active. The creation of this service was necessitated by an increasing amount of policy cancellations due to premium billing issues.



75% of our ART Risk clients who place ACA policies, use this service.



Limits your financial exposure, providing security and peace of mind.



Saving you time and frustration each month, as we oversee all monthly premiums.

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ACA PREMIUM BILL MONITORING

SERVICE INCLUDES



INSURANCE CARRIER CONFIRMATION

Confirm with insurance carrier that all monthly premiums are paid in full.



LATE PAYMENT NOTIFICATION

Notification to specified parties if a payment is late.



OVERSEE PREMIUM ISSUES

Rectify issues if insurance carrier does not have a payment properly applied.



AUTOMATIC PAYMENT SET-UP

Set-up automatic payment information with the insurance carrier, if desired by Intended Parents or Agency.



RENEW POLICIES

Renew policy for new calendar year if applicable.



MANAGE POLICY CANCELLATIONS

Cancel policy if no longer needed.



CLIENT PORTAL

IPs and GCs can check on the payment status of policy at any time of the month through our ART Risk Client Portal.

\$350
PER CALENDAR
YEAR

\$550
FOR 2 YEARS

If needed for less than 6 months, monthly fee of \$50 to be paid at time of ACA Policy Placement.

CANCELLATION POLICIES:

If cancellation request is received:

Prior to 3 months since policy effective date, a full refund will be provided.

Between 3-6 months after policy effective date, refund will be prorated.

Month 6 or more after policy effective date, the \$350 fee will be considered earned in full by ART Risk Solutions.

If on a two year plan, by month 15, fee is considered fully earned.

If cancelled before 15 months, prorating will be subject to the terms above.



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JOURNEY CLAIMS MANAGEMENT

**BEST TIME TO PROCURE:
UPON MATCHING WITH
GESTATIONAL CARRIER**



We take the burden off of you to solve insurance and provider issues that can arise for maternity and/or newborn claims. Often, correcting errors months after bills and claims are processed will only delay financial completion of the journey. With Claims Management in place, you have the ART Risk team vetting all claims to ensure there is no unnecessary overpayment for medical care.

PERSONALIZED ASSISTANCE



Review of all insurance claims and provider bills to determine the correct payment needed from the IPs, Agency, or escrow account.

FINANCIAL CHECKS AND BALANCES



Routine communication with the insurance carrier(s) and providers to rectify denied claims, Coordination of Benefits issues, and incorrect coding. It is our responsibility to check for accuracy and confirm insurance is paying according to maximum plan benefits.

REPORT OF CLAIMS AND BILLS



Zero balances are requested from all providers and a final report is delivered to appropriate parties once all claims and bills are processed at the conclusion of the journey. You can rest assured there are no unpaid bills.

Over the course of a year, clients have been saved just shy of \$1.5M with ART Risk Solutions' claims management services.

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JOURNEY CLAIMS MANAGEMENT

Did you know: customarily, agencies pay provider bills without checking for accuracy of processed insurance claims and provider bills? Our Claims Management Specialists solve the issues that repeatedly fall on the Intended Parents and Gestational Carriers.

REPEATED INSURANCE PROBLEMS	OUR SOLUTIONS
INCORRECT CODING FROM PROVIDERS	 Communicate with all providers to correct coding issues and resubmit claims to insurance carrier.
HMO MEDICAL GROUP ISSUES	 Coordinate with GC, insurance, and providers to appoint the correct medical group.
EMERGENCIES PROCESSED AS OUT-OF-NETWORK	 Dispute the out-of-network claims and have claims reprocessed as in-network.
INSURANCE PAYMENTS NOT APPLIED TO PROVIDER BILLS	 Work with the providers to revise the bills to the correct amount due.
NEWBORN CLAIMS ON THE GC'S INSURANCE POLICY	 Work with the GC, insurance, and providers to remove claims and apply to the correct insurance plan.

\$500 additional fee (per policy) will be added to above pricing if more than two policies.



Gestational Carrier Local Monitoring
\$500
Service finished upon completion of cycle.



Maternity Claims Management
\$1750
Service completed 8-12 months post-birth (on average).



Newborn Claims Management
\$500
Service is complete upon discharge from the hospital and after the 1st well care visit.

Cancellation Policies:

If confirmation of pregnancy has occurred and Maternity and/or Newborn Claims Management is cancelled due to miscarriage, ART Risk Solutions will evaluate refund/credit dependent on work rendered for current journey, less a \$250 administrative fee. There will be no refunds upon birth of child. Maternity Claims Management service is complete when agency contract ends with the Gestational Carrier and/or final Claims Management Report is submitted to Agency/Intended Parent(s).

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