

A Comprehensive suite of services providing a unique layer of protection, ensuring financial security and peace of mind for both Intended Parents and Gestational Carriers.

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.

> \$575 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 monitors the premium payments made to the insurance carrier, ensuring the policy remains in good standing. If any payment issues arise, we immediately communicate to all parties to prevent any cancellations.

\$350 PER CALENDAR YEAR

\$550 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

ACA POLICY PLACEMENT	\$ 575
ACA POLICY PLACEMENT + 1 YEAR PREMIUM BILL MONITORING	\$ 925
ACA POLICY PLACEMENT + 2 YEAR PREMIUM BILL MONITORING	\$ 1125
ACA POLICY PLACEMENT + JOURNEY PBM + *JOURNEY CLAIMS MANAGEMENT	\$2325

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The Maternity Claims Management fee is \$1750 for one policy. Add \$500 for each additional policy in the GC's name.

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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.

WE STAND WITH YOU

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



COMPREHENSIVE METHODOLOGY

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



EXPERIENCE YOU CAN TRUST

Since 2014,
ART Risk Solutions
has placed over 15K
Gestational Carriers
on surrogacy friendly
ACA policies.



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SERVICE INCLUDES





INTIAL PHONE CONSULTATION

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



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



APPOINTMENT WITH GC TO

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.



CK POLICY VALIDATION AFTER

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.

RIFICATION OF SURROGACY

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

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



FIRMATION OF MONTHLY

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



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 \$575 will be considered earned by ART Risk Solutions.

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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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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.



\$550 FOR 2 YEARS

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



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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FINANCIAL & INSURANCE SOLUTIONS

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**

INCORRECT CODING FROM PROVIDERS

HMO MEDICAL GROUP ISSUES

EMERGENCIES PROCESSED AS OUT-OF-NETWORK

INSURANCE PAYMENTS NOT APPLIED TO PROVIDER BILLS

NEWBORN CLAIMS ON THE GC'S INSURANCE POLICY

OUR SOLUTIONS



Communicate with all providers to correct coding issues and resubmit claims to insurance carrier.



Coordinate with GC, insurance, and providers to appoint the correct medical group.



Dispute the out-of-network claims and have claims reprocessed as in-network.



Work with the providers to revise the bills to the correct amount due.



Work with the GC, insurance, and providers to remove claims and apply to the correct insurance plan.



Gestational Carrier **Local Monitoring**

Service finished upon competion of cycle.



Maternity **Claims** Management

Service completed 8-12 months post-birth



Newborn Claims **Management**

Service is complete upon discharge from the hospital and after the 1st well care visit.

*The Maternity Claims Management fee is \$1750 for one policy. Add \$500 for each additional policy in the GC's name.

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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