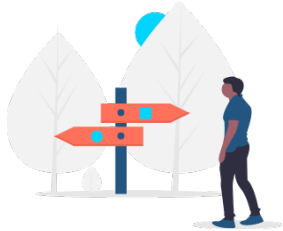


Advocacy Solution

Athos Health Product Overview

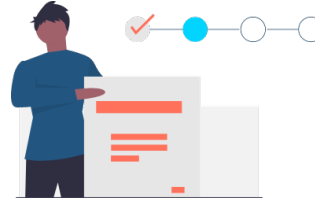
Support for your people when they need it

Athos is a healthcare advocacy company focused on helping employees and their families work through the financial complexities of the healthcare system.



Pre-Authorization Appeals

We help employees fight denied services by supporting them through the appeals process with the carrier.



Medical Bill Review

We find errors or issues with medical bills that might otherwise be overlooked and work to fix the mistakes.



Denial Support

When denials or large out-of-pocket medical services occur, we appeal insurance company decisions and negotiate better prices.



Out-of-Network Negotiations

Our advocates help employees navigate their healthcare benefits to ideally avoid or at least limit the impact of surprise medical bills.



Unaffordable Bills

Many employees can't afford their out-of-pocket costs, we find ways to lessen the financial burden through financial assistance programs or payment plans.



Prescription Drugs

We work with pharmacies and drug manufacturers to find opportunities for your employees to save money on their prescription drugs.

Take healthcare off your HR teams' plate

HR professionals are on the frontline of daily healthcare questions, and often they have little support in directing employees to the help they need.

Our team handles your employees' questions and issues, taking the burden off your human resource team while feeling confident employees are getting the healthcare support they deserve.

I qualify for an experimental procedure, is it covered?

Is this provider in network?

Do I need a pre-auth for this procedure?

My claim was denied, what do I do?

Does my office visit count as preventive care?

I can't afford my deductible and coinsurance, what are my options?



“Fantastic service, Athos paid for itself.”

- Lisa, Human Resource Manager

One end-to-end platform to make it simple



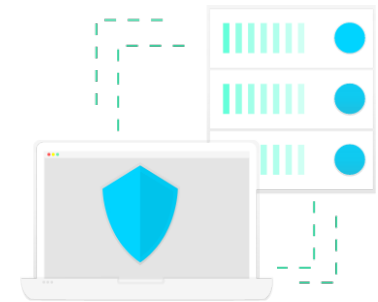
Communication

We make it easy for members to connect with an advocate by providing a platform to streamline document uploads, status updates, and manage conversations.



Education

Our library of self-help documentation and exclusive resources helps members make confident healthcare decisions. This includes a video series we did in partnership with KARE 11 a local NBC affiliate called healthcare hacks.



Security

Our secure web app provides members with the confidence that their personal health information is secure and kept private.

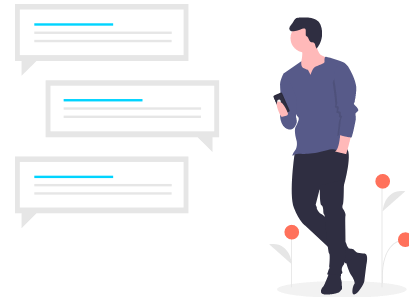
Work with an Advocate your way

We know each member is different, and so is their preferred method of communication. Our platform provides multiple communication channels that allow advocates to customize support to meet their unique needs.



Email

Members can connect with their advocate directly via email or submit a request to a generic email address
help@athoshealth.com



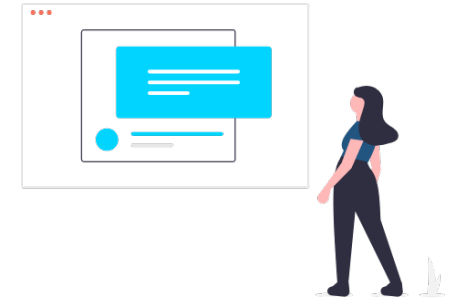
Text (SMS)

Our platform also supports SMS text messaging allowing members to directly communicate with their advocate



Phone Call

We have a toll-free number that members can use to contact us. In addition, each advocate has a personal line that can be used to contact them directly



In App Messaging

Members can reach out for help in the app via chat functionality or direct messaging creating conversations streams that are visible in their account history

“The service from Athos Health is GREAT! Thanks so much for the support through this stressful and confusing process. I highly recommend your service to my co-workers who share the same healthcare insurance provider”

- Cecelia, Member

Customer Experience

Filing an appeal for a denied claim

- Claim: Behavioral Health
- Cost: \$12,000
- Issue: Inpatient treatment was denied as not medically necessary by the plan administrator

1

Member contacts us and submits an EOB and summary of the problem

2

Athos gathers information from the member, insurance carrier, and provider

3

Athos drafts appeal letter highlighting the issue that the provider made on the claim

4

Athos submits the appeal and works with insurance company to refund the member

Customer Experience

Reducing out-of-pocket pharmacy drug costs

- Drug: Capaxone
- Copay: \$250 per Fill
- Issue: Employee spouse takes a specialty drug to treat MS. The plan has \$250 copay for specialty drugs.

1

Member contacts us and provides information about the drug and the price

2

Athos contacts the drug manufacturer and requests a copay card application

3

Athos works with the member to complete and submit the application

4

Athos monitors the program and enrollment then notifies members if/when benefits reset

Engaging content tailored to your members

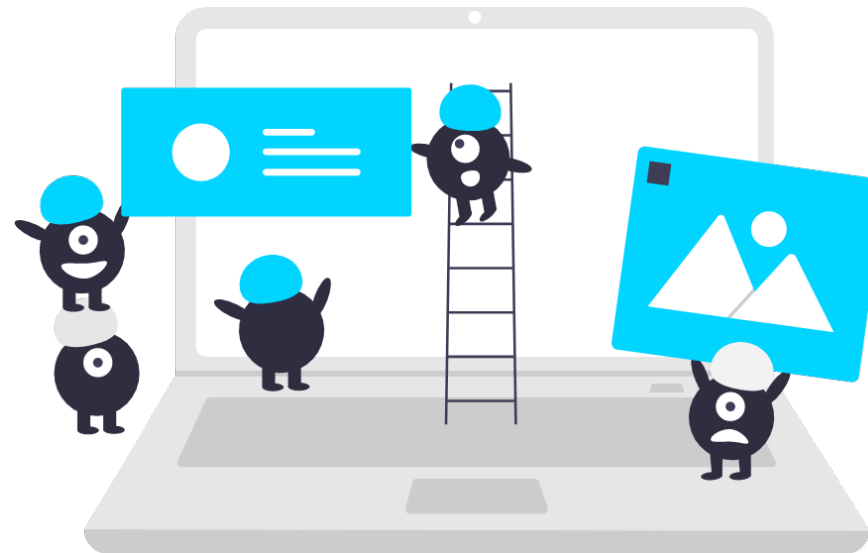
Each company we work with is unique in their needs. We customize our content to be engaging, relevant, and useful for your employees.

Insurance Basics

Members sometimes need a refresh on the basics, like the difference between a copay, deductible, and coinsurance.

Plan Overview

Healthcare plans change almost every year, we educate your employees on what has changed and how it may impact them.



Current Trends

Healthcare is ever evolving. Between the rise of hospital-based clinics and the current COVID Pandemic it can be hard to keep up with what is covered and how much it costs.

Preventative Action

When gaps in coverage or other issues arise, we provide context and messaging to help members avoid these problems in the future.

Getting started is easy

We make the onboarding process simple. You will just need to provide a few key pieces of information to get up and running. And did we mention the cost is only **\$2** a month per employee?! **If only healthcare was this simple and affordable...**



Employee Data



Plan Documents



Insurance Contacts

Member Case Studies:

We'll examine real problems encountered in the world of healthcare and show how our advocates have helped solve them for members.

How We Help: Denied Claims

A member has PET Scan to determine the progression and effectiveness of her cancer treatment.

Problem

Blue Cross Blue Shield denied the claim because it was determined the doctor did not follow the medical policy when ordering the test. Member received \$6,300 bill.

Solution

We pinpointed the denial reason, then coordinated with the member's doctor to gather the clinical information and supporting justification to appeal the denial.

Value

We were able to overturn the denial and Blue Cross Blue Shield processed the claim. This saved the member \$6,300 and considerable time and stress.

How We Help: Out-of-Network Claims

A truck driver was on a delivery out-of-state when he became seriously ill at a rest stop. He was taken by ambulance to an in-network hospital and had emergency gall bladder surgery.

Problem

While the hospital was in-network, the surgeons were not. After Blue Cross Blue Shield paid the in-network rate, the member was billed \$46,000 by the surgeons.

Solution

We negotiated with the surgical group for a more reasonable rate based on industry benchmarks as well as the member's ability to pay.

Value

We were able to reduce the bill to \$4,000 and put the member on an interest free 18-month payment plan. The member went from facing bankruptcy to a bearable financial burden for a necessary medical event.

How We Help: High Cost Specialty Drugs

A member with rheumatoid arthritis was prescribed Enbrel by a doctor as treatment.

Problem

The self-insured employer's plan has a \$250 copay which makes the drug difficult to afford.

Solution

We signed the member up for a program where the manufacturer covers all but \$5 of the copay. We also ensured the plan would accumulate the benefits correctly.

Value

We reduced the members out-of-pocket expenses by \$245 per month, and if the member exceeds their out-of-pocket maximum then the additional savings accrue to the plan.

How We Help: Cheaper Generic Options

A teenage boy taking 30 mg of extended release generic Adderall daily to treat his ADHD.

Problem

Their employer sponsored plan has a \$120 copay for generic Adderall, while the plan pays approximately \$130.

Solution

We identified a discount program where the member could buy the same prescription from the same pharmacy for a \$45 cash price by not using insurance.

Value

The family saved \$75 per month. In addition, since the prescription did not go through insurance the employer's plan saved \$130 per month.

How We Help: Expensive Denied Drugs

A woman with Asthma has tried several drugs, but experienced side effects. She found a drug, Fasenra, which successfully treated her Asthma.

Problem

The employee's pharmacy plan denied the drug, and a single dose cost over \$4,000 making it unaffordable for the member to continue to take the prescription.

Solution

We worked with the manufacturer to identify a "Denied Patient" program which provides drugs at no cost to the member or the plan.

Value

This woman received the treatment she needed at no cost, and the plan did not have to pay for a high cost prescription.