



HPIEx HEALTH FAQ

Which organizations are eligible to participate in HPIEx Health?

Organizations must be a member of Housing Partnership Network and have at least 50 enrolled employees.

Will the switch to disrupt coverage, provider networks, and/or plan design?

Working with our transition team, new members receive dedicated service to transition employees with limited or no coverage or provider interruptions. HPIEx Health provides concierge level service to take the burden off the HR team by answering billing, provider, and cost analysis questions.

How is plan design determined?

HPIEx Health works closely with human resources to create a plan specifically for your organization with the expiring plan as a point of reference. In subsequent years, enhanced access to data will help you make informed coverage enhancements and take control of plan design.

What is HPIEx Health's service area?

HPN's network is nationwide. HPIEx Health works with networks across the country to provide coverage wherever members have employees.

Will switching to HPIEx Health add to our HR Department's workload?

HPIEx partners assist with open enrollment making the transition as seamless as possible. Working collaboratively, we develop the best strategy for messaging and transition. For future years, the HR team will have more data to enhance the health plan. Time spent negotiating renewal terms will now be spent strengthening the medical plan.

What is the process for joining HPIEx Health?

HPN members with over 50 enrolled employees can join at any time during the year at their existing effective date. Organizations are guided through the transition process by our experienced team. Generally, six months is ideal for a smooth transition, but it can be accomplished in as little as 4 months. Sample timeline below.

| New effective date | Milestone(s) |
|---------------------------|--|
| 6 months prior | HPIEx staff and partners start process |
| 4 months prior | Determine your plan design |
| 2-4 months prior | Review rates, adjust plan design and determine choice of network |
| 90 days | Officers execute contractual agreements |
| 45-60 days | Open Enrollment takes place |
| 15 days | Estimated healthcare and stop-loss insurance premiums due |
| 30 days after | Adjusted final enrollment and stop-loss insurance premiums due |

Who Handles Broker Services?

The exclusive broker to HPIEx Health members is [IMA Financial](#). IMA has an experienced team providing transparency, excellent service, and are experts with medical captives and benefit coverage. IMA is employee-owned and a top five national independent brokerage.

Bottom line, what is the financial advantage of HPIEx Health?

Remove your organization from the yearly struggle of deciding how to keep costs level to the prior year without decreasing coverage and increasing employee deductibles. In HPIEx Health, your organization budgets for expected claims removing the insurance company profit margin. Your organization will no longer be subjected to compounding premium increases of the traditional market.

Long-term Cost Control



For more questions, contact Brendan Dolan, HPIEx President at dolan@housingpartnership.net