

VIRTUOUS BENEFITS



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# HOW TO REVERSE ENGINEER YOUR HEALTH INSURANCE – AND ESCAPE THE ANNUAL RENEWAL INCREASE TRAP



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Presented by  
**Angel Saucedo**  
**Neer Patel**  
**Dr. Richard Berry**

Raymond James is not affiliated with and does not endorse the opinions or services of Angel Saucedo, Neer Patel, or Dr. Richard Berry.

# ANGEL SAUCEDO

Angel Saucedo has been an insurance advisor for over 15 years, he's worked for agencies of all sizes from startups to publicly traded companies. As a published author he's always seen the value of constantly learning and finding creative solutions. Currently he's the Senior Partner at Virtuous Benefits, an insurance agency that couples DPC memberships with ACA compliant health plans. They have successfully helped companies lower the cost of their health insurance by centering them around DPC and Open Access health plans. He understands the struggle businesses have to maintain a profit but has always seen the tremendous impact a comprehensive group benefits package can have towards a company's success. He believes taking care of one's employees is a fiduciary investment which creates a better work environment and increased productivity.



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# NEER PATEL

Neer Patel is an engineer by degree, but an entrepreneur at heart. Neer and his wife, Dr. Katriny Ikbal, opened their Direct Primary Care practice in 2015. Neer also owns Virtuous Benefits, a boutique benefits firm that helps employer groups break free from the broken health insurance system by teaching them a long term strategy on how to take control of their ever rising healthcare costs. This proven strategy is being implemented by linking employers with hundreds of DPC physician practices across the country.



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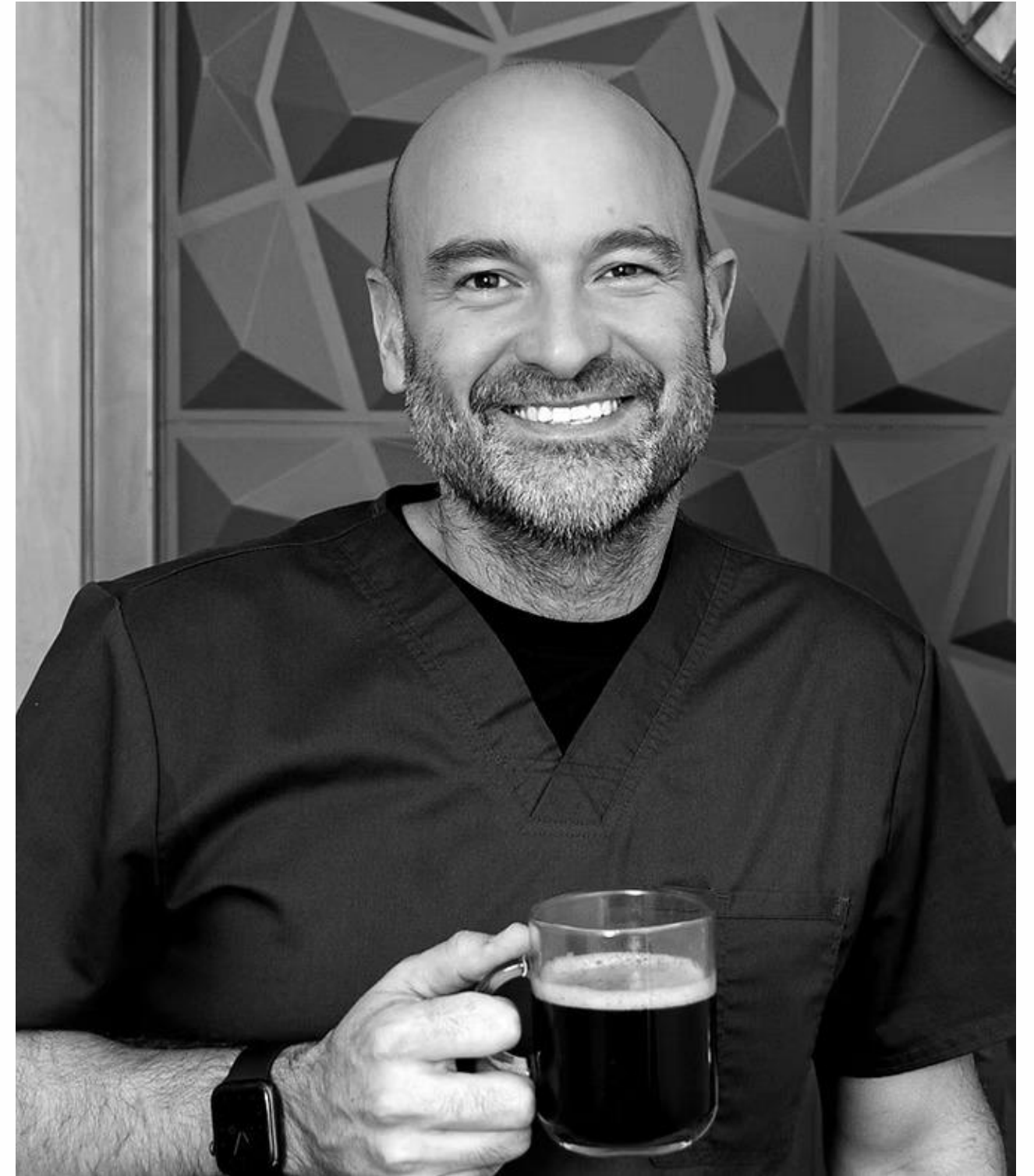
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# DR. RICHARD BERRY

**Dr. Richard Berry, MD, is the Owner and Chief Executive Officer of Maple Health, bringing over 13 years of clinical experience to his leadership and patient care.**

**He founded Maple Health with a vision to restore the patient–provider relationship through the Direct Primary Care model, focusing on accessibility, transparency, and personalized care.**

**Dr. Berry leads Maple Health with a commitment to high–quality medicine, meaningful relationships, and an exceptional patient experience.**



**VIRTUOUS BENEFITS**

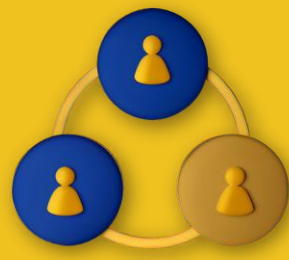


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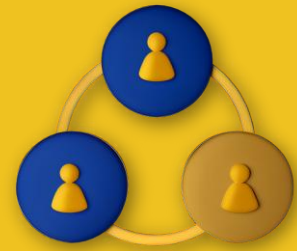


# HOW DOES TRADITIONAL HEALTH INSURANCE WORK?





# WHAT DOES THE TERM 'FULLY INSURED' HEALTH INSURANCE MEAN?



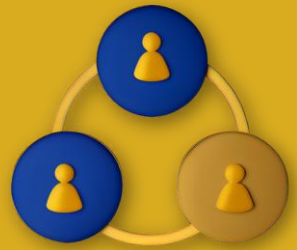
**A fixed premium that covers employees medical claim expenses**

## HOW DOES TRADITIONAL HEALTH INSURANCE WORK?





# HOW DOES AN INSURANCE COMPANY RATE PREMIUMS?

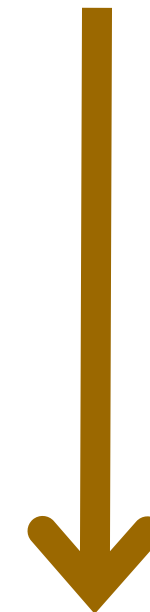


**< 50 Employees**



**Name, date of birth,  
gender, zip code**

**50+ Employees**

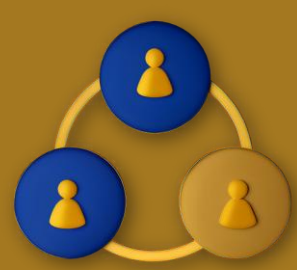


**Claims data or renewal**

## HOW DOES TRADITIONAL HEALTH INSURANCE WORK?



# HOW DOES A 'NETWORK' BASED HEALTH INSURANCE PLAN WORK?



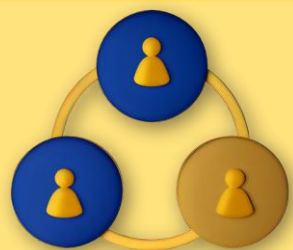
**Carriers hide their pre-negotiated contracts with providers and facilities which leave consumers in the dark with no legal right to see how these contracts are written or provide any say in the matter**

## HOW DOES TRADITIONAL HEALTH INSURANCE WORK?





WHEN A COMPANY'S HEALTH PLAN HAS A GOOD YEAR WITH MINIMAL TO NO CLAIMS, WHO KEEPS THE UNUSED PREMIUMS?

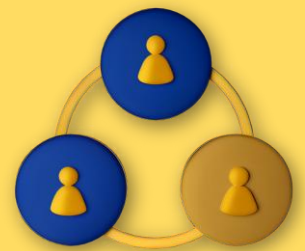


- **Executives & Shareholders!**
- **Credit towards bad years with significant claims?**

**HOW DOES TRADITIONAL HEALTH INSURANCE WORK?**



# HOW DO TRADITIONAL BROKERS/ADVISORS GET PAID?



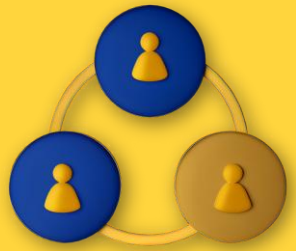
- **Commission as a percentage of monthly premiums**
- **Incentives and Bonuses**
- **Are their incentives aligned with employer objectives?**

## HOW DOES TRADITIONAL HEALTH INSURANCE WORK?





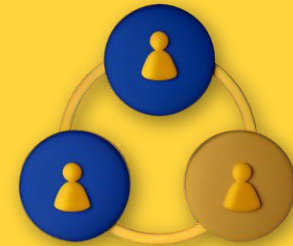
# WHERE DOES DPC FIT IN THIS TRADITIONAL MODEL?



**It doesn't!**

## HOW DOES TRADITIONAL HEALTH INSURANCE WORK?





1

2

3

4

5

# SELF-FUNDED HEALTH PLANS BUILT AROUND DPC



1

# HOW DOES A SELF-FUNDED HEALTH PLAN RATE PREMIUMS?

Based of health or claims  
history of the group

## SELF-FUNDED HEALTH PLANS BUILT AROUND

## DPC



1

# REMOVING THE NETWORK

Introducing Reference Based  
Pricing (RBP)

2

SELF-FUNDED  
HEALTH PLANS  
BUILT AROUND

DPC



1

EMPLOYEE

EDUCATION IS

2

CRUCIAL TO SUCCESS

- Heavy education around DPC should foster a minimum of 80–90% participation in a DPC health plan
- Education around RBP helps employees understand that all providers and facilities across the country are considered “In-Network” because they accept cash payments

3

SELF-FUNDED

HEALTH PLANS

BUILT AROUND

DPC





<b>Topic</b>	<b>DPC</b>	<b>Hospital systems</b>
<b>Patient to provider ratio</b>	<b>600 to 1</b>	<b>2,500 to 1</b>
<b>New patient wait time</b>	<b>24hr</b>	<b>8 months</b>
<b>CPE Labs</b>	<b>\$16</b>	<b>\$600+</b>
<b>Procedures</b>	<b>No charge</b>	<b>\$\$\$\$\$</b>
<b>Appointment length</b>	<b>30-60 min</b>	<b>10 mins</b>

1

2

3

## HOW TO BUILD THE 'RIGHT' INCENTIVES AROUND DPC

Labs/Imaging/Generic  
Medications covered at 100%  
when ordered by the DPC  
physician

4

SELF-FUNDED  
HEALTH PLANS  
BUILT AROUND  
DPC



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## INCORPORATING STOP LOSS INSURANCE

- Eliminating financial risk to Employers and Employees
- Employee vs. Employer Deductible
- Claim Fund Exposure

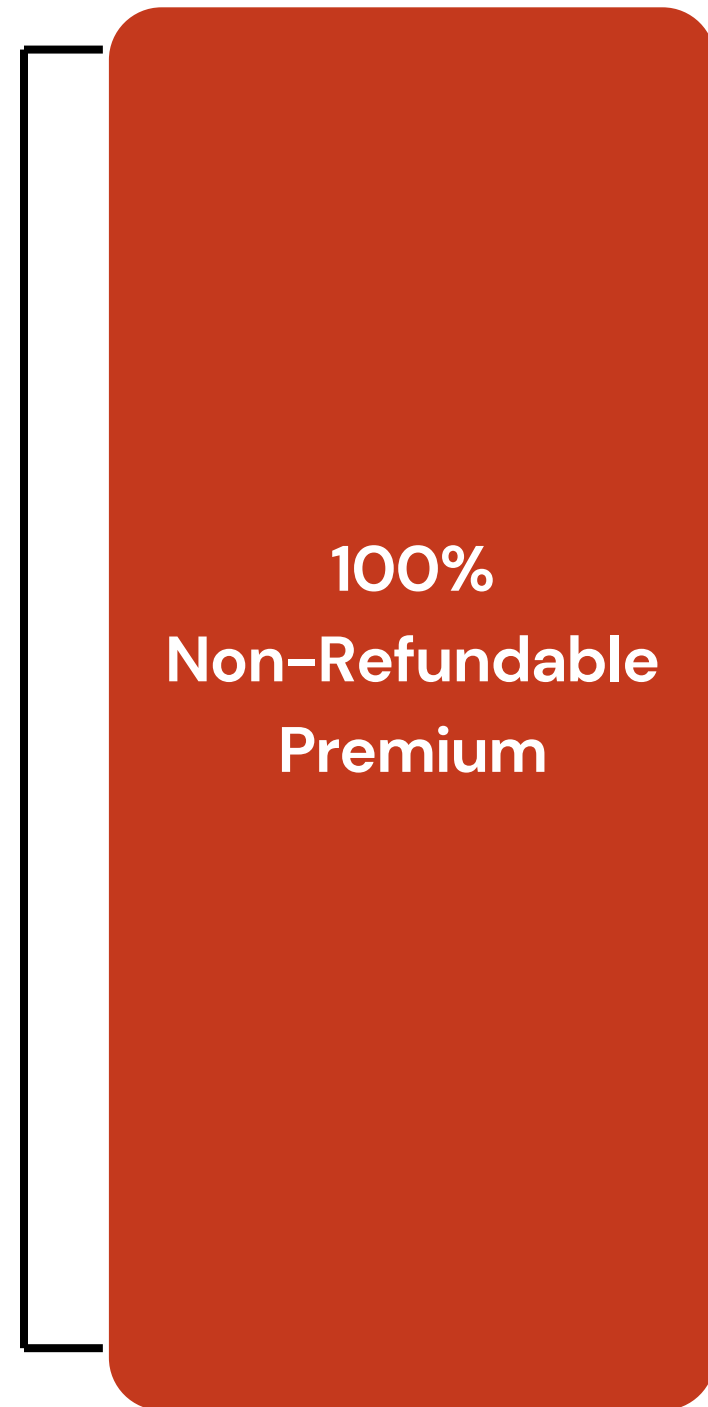
SELF-FUNDED  
HEALTH PLANS  
BUILT AROUND  
DPC



# FULLY INSURED

Premiums are rated illogically without providing the carrier with any health information

The maximum cost of a fully insured plan is the total of all premiums paid



# SELF-FUNDING



Savings will result if claims are at or below the expected level

The maximum cost of a self-funded plan is the sum of:

- actual claims less stop loss insurance reimbursements
- stop loss premiums
- administrative expenses & other services



# RETURN ON INVESTMENT





# **DPC MEMBERSHIPS PAY FOR THEMSELVES**

**Employer keeps any unused premiums  
(AKA – The good claims years)**



# LONG-TERM STRATEGY

- BEHAVING LIKE YOUR OWN HEALTH INSURANCE COMPANY
- PAYING LESS FOR STOP LOSS INSURANCE BY PUSHING UP THE LIMITS YEAR OVER YEAR
- INCREASING EMPLOYER CONTRIBUTIONS FOR EMPLOYEES AND EVEN DEPENDENTS
- UTILIZING HEALTH PLAN SAVINGS TO INCORPORATE PAY RAISES FOR EMPLOYEES



# VETTING HEALTH INSURANCE BROKERS/ADVISORS



HOW WELL DO THEY  
UNDERSTAND DPC?

Are they a DPC patient  
themselves?





HOW MUCH OF THEIR  
BOOK OF BUSINESS IS  
WITH 'FULLY INSURED'  
HEALTH PLANS?





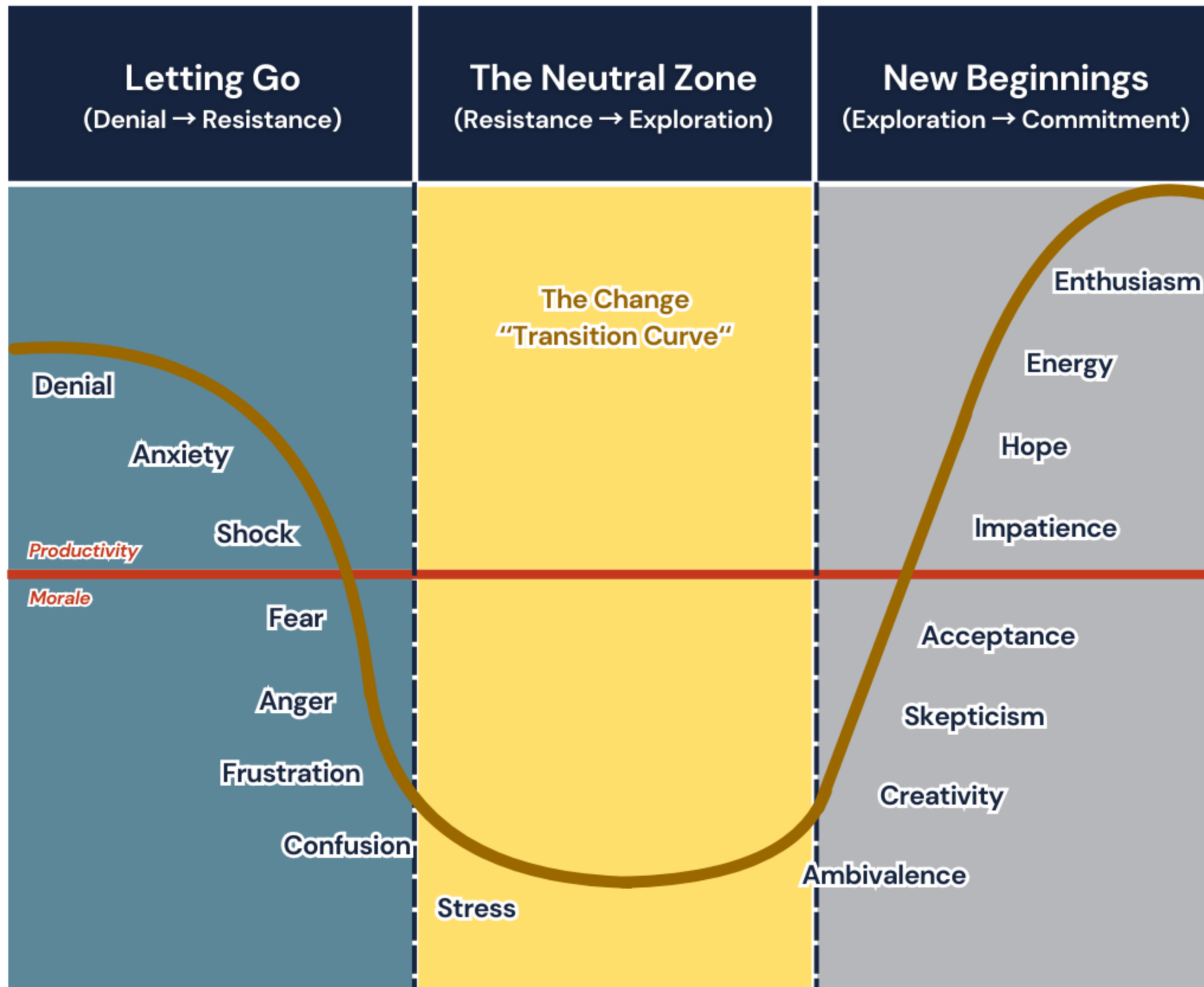
ARE THEY WILLING TO INCORPORATE YOUR  
MEMBERSHIP PRICING INTO THE HEALTH PLAN?

Are they devaluing your DPC membership fee?



# HOW IS THEIR COMPENSATION STRUCTURED?





# PSYCHOLOGY OF CHANGE

The pessimist complains about the wind; the optimist expects it to change; the realist adjusts the sails

William Arthur Ward



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**THANK YOU!  
ANY  
QUESTIONS?**



*contact us*

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[sales@virtuousbenefits.care](mailto:sales@virtuousbenefits.care)  
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