



A 90 Degree Benefits Company

THE TRUSTED  
BENEFIT AND  
GOVERNMENT  
COMPLIANCE  
EXPERTS

# IMA, Inc. – A Company Not an Institution

*Our management team is composed of a seasoned group of business professionals whose primary objective is to manage each account in the most responsive and innovative way possible. Every IMA, Inc. account is managed by one of our key executives who works closely with the client to stay ahead of the rapidly shifting changes in the health insurance industry. Our management team prides itself on its ability to respond quickly to these changes with the expertise that allows clients to seize opportunities as they appear.*

## THE HISTORY OF IMA, INC.

Since its establishment nearly 30 years ago by a team of experienced insurance professionals, IMA, Inc. has been providing expert professional benefit administration, management and consultative services to small and large employer groups across the nation. Our vision has been inspired by our clients' needs and objectives. Our mission is to help our clients keep constant pace with the changing employee benefit landscape. Our promise is to expertly design, administer and oversee benefit plans that support employee health, increase productivity, reduce risk, control cost and help employers retain quality employees.

IMA, Inc.'s company structure is lean and efficient with a unique combination of skill sets. Being a full service Third Party Administrator (TPA) gives IMA, Inc.'s clients an advantage over traditional consulting, agents or brokers. IMA, Inc. is not encumbered by layers of management and reams of bureaucratic red tape, instead IMA, Inc. is a company where decisions are made quickly and where new ideas are not only encouraged, but embraced. IMA, Inc. is a company where "excellence" is not just a goal or part of a slogan hanging in the president's office, but is reality every day for all of our employees.

We operate our company on a very simple theory: in order to run a company, you have to be there. We are. Just about everyday. If you have a question, we are here to answer it. If you have a problem, we are here to help solve it. It's kind of an old fashion idea about business, but we like it.

## EXCELLENT SERVICE

IMA, Inc.'s founders and managers have created a company committed to one goal — providing the best service possible to our clients. Our commitment to excellence is what has made IMA, Inc. so successful. It is precisely why you will find your relationship with us will be unlike your relationship with any other company.

## FLEXIBLE, AFFORDABLE, ACCOUNTABLE BENEFIT CHOICES

IMA, Inc. professional benefit advisors help employers select and tailor benefit packages that fit employee health and welfare needs while maintaining corporate profitability and fiscal risk responsibility. IMA, Inc. specializes in benefit plan design, forecasting and planning, patient-specific and plan financial modeling, information management, communications, claim cost containment and insurance product evaluation.

With IMA, Inc., employers receive professional benefit engineering and design services that utilize state-of-the-art predictive modeling technologies. These tools and services help ensure maximized benefit return on investment and deliver accurate benchmarking, forecasting and operational budgeting. IMA, Inc. benefit solutions are helping companies curb the cost of rising healthcare expense and improve their workforce productivity.



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*IMA, Inc. is your key to unlocking optimal benefit plan performance*

# IMA, Inc.: The Better Choice



*For over 30 years, employers have counted on IMA, Inc. to provide cost effective employee benefits that deliver maximum performance and optimum return on investment.*

IMA, Inc. develops benefit solution packages to mitigate risk and improve efficiency beginning with a strategic review of a company's benefit needs and objectives. IMA, Inc.'s procurement coordination, professional administration, risk consulting, health management services and ancillary benefit products provide for the expert implementation and administration of benefits that result in peace of mind health and welfare coverage for clients and their employees.

IMA, Inc. expertly advises, administrates and manages plans to help ensure optimum benefit efficacy year after year. Through innovative population health improvement services and programs, IMA, Inc. makes it possible for employers to improve benefit value through member health improvement and the reduction of costly member health risks.

Built upon the IMA, Inc. promise of complete relationship and transaction transparency, IMA, Inc. services deliver a new standard of fiscal and health accountability, ensuring reliable, affordable and sound plan performance year after year.

*Learn more about our products on the following pages:*

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# IMA, Inc. Provides Complete Benefit, Risk Management and Government Compliance

Since 1982, IMA, Inc. has offered benefit administration services and a complete array of benefit packages to employers across the nation. With their expert knowledge of the industry and a dynamic understanding of the ever-changing benefit landscape, IMA, Inc. is uniquely positioned to ensure that employers make the right decisions for their company and for their employees.

IMA, Inc.'s goal is twofold — to safeguard business fiscal stability and to care for member beneficiaries. They achieve this goal through informed, dedicated personal attention to every detail of a benefit plan. When IMA, Inc. partners with a company, employers are able to maintain healthy workforces, increase competitiveness, improve productivity and raise employee benefit satisfaction while managing costs.

## RISK MANAGEMENT SERVICES

IMA, Inc. works only with the highest rated risk carriers to underwrite fiduciary liability and protect client financial stability. IMA, Inc. structures, procures and mediates dedicated risk relationships; monitors compliance of all required beneficiary responsibilities; and ensures timely and accurate reporting of required submissions and disclosures.

## GOVERNMENT COMPLIANCE SERVICES

Compliance with government regulations is becoming more and more complicated and, as the laws are being written, they are more often directed to “employers” as opposed to “insurers”. IMA, Inc. has the experience and resources to handle government compliance on behalf of the medical plans, including:

### *Federal Compliance*

#### Healthcare Reform

- Monitoring constantly changing regulations
- Compliance assistance and counseling as needed
- Required notices
- Plan document and procedure changes
- Additional contracting to maintain compliance
- Governmental and Employee Reporting

#### HIPAA

- Portability
- Privacy
- Security

#### COBRA

#### Medicare Modernization Act

### *State Compliance*

- New York Surcharge Reporting
- Massachusetts Surcharge Reporting





*IMA, Inc. Administrative Service Offerings Support All Plan Types:*

- *Exclusive Provider Option Plans*
- *Preferred Provider Plans*
- *Point of Service Plans*
- *Specialized Hybrid Plans*
- *Consumer Driven Health Plans*
- *Variable Benefit Level Plans*
- *Length of Service Plans*

## Self Funded Health Benefit Solutions

### THE FREEDOM, CONTROL AND FLEXIBILITY OF SELF FUNDING

Nearly 60% of employers who offer health benefits forego traditional monthly premium payments to insurance carriers and alternatively fund their own benefit coverage. A self funded benefit model allows greater flexibility for tailoring benefit offerings and provides financial freedom many fully insured products do not.

IMA, Inc. is home to a nationally recognized TPA. With three decades of experience in self funded benefits, ERISA and Section 125 Plans, IMA, Inc. offers self funded benefit administrative services with in-depth, firsthand knowledge of current healthcare regulations, commerce workflows, care delivery accountability and risk management practices.

### IMA, INC.'S INTEGRATED THIRD PARTY ADMINISTRATIVE SERVICES INCLUDE:

- Regulatory Compliance Assistance
- Plan Origination and Modification Services
- Risk Management and Reinsurance Services
- Claim Adjudication Services
- Clinical Cost Containment Services
- Population Health Management Services
- Member Services / Patient Advocate Services
- Sentinel Reporting and Analytical Predictive Modeling
- Wellness Initiatives and Programs
- Provider Network Coordination
- Reinsurance Disclosure Reporting and Procurement
- COBRA Services / HIPAA Notifications
- 1099 Reporting

# Healthcare Cost Containment

*IMA's Cost Containment program has medical professionals that work hand-in-hand with the employer, patient and attending physician to ensure the best possible care is provided for optimum plan savings.*

Reducing healthcare expenses can be challenging for both employers and their employees. Constant vigilance is required to monitor medical and prescription claims for coding errors, fraud, waste or abuse. IMA, Inc. delivers state-of-the-art claim surveillance services to help prevent the erroneous, fraudulent or excessive charges that can drive up health plan expenses. IMA, Inc.'s Cost Containment services include the detection of irregularities by an innovative, technological claims surveillance engine followed by a clinical response from an experienced medical staff. The surveillance engine used by IMA, Inc. is integrated into claims processing workflows PRIOR TO PAYMENT in order to screen medical and prescription claims and liabilities for potential error, fraud, waste or excess. In addition to responding to any identified claims errors or fraud, medical professionals work to contain costs by improving the quality of member care.

*IMA, Inc. has helped save employers nearly \$350 million in reduced healthcare claim expenses above and beyond provider network discounting. With IMA, Inc.'s nationally recognized third party administrative services, these technology-driven, physician-directed cost containment services allow IMA, Inc. to offer employers the highest standard of financial assurance.*



# Population Health Management



*Achieving a healthier workforce can significantly decrease rates of absenteeism, increase productivity and lower annual healthcare related benefit expenses. To help companies improve employee and member health, IMA, Inc. offers Total Population Health Management (TPHM).*

## **PREVENTATIVE PROGRAMS**

Many of the most costly and deadly illnesses known today are either preventable through education and lifestyle changes or curable with early detection. Rather than depending exclusively on employee Health Risk Assessments, the TPHM Wellness Program provides employers several valuable reports that enable them to track compliance with the efficacy of program components. The data in these reports can be used to suggest additional group and/or disease specific interventions.

## **SELECT MONITORING PROGRAM**

Utilizing claims data, the IMA, Inc. TPHM Select Monitoring Program can identify plan members with symptoms or diagnoses that may indicate the presence of or potential for chronic or catastrophic diseases including diabetes, asthma, emphysema, hypertension, high cholesterol and coronary artery disease. These high-risk members may voluntarily enter programs for education and guidance for their specific disease.

## **TRI-LEVEL NURSE SUPPORT SERVICES**

As a member's health needs and conditions change, the tri-level nurse support team guides him or her toward individual lifestyle and clinical care options that can improve both quality of life and clinical outcomes. Tri-level nurse support can dramatically ease the stress of patient treatment decisions, reduce illness severity, lower care cost and reduce employee absenteeism.

## **24-HOUR NURSE LINE**

For assistance with minor illnesses and injuries, IMA, Inc.'s tri-level nurse support provides a help line where registered nurses are available 24 hours a day / 7 days a

week to answer questions and provide assistance.

These highly trained professionals can offer prompt medical advice for minor injuries and guide members to choices that prevent minor illnesses from escalating into more costly medical conditions.

## **HEALTH COACHING AND DISEASE MANAGEMENT**

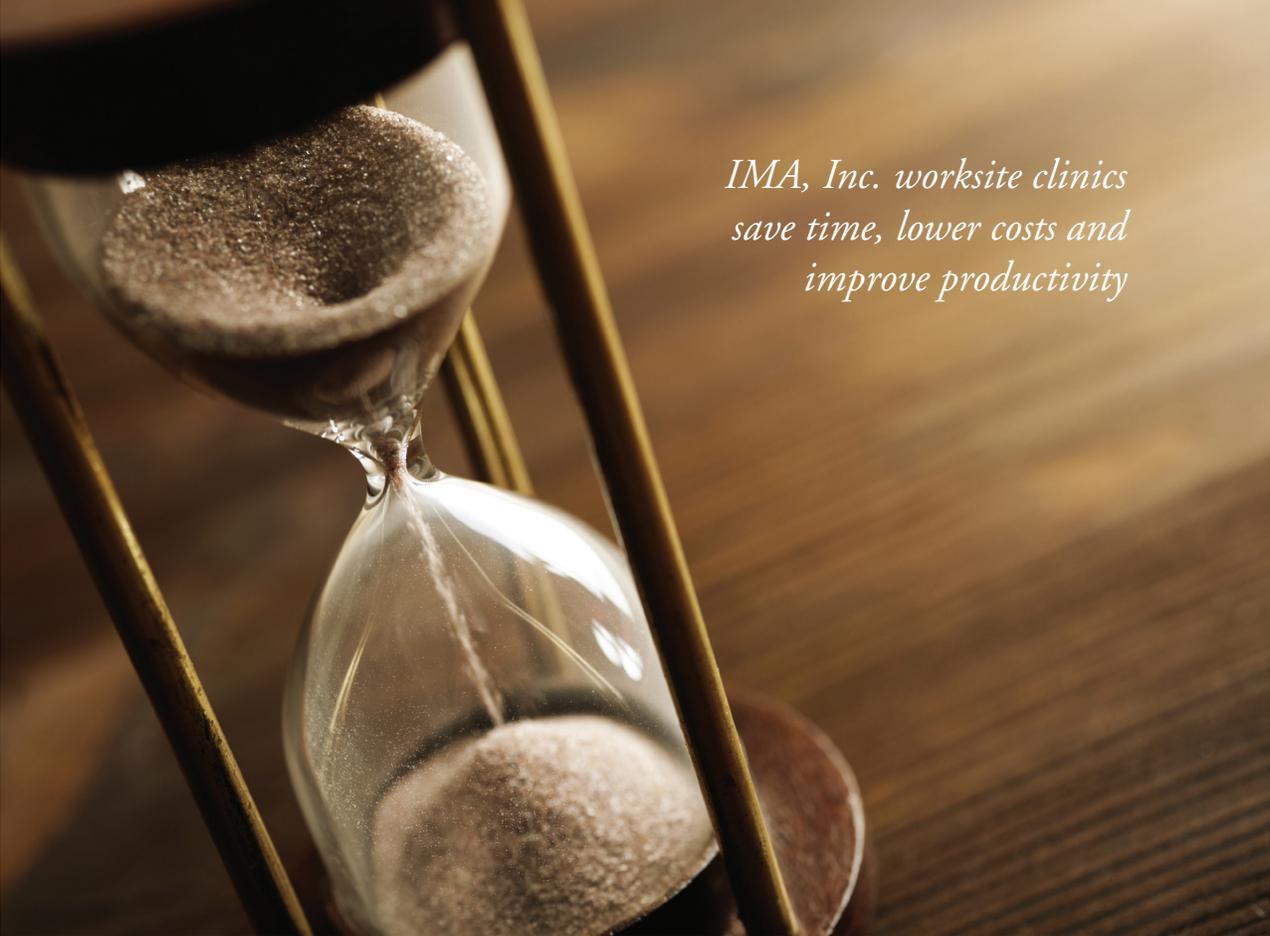
IMA, Inc. Health Coaches assist members in making good decisions for a healthier life, answer questions about diagnoses and offer support during the disease management process. If diabetes, cancer, high cholesterol, hypertension or asthma exists, a health coach will reach out to the patient to verify diagnosis and collect greater information including history and lifestyle behaviors. After the initial assessment, the coach follows up with phone calls every six months to offer support, to answer questions and to encourage the patient to follow physician recommendations.

## **LARGE CASE MANAGEMENT NURSES**

Large Case Management Nurses are available for members who are hospitalized, have recently been hospitalized, have been involved in a catastrophic accident or are suffering from a critical illness. These experienced nurses act as patient advocates and work closely with the member and the member's family to assist with:

- Transfers from one facility to another
- Home health care or DME supplies/equipment
- Any other medical necessity required

Calls between the health coach/nurses and patient are strictly private and confidential and are not shared with other members or the employer.



*IMA, Inc. worksite clinics  
save time, lower costs and  
improve productivity*

## Worksite Medical Clinic

IMA, Inc. offers cost saving worksite medical clinic solutions that allows employers to reduce their medical claims costs, improve employee morale, increase employee productivity, reduce absenteeism and decrease workers' compensation costs. A team of dedicated medical professionals is provided to employees at the workplace to provide primary medical care services during normal working hours, making access to care much easier.

An on-site medical clinic can perform many of the federally mandated preventative functions of the Affordable Care Act — services that are invaluable for tools for creating a healthy workforce. Employees who visit the on-site clinic are able to take advantage of preventative services without having to pay a co-payment, co-insurance or deductible.

An on-site medical clinic can facilitate services such as:

- Annual general physical exams
- Blood pressure, diabetes and cholesterol tests
- Many cancer screenings, including mammograms and colonoscopies
- Counseling on such topics as quitting smoking, losing weight, eating healthfully, treating depression and reducing alcohol use
- Flu and pneumonia shots
- Counseling, screening and vaccines to ensure healthy pregnancies
- Pre-employment physical exams
- Other routine primary care services

# Fully Insured Health Benefit Solutions

Working with the industry's top rated national and regional health insurance carriers, IMA, Inc. is helping tailor employer health benefit plans that fit the unique needs and budgets of growing companies.

## *Plan Types*

- *Defined Contribution Plans*
- *Preferred Provider Plans*
- *Point of Service Plans*
- *High Deductible Health Plans*
- *Exclusive Provider Organizations*



Delivering quality affordable health insurance and providing employers and employees with improved benefit value is IMA, Inc.'s mission. With IMA, Inc.'s fully insured health plan products and services, employers have access to a wide selection of carriers and plan types, ensuring the most cost effective and comprehensive coverage possible.

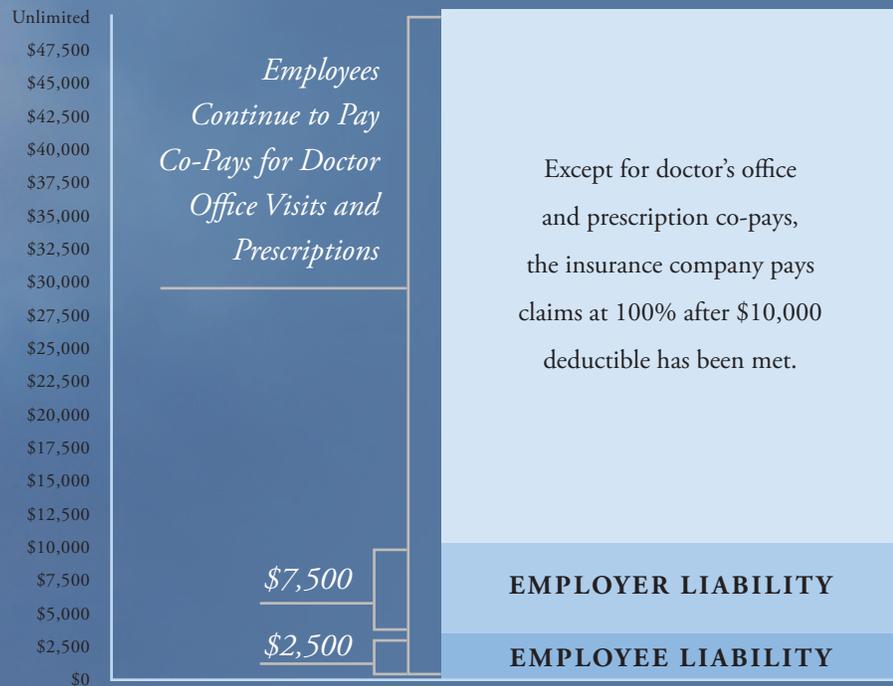
IMA, Inc. expertly manages the complicated tasks of benefit product and services procurement for clients in order to secure competitive reliable quotes, sound contractual agreements, secure risk management, well-performing benefits and synchronization of the entire benefit package.

# IMAgine Hybrid Fully Insured/ Self Funded Benefit Solution

Affordability and flexibility are the inspiration behind IMA, Inc.'s IMAgine hybrid fully insured/self funded benefit solution. IMAgine combines low premium, fully insured catastrophic coverage with the flexibility of self funding to manage part of employee first dollar healthcare expense. IMAgine saves employers on premium costs while providing protection from major medical expenditures for employees.

## IMAGINE HEALTH PLAN MODEL

*Example – \$10,000 Deductible Schedule*



# INNOVATE

*The IMAgine solution allows small and premium-trapped employers to dramatically lower fully insured premiums and control cost by managing a corridor of employee healthcare cost. This unique hybrid funding model can also incorporate aggregate stop loss coverage to limit the plan's overall financial exposure of the self funded corridor.*

# Ancillary Products & Services

To safeguard the financial stability of employees and their families, IMA, Inc. offers ancillary benefit products such as Short Term Disability, Long Term Disability, Life/AD&D, Specified Critical Illness Coverage, Long Term Care, Supplemental Group Life, Accident Coverage, Hospital Confinement or Gap Coverage and Cancer Coverage. Ancillary product premiums can be paid by the employee, the employer or both and can be offered to individuals or through the group.

## SHORT AND LONG TERM DISABILITY COVERAGE: GROUP AND INDIVIDUAL

IMA, Inc. offers employees the added financial peace of mind of short and long term disability coverage. Short Term Disability insurance pays a percentage of salary if an employee becomes unable to work for a short period of time (usually 90 or 180 days of disability) due to sickness or non-work related injury.

For protection against extended periods of disability, employees can select long term disability coverage. Long term disability coverage begins after either 90 or 180 days of disability and pays a percentage of the employee's salary (usually 50 to 66 2/3 percent, depending on the policy terms). Employees may continue to receive benefits for two to five years or until they turn 65.



*IMA, Inc. can help  
fortify employee  
financial stability*



*IMA, Inc. opens the door to financial protection by offering extensive ancillary benefit products and services*

### **GROUP LIFE/ACCIDENTAL DEATH & DISMEMBERMENT (AD&D)**

Accidental death and dismemberment insurance offers employees and their families financial assurance in the event of loss due to an accident. With an AD&D policy, predetermined amounts of the coverage will be paid to a beneficiary for the loss of life, limb(s), finger(s), sight or permanent paralysis. The types of injuries covered and the amount paid vary by insurer and package. Packages can be tailored to meet the needs of employees and employers. Accidental death coverage provides supplemental financial relief to families during the difficult time following the loss of a loved one. Life/AD&D coverage can be provided to employees through Group Voluntary Life or offered to members as a separate, elective benefit.

### **CRITICAL ILLNESS COVERAGE**

This type of coverage pays a benefit directly to the insured when diagnosed with any of the illnesses listed in the coverage. Examples of illness that may be covered are: Heart Attack, Stroke, Major Organ Transplant, End Stage Kidney Failure, Blindness and Coma. Benefit levels differ from policy to policy (often benefits can be selected from \$5,000 to \$50,000 in \$1,000 increments). The insured can use these benefits to pay deductibles, co-pays, co-insurance, child care, lost income, prescribed rehabilitation, or even everyday living expenses.

### **LONG-TERM CARE**

Long-term care insurance was developed specifically to cover the costs of long-term care services, most of which are not covered by traditional health insurance or Medicare. LTC

is a type of care needed when an individual is unable to independently perform the basic activities of daily living such as bathing, dressing, eating, etc. There are many options and broad flexibility in long-term care insurance policies with a range of care options and benefits for providing the services needed in the most appropriate setting.

### **SUPPLEMENTAL GROUP LIFE**

Supplemental Group Life insurance offers additional life insurance coverage for employees and their families. In many instances coverage is extended to the spouse and dependents at reduced benefit expense.

### **ACCIDENT COVERAGE**

Many accident plans pay set benefit amounts for things such as ambulance, emergency room treatment, fractures and dislocations, burns, concussions, eye injury, ruptured disc, hospital confinement, intensive care, follow-up treatment, physical therapy and more. Coverages vary from carrier to carrier so members can select the services they prefer. The insured can use these benefits to pay deductibles, co-pays, co-insurance, child care, lost income, prescribed rehabilitation or even everyday living expenses.

### **GAP HEALTH INSURANCE COVERAGE**

This type of coverage is designed to help protect against deductibles and out-of-pocket expenses the insured may encounter when serious illness or injury occurs. Coverage may be extended to cover outpatient surgery, hospital confinement, rehabilitation or unit confinement. Benefits are paid directly to the insured.

# Flexible Benefits

IMA, Inc. offers a wide selection of fully compliant, flexible spending plans, coupled with the convenience of a debit card, to help relieve employee benefit stress as more employers turn to higher member out-of-pocket costs (deductibles, coinsurance and co-payments) to help control the escalating expense of providing healthcare benefits coupled with the convenience of a debit card.

*IMA, Inc. is your  
single source solution  
for flexible benefits  
program origination  
and administration*



## **FLEXIBLE SPENDING ACCOUNT (FSA) BENEFITS**

Flexible Spending Accounts (FSA) allow employees to pay for eligible out-of-pocket health and dependent day care expenses with contributed “pre-tax” dollars. These employee contributions are taken from the gross salary before federal, state, FICA (social security), and local taxes are calculated. Utilizing a “benefits debit card”, employees may access their FSA dollars to help offset expenses such as co-payments, deductibles, co-insurance and certain qualified care related items and services. FSA is a “use it or lose it” arrangement. FSA balances do not carry over from year to year.

## **HEALTH REIMBURSEMENT ARRANGEMENT (HRA) BENEFITS**

Healthcare Reimbursement Arrangements (HRA) can help employers reduce healthcare benefit costs and encourage participants to become

better healthcare consumers. Unlike FSA benefit plans, HRAs are funded solely by employers and their balances may carry forward year after year. Employees are able to supplement employer HRA contributions on a pre-tax basis with a Flexible Spending Account (FSA). Participants use these accounts to receive reimbursement for plan-defined out-of-pocket medical expenses.

## **HEALTH SAVINGS ACCOUNT (HSA) BENEFITS**

Health Savings Accounts (HSA) are tax-exempt, IRA-type accounts that a participant may use to pay for qualified medical expenses. To be eligible for participation, an employee must be covered under an IRS qualified High Deductible Health Plan (HDHP). Contributions to an HSA may be made by the employee, the employer or both.

# Eligibility Auditing

## DEPENDENT ELIGIBILITY AUDITING SERVICES

Ineligible dependent costs can really add up. More than half of audited plans find on average 10-15% of covered dependents are actually ineligible. This can cost a plan more than \$3,000 per year per ineligible dependent in premiums or claims exposure, not including the potential financial penalties plans can incur as regulatory noncompliance fines are assessed. A Dependent Eligibility Audit is a simple way to save on the cost of your employee group benefits. IMA, Inc. offers tailored ERISA / PPACA sensitive audit solutions to help employers perform the fiduciary duty to ensure that enrollment disciplines are regularly monitored and diligently maintained.

Through the process, IMA, Inc.'s team of eligibility specialists will:

- Review your current plan document language
- Recommend modification to tighten eligibility constraints
- Eliminate potential eligibility loopholes
- Monitor fiduciary regulatory compliance with ERISA, PPACA, IRS and COBRA

# Consolidated Billing

Through IMA, Inc.'s consolidated billing, employers can dramatically reduce the time spent on the complicated tasks of maintaining group health eligibility, payments to carriers, and reconciling monthly bills to make sure adjustments are properly made.

- Consolidated billing delivers remittance information and claim payments from clients and to vendors.
- Clients receive a single draft of all carrier invoices.
- Clients receive reconciled monthly bills to ensure that invoices match enrolled participants.

*With IMA, Inc.'s consolidated billing, paying and tracking, your employee benefit costs have never been easier.*



## WHY IMA, INC.?

The answer is simple — our focus is on you, our client. To the IMA, Inc. team, you will never be just a number or part of a collective head count because our clients and each one of their members are our inspiration. Our goal is to be wise stewards of your corporate vision and trusted guardians of your most valuable assets — your financial and workforce health.

## COMPLETE BENEFIT ASSURANCE

High performing benefit plans require expert orchestration and constant oversight. IMA, Inc. knows how to balance and manage the variables that can affect healthcare benefit costs, financial plan risk and member population health. We understand that expertly monitored and finely tuned plan management can reduce costs and improve employee health and productivity. Our professionals have the knowledge, the tools and the resources to guarantee maximum value to all benefit plan stakeholders.



A 90 Degree Benefits Company

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Proud member of



*Looking to move in a better direction?  
Contact us today.*

**318.747.0577**

**[www.90DegreeBenefits.com](http://www.90DegreeBenefits.com)**

We care about our clients. IMA, Inc. is:

TRUSTED	ACCOUNTABLE
EXPERIENCED	DEPENDABLE
INNOVATIVE	AFFORDABLE
RESPONSIVE	

