



Healthcare Reporting

Helping companies take the pulse of well-being

Generali Employee Benefits is pleased to offer a brand new comprehensive set of analytical reports for medical benefits administered by its global Network. Generali's semi-annual Paid Claim Reports and annual Incurred Claim Report equip multinational companies with the data they need to tackle staggering medical premiums.

TWO REPORTS, COUNTLESS BENEFITS

Employers usually face obstacles when it comes to having access to comparative reports for insured medical benefits. Generali Employee Benefits reviews available data on a country-by-country basis to provide clients with two unique reports. The data and metrics included in the reports enable companies to identify underlying cost drivers within their medical portfolios, providing the following:

- An up-to-date overview (dashboard) of what the company-sponsored health plans have effectively paid during the recent twelve month period.
- The most sophisticated dashboard overview available offering population-based metrics to understand utilisation patterns during twelve month incurred periods.
- Global summaries and country-by-country detail associated with the covered populations and the time periods indicated.
- Insight into local medical trends by benefit class to help companies make informed decisions on health cover/benefit design.
- Insight into local medical trends by diagnostic categories to help companies better identify the main cost drivers associated with their claims experience.
- A clearer perspective of the differences in employee health issues that exist between countries around the world.

PAID CLAIM REPORT

Generali's Paid Claim Report provides a biannual summary of the distribution of medical claims paid over the prior rolling 12-month period, sorted by major Benefit Class and primary Diagnostic Categories. Additional metrics are also provided to monitor network usage and drill down on the largest cost category. These reports will be delivered each year in Q1 and Q3.

INCURRED CLAIM REPORT

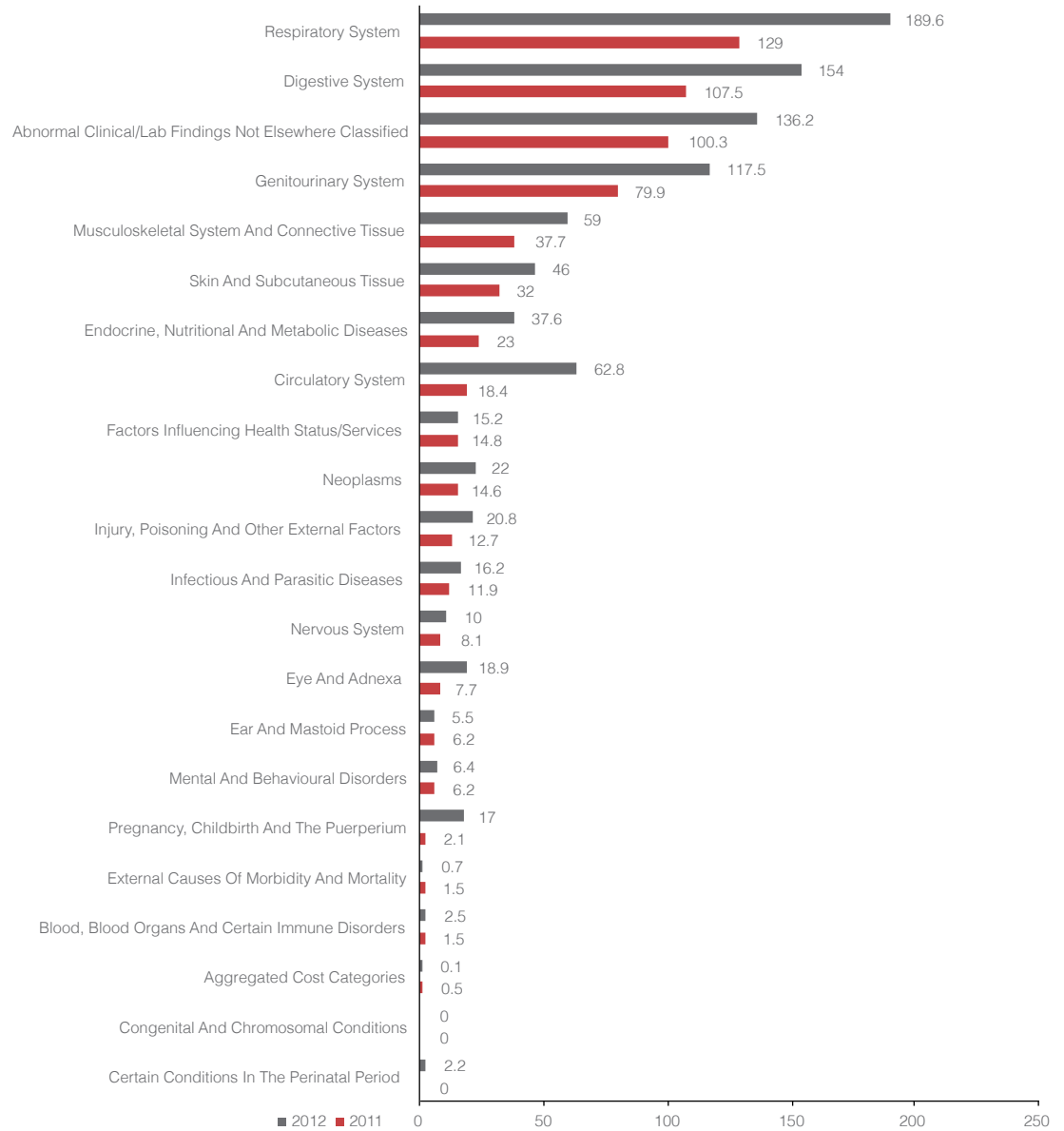
Generali's Incurred Claim Report provides companies with data to make evidence based decisions. These incorporate demographic counts that provide insight into utilisation trends, including Incidence, Frequency, Average Claim Costs and Total Incurred Claim Costs per Member Year (PMPY) for each Benefit Class and Diagnostic Category. This report will be delivered each year in Q3.

WHO ARE THESE FOR?

Multinational employers who want a deeper understanding of the inherent risks and experiences associated with their local private medical insurance plans and who wish to proactively mitigate evolving cost drivers, including implementing programmes to contribute to the well-being of their employees.

Employers who participate in a multinational pool or reinsurance to captive arrangement will find this service particularly valuable, thanks to a flexible cost structure with no upfront payment required.

These reports are individually produced for each company, and are the first global medical reports of their kind in the industry.



Comparative Overview of Projected Paid PMPY

Costs

How much per year?

fixed cost: €5,000 + variable cost: €500 for each country with an overall yearly maximum of €15,000

How is it calculated?

Based on the number of countries included in the Q3 Paid Claims Report

How shall it be paid?

As an annual fee which can be incorporated into your multinational program costs

When?

In the Q4 Captive report delivered after the end of Q1 of the following Year

In the Pooling report delivered the following year