



FACT SHEET

COMPANY OVERVIEW

Health Alliance Plan (HAP) is a subsidiary of Henry Ford Health, one of the nation’s leading health care systems. HAP provides coverage to individuals, companies and organizations of all sizes, partnering with doctors, employers and community groups to improve the overall health of every community we serve. HAP’s mission is to enhance the health and well-being of the lives we touch.

Company highlights:

- Founded in 1960
- Based in Detroit, Michigan
- 430,000 members
- 1,000 employees
- 50,000 health care provider partners

Chief executive:

Michael Genord, MD, MBA
President and CEO, Health Alliance Plan
President and CEO, HAP CareSource
Executive Vice President, Henry Ford Health

Phone: (800) 422-4641 | **Website:** hap.org

GOVERNANCE

HAP is governed by a diverse volunteer board of directors representing a variety of industries which include health care, automotive/manufacturing, financial services, education, professional services, consumer services and community planning.

SUBSIDIARIES AND BUSINESS PARTNERSHIPS

Alliance Health and Life Insurance Company® – (AHLIC) offers fully insured and experience-rated PPO and EPO products, as well as administrative services only (ASO) and self-funded products.

ASR Health Benefits – Administration Systems Research Corporation International (ASR Health Benefits) is a fullservice, third-party administrator based in Grand Rapids, Mich., offering competitive options for employers seeking to self-fund their health benefit costs and a statewide provider network.

HAP CareSource – HAP CareSource provides a comprehensive array of health benefits and services, ensuring you have access to care whenever necessary. Our expansive network features top-tier doctors, specialists, hospitals, and pharmacies. Our focus extends beyond individual health to encompass the health and safety of our communities, with a particular emphasis on addressing social inequities and the social determinants of health.

Health Alliance Administrators, Inc. – HAA is a managing general agency that provides quoting, marketing, training support, enrollment and

servicing assistance to agents for HAP and AHLIC (2-99 employees), as well as HAP individual products.

NETWORK

HAP’s vast network includes more than 50,000 health care providers representing the leading doctors, hospitals and health systems in Michigan. Statewide and national provider networks are available through strategic partnerships with Physicians Care Network in Michigan and Aetna Signature Administrators™ program, offering access to Aetna’s national PPO network outside of Michigan and northwest Ohio.

NATIONALLY RECOGNIZED FOR QUALITY AND CUSTOMER SATISFACTION

HAP’s Medicare HMO earned 4 out of 5 stars from the Centers for Medicare and Medicaid Services, and its PPO earned 4.5 stars. HAP is one of the only Michigan-based insurers to achieve 4 stars for its PPO plans and the only Michigan-based insurer to achieve 4 stars or higher for both HMO and PPO each of the past four years.

HAP is proud to be one of the first health plans in Michigan to receive accreditation from the National Committee for Quality Assurance, a nonprofit organization dedicated to improving the quality of health care. And we’ve been accredited every year since. Today, more than 20 years later, HAP continues its commitment to clinical excellence and providing quality service at every turn.

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PRODUCTS

HAP is a full-service health insurance company with distinct product lines:

Employer group plans – HMO, PPO, EPO, Choice Network and consumer-driven health plans. Employer groups have access to fast, accurate and friendly service from knowledgeable local experts. Timesaving online tools make it easy to enroll and disenroll employees, access invoices and check rosters.

Individual plans – HAP has HMO, PPO and health savings account plans available for individuals and families not covered through an employer health plan.

Medicare – HAP offers HMO and PPO Medicare Advantage plans, prescription drug plans and Medicare Supplement (Medigap) plans for individuals and employer-sponsored employees and retirees.

Medicaid – HAP CareSource is an HMO offering coverage for those eligible for both Medicare and Medicaid, as well as traditional Medicaid. Programs include MI Child, Children's Special Health Care Services, the Healthy Michigan Plan and health care coverage for people impacted by the Flint Water Crisis.

Self-funded – Through ASR Health Benefits and (AHLIC), HAP offers options for employers and health and welfare funds that are seeking to selffund their health benefit costs.

ASSIST AMERICA

HAP offers members free global emergency services when traveling 100 miles or more from home, plus 24/7 identity theft protection to safeguard their identity and credit history.

COMMUNITY STEWARDSHIP

HAP is known for community giving and volunteerism. HAP employees volunteer for many community events each year. HAP's charitable giving and community outreach focuses on wellness, youth, education, diversity, community development and arts and culture.

HEALTH AND WELLNESS PROGRAMS

Preventive and wellness services – HAP covers preventive services, including cancer screenings, physicals, flu shots and more, including incentivebased wellness programs to encourage healthy lifestyles.

Worksite Wellness programs – Free or low-cost preventive services and health education for the workplace.

iStrive for Better Health – Online health assessment and digital coaching.

Easy-to-understand educational tools – To help members manage their plan benefits and overall health.

PHARMACY PROGRAMS

HAP pharmacists ensure members have access to the highest quality medications at affordable rates while maintaining an evidence-based drug formulary and managing specialty drugs. As part of its medication therapy management program, HAP pharmacists counsel those with chronic conditions and their doctors to make taking multiple medications less confusing, safer and more affordable.

CARE MANAGEMENT

HAP's care management team helps members reach their optimum state of health by matching chronically ill members with the support they need to return to health or manage their longterm health conditions. This multidisciplinary team partners with providers and health systems to offer comprehensive care coordination services to avoid gaps in care, improve communication, reduce avoidable readmissions and empower members to take better control of their own health.

BEHAVIORAL HEALTH

Specially trained social workers, psychologists and counselors provide integrated behavioral and medical disease management services to members with mental health and substance abuse conditions.