Employee health is a critical for every organization to ensure their health & family protection with their health well being. Employee are the backbones for any organization and better health of employees provides better productivity and hence better ROI.

*When it comes to buying, selling, and even managing employee benefits, an old adage hits too close to home: the only consistency is inconsistency. Today’s processes are not only entirely manual, but also managed through siloed systems. This is especially true when you’re placing insurance coverage.*

>90% of the organization /employers take help from brokers to manage their employee’s benefit programs. These programs can include medical, dental, vision, and other health, doctor consulting, OPD, family protection and wellness offerings. This is also because Carriers systems are brokers too and hence not only manual, delays but there is 100% inefficacy in the process.

There are many issues exists in the process:

**Problems:**

- Insurance businesses finds it difficult to manage SME/Business customers
- **SME/Businesses have no process, systems** where they can buy insurance, file claims, upload required documents by themselves
- **There is no option to make payment online**, no option to customize products
- **Insurance companies delay in processing insurance**, issuing policy documents, losses revenue and more tracking the risks of businesses for better insurance. It takes average 15-30 days
- Manual process leads to difficult communication, issuance, payment, claims, quote and more.
- To provide their employer clients the best options, brokers collect spreadsheets of employee demographic data and PDFs of policy documents to send to insurance companies.
- **Insurance companies review each document manually**, reach out to brokers for missing details (somehow something is always missing), and put together quotes for the upcoming year’s plan.
• **Quotes come in as extensive**, text-based documents, which brokers review to manually copy important insights into another spreadsheet to help their clients choose the best plan.

• **The whole process is hyper-customized, time-consuming, and error-prone.**

And it takes place throughout the year, as benefits are renewed or new options are explored. **Brokers and carriers are in a constant state of busy—doing more**, yet accomplishing less; experiencing frustration and burn out. At **ASPIRE HEALTH**, we call this the **productivity gap**. What’s been missing is a meaningful way for brokers and carriers to collaborate; a way to enable them to be more efficient, effective, and ultimately productive.

We believe that the right solution can address this productivity gap and pull the industry forward. We built the AI & Data Analytics focused first **Employee Benefit & Group Health System (EBHS)**, a new category of **enterprise software** for **brokers and carriers**, to do just that.

**A EBHS** enables brokers and carriers to manage the entire placement process in one shared system. To be successful, a BPS must have three core features:

• **Purpose-built.** There’s so much nuance in our industry. This is especially true in the mid-to-large market, where custom underwriting is required on every client. An effective **EBHS** accounts for the specific workflows and dynamic relationships across stakeholders—brokers, carriers, third-parties, and the client.

• **Supports the entire placement process.** Whether collecting a renewal or marketing for new business, a **EBHS** addresses end-to-end needs: from data collection to underwriting review and client presentation to implementation.

• **Serves as a true shared system.** A **EBHS** is one system that provides real-time, shared visibility and enables brokers and carriers to deliver the best possible outcomes for their mutual clients.
Old age traditional manual system for Employee & Group Health Benefits Platform
Modern, Automated & Shared Employee & Group Health Benefit Platform

**ASPIRE HEALTH** by **ARTIVATIC** is proud to provide a MODERN & AUTOMATED PLATFORM FOR EMPLOYEE & GROUP HEALTH BENEFITS.

**ASPIRE HEALTH** is aimed to drive better outcome, efficiency, standardization, simplification, and connecting as Shared Platform for brokers, carriers, TPAs, 3rd Parties and customers (SMEs, Businesses etc.) to on one Unified Platform.