

**ADAMS COUNTY PURCHASE OF SERVICE AGREEMENT  
FOR EMPLOYEE BENEFITS BROKERAGE SERVICES (2016.016)**

THIS AGREEMENT ("Agreement") is made this 19 day of JULY 2016, by and between the Adams County Board of County Commissioners, located at 4430 South Adams County Parkway, Brighton, Colorado 80601, hereinafter referred to as the "County," and Hays Companies, located at 1125 17<sup>th</sup> Street, Suite 400, Denver, Colorado 80202, hereinafter referred to as the "Contractor." The County and the Contractor may be collectively referred to herein as the "Parties".

The County and the Contractor, for the consideration herein set forth, agree as follows:

**1. SERVICES OF THE CONTRACTOR:**

- 1.1. All work shall be in accordance with the attached RFP 2016.016 and the Contractor's response to the RFP 2016.016 attached hereto as Exhibit A, and incorporated herein by reference. Should there be any discrepancy between Exhibit A and this Agreement the terms and conditions of this Agreement shall prevail.
- 1.2. Emergency Services: In the event the Adams County Board of County Commissioners declares an emergency, the County may request additional services (of the type described in this Agreement or otherwise within the expertise of the Contractor) to be performed by the Contractor. If the County requests such additional services, the Contractor shall provide such services in a timely fashion given the nature of the emergency, pursuant to the terms of this Agreement. Unless otherwise agreed to in writing by the parties, the Contractor shall bill for such services at the rates provided for in this Agreement.

**2. RESPONSIBILITIES OF THE COUNTY:** The County shall provide information as necessary or requested by the Contractor to enable the Contractor's performance under this Agreement.

**3. TERM:**

- 3.1. Term of Agreement: The Term of this Agreement shall be for one year from the date of this Agreement.
- 3.2. Renewal Option: The County, at its sole option, may offer to renew this Agreement as necessary for up to two, one-year renewals providing satisfactory service is given and all terms and conditions of this Agreement have been fulfilled. Such renewals must be mutually agreed upon in writing by the County and the Contractor.

**4. PAYMENT AND FEE SCHEDULE:** The County shall pay the Contractor for services furnished under this Agreement, and the Contractor shall accept as full payment for those services, the sum of one hundred fifteen thousand dollars (\$115,000.00).

- 4.1. Payment pursuant to this Agreement, whether in full or in part, is subject to and contingent upon the continuing availability of County funds for the purposes hereof. In the event that funds become unavailable, as determined by the County, the County may immediately terminate this Agreement or amend it accordingly.

5. **INDEPENDENT CONTRACTOR:** In providing services under this Agreement, the Contractor acts as an independent contractor and not as an employee of the County. The Contractor shall be solely and entirely responsible for his/her acts and the acts of his/her employees, agents, servants, and subcontractors during the term and performance of this Agreement. No employee, agent, servant, or subcontractor of the Contractor shall be deemed to be an employee, agent, or servant of the County because of the performance of any services or work under this Agreement. The Contractor, at its expense, shall procure and maintain workers' compensation insurance as required by law. **Pursuant to the Workers' Compensation Act § 8-40-202(2)(b)(IV), C.R.S., as amended, the Contractor understands that it and its employees and servants are not entitled to workers' compensation benefits from the County. The Contractor further understands that it is solely obligated for the payment of federal and state income tax on any moneys earned pursuant to this Agreement.**

6. **NONDISCRIMINATION:**

6.1. **The Contractor shall not discriminate against any employee or qualified applicant for employment because of age, race, color, religion, marital status, disability, sex, or national origin. The Contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices provided by the local public agency setting forth the provisions of this nondiscrimination clause. Adams County is an equal opportunity employer.**

6.1.1. The Contractor will cause the foregoing provisions to be inserted in all subcontracts for any work covered by this Agreement so that such provisions will be binding upon each subcontractor, provided that the foregoing provisions shall not apply to contracts or subcontracts for standard commercial supplies or raw materials.

7. **INDEMNIFICATION:** The Contractor agrees to indemnify and hold harmless the County, its officers, agents, and employees for, from, and against any and all claims, suits, expenses, damages, or other liabilities, including reasonable attorney fees and court costs, arising out of damage or injury to persons, entities, or property, caused or sustained by any person(s) as a result of the Contractor's performance or failure to perform pursuant to the terms of this Agreement or as a result of any subcontractors' performance or failure to perform pursuant to the terms of this Agreement.

8. **INSURANCE:** The Contractor agrees to maintain insurance of the following types and amounts:

8.1. **Commercial General Liability Insurance:** to include products liability, completed operations, contractual, broad form property damage and personal injury.

8.1.1. Each Occurrence: \$1,000,000

8.1.2. General Aggregate: \$2,000,000

8.2. **Comprehensive Automobile Liability Insurance:** to include all motor vehicles owned, hired, leased, or borrowed.

8.2.1. Bodily Injury/Property Damage: \$1,000,000 (each accident)

8.2.2. Personal Injury Protection: Per Colorado Statutes

- 8.3. Workers' Compensation Insurance: Per Colorado Statutes
- 8.4. Professional Liability Insurance: to include coverage for damages or claims for damages arising out of the rendering, or failure to render, any professional services, as applicable.
- 8.4.1. Each Occurrence: \$1,000,000
- 8.4.2. This insurance requirement applies only to the Contractors who are performing services under this Agreement as professionals licensed under the laws of the State of Colorado, such as physicians, lawyers, engineers, nurses, mental health providers, and any other licensed professionals.
- 8.5. Adams County as "Additional Insured": The Contractor's commercial general liability, and comprehensive automobile liability, insurance policies and/or certificates of insurance shall be issued to include Adams County as an "additional insured" and shall include the following provisions:
- 8.5.1. Underwriters shall have no right of recovery or subrogation against the County, it being the intent of the parties that the insurance policies so affected shall protect both parties and be primary coverage for any and all losses resulting from the actions or negligence of the Contractor.
- 8.5.2. The insurance companies issuing the policy or policies shall have no recourse against the County for payment of any premiums due or for any assessments under any form of any policy.
- 8.5.3. Any and all deductibles contained in any insurance policy shall be assumed by and at the sole risk of the Contractor.
- 8.6. Licensed Insurers: All insurers of the Contractor must be licensed or approved to do business in the State of Colorado. Upon failure of the Contractor to furnish, deliver and/or maintain such insurance as provided herein, this Agreement, at the election of the County, may be immediately declared suspended, discontinued, or terminated. Failure of the Contractor in obtaining and/or maintaining any required insurance shall not relieve the Contractor from any liability under this Agreement, nor shall the insurance requirements be construed to conflict with the obligations of the Contractor concerning indemnification.
- 8.7. Endorsement: Each insurance policy herein required shall be endorsed to state that coverage shall not be suspended, voided, or canceled without thirty (30) days prior written notice by certified mail, return receipt requested, to the County.
- 8.8. Proof of Insurance: At any time during the term of this Agreement, the County may require the Contractor to provide proof of the insurance coverage or policies required under this Agreement.

## 9. WARRANTY:

- 9.1. The Contractor warrants and guarantees to the County that all work, equipment, and materials furnished under the Agreement are free from defects in workmanship and materials for a period of one year after final acceptance by the County. The Contractor further warrants and guarantees that the plans and specifications incorporated herein are free of fault and defect sufficient for Contractor to warrant the finished product after completion date. Should the Contractor fail to proceed promptly in accordance with



this guarantee, the County may have such work performed at the expense of the Contractor. This section does not relieve the Contractor from liability for defects that become known after one year.

## **10. TERMINATION:**

- 10.1. For Cause: If, through any cause, the Contractor fails to fulfill its obligations under this Agreement in a timely and proper manner, or if the Contractor violates any of the covenants, conditions, or stipulations of this Agreement, the County shall thereupon have the right to immediately terminate this Agreement, upon giving written notice to the Contractor of such termination and specifying the effective date thereof.
- 10.2. For Convenience: The County may terminate this Agreement at any time by giving written notice as specified herein to the other party, which notice shall be given at least thirty (30) days prior to the effective date of the termination. If this Agreement is terminated by the County, the Contractor will be paid an amount that bears the same ratio to the total compensation as the services actually performed bear to the total services the Contractor was to perform under this Agreement, less payments previously made to the Contractor under this Agreement.

## **11. MUTUAL UNDERSTANDINGS:**

- 11.1. Jurisdiction and Venue: The laws of the State of Colorado shall govern as to the interpretation, validity, and effect of this Agreement. The parties agree that jurisdiction and venue for any disputes arising under this Agreement shall be with Adams County, Colorado.
- 11.2. Compliance with Laws: During the performance of this Agreement, the Contractor agrees to strictly adhere to all applicable federal, state, and local laws, rules and regulations, including all licensing and permit requirements. The parties hereto aver that they are familiar with § 18-8-301, et seq., C.R.S. (Bribery and Corrupt Influences), as amended, and § 18-8-401, et seq., C.R.S. (Abuse of Public Office), as amended, , the Clean Air Act (42 U.S.C. 7401-7671q), and the Federal Water Pollution Control Act (33 U.S.C. 1251-1387), as amended, and that no violation of such provisions are present. The Contractor warrants that it is in compliance with the residency requirements in §§ 8-17.5-101, et seq., C.R.S. Without limiting the generality of the foregoing, the Contractor expressly agrees to comply with the privacy and security requirements of the Health Insurance Portability and Accountability Act of 1996 (HIPAA).
- 11.3. OSHA: The Contractor shall comply with the requirements of the Occupational Safety and Health Act (OSHA) and shall review and comply with the County's safety regulations while on any County property. Failure to comply with any applicable federal, state or local law, rule, or regulation shall give the County the right to terminate this agreement for cause.
- 11.4. Record Retention: The Contractor shall maintain records and documentation of the services provided under this Agreement, including fiscal records, and shall retain the records for a period of three (3) years from the date this Agreement is terminated. Said records and documents shall be subject at all reasonable times to inspection, review, or audit by authorized Federal, State, or County personnel.



- 11.5. Assignability: Neither this Agreement, nor any rights hereunder, in whole or in part, shall be assignable or otherwise transferable by the Contractor without the prior written consent of the County.
- 11.6. Waiver: Waiver of strict performance or the breach of any provision of this Agreement shall not be deemed a waiver, nor shall it prejudice the waiving party's right to require strict performance of the same provision, or any other provision in the future, unless such waiver has rendered future performance commercially impossible.
- 11.7. Force Majeure: Neither party shall be liable for any delay or failure to perform its obligations hereunder to the extent that such delay or failure is caused by a force or event beyond the control of such party including, without limitation, war, embargoes, strikes, governmental restrictions, riots, fires, floods, earthquakes, or other acts of God.
- 11.8. Notice: Any notices given under this Agreement are deemed to have been received and to be effective: 1) Three (3) days after the same shall have been mailed by certified mail, return receipt requested; 2) Immediately upon hand delivery; or 3) Immediately upon receipt of confirmation that an E-mail was received. For the purposes of this Agreement, any and all notices shall be addressed to the contacts listed below:

Department: Adams County Human Resources  
Contact: Bryan Ostler  
Address: 4430 South Adams County Parkway  
City, State, Zip: Brighton, Colorado 80601  
Phone: 720-523-6071  
E-mail: bostler@adcogov.org

Department: Adams County Purchasing  
Contact: Anna Forristall  
Address: 4430 South Adams County Parkway  
City, State, Zip: Brighton, Colorado 80601  
Phone: 720-523-6297  
E-mail: aforristall@adcogov.org

Department: Adams County Attorney's Office  
Address: 4430 South Adams County Parkway  
City, State, Zip: Brighton, Colorado 80601  
Phone: 720-523-6116

Contractor: Hays Companies  
Contact: Eric Rosales  
Address: 1125 17<sup>th</sup> Street, Suite 400  
City, State, Zip: Denver, Colorado 80202  
Phone: 720-279-3412  
E-mail: erosales@hayscompanies.com

- 11.9. Integration of Understanding: This Agreement contains the entire understanding of the parties hereto and neither it, nor the rights and obligations hereunder, may be changed, modified, or waived except by an instrument in writing that is signed by the parties hereto.

- 11.10. Severability: If any provision of this Agreement is determined to be unenforceable or invalid for any reason, the remainder of this Agreement shall remain in effect, unless otherwise terminated in accordance with the terms contained herein.
- 11.11. Authorization: Each party represents and warrants that it has the power and ability to enter into this Agreement, to grant the rights granted herein, and to perform the duties and obligations herein described.
- 11.12. Confidentiality: All documentation related to this Agreement will become the property of Adams County. All documentation maintained or kept by Adams County shall be subject to the Colorado Open Records Act, C.R.S. 24-72-201 *et seq.* (“CORA”). The County does not guarantee the confidentiality of any records.

## **12. CHANGE ORDERS OR EXTENSIONS:**

- 12.1. Change Orders: The County may, from time to time, require changes in the scope of the services of the Contractor to be performed herein including, but not limited to, additional instructions, additional work, and the omission of work previously ordered. The Contractor shall be compensated for all authorized changes in services, pursuant to the applicable provision in the Invitation to Bid, or, if no provision exists, pursuant to the terms of the Change Order.
- 12.2. Extensions: The County may, upon mutual written agreement by the parties, extend the time of completion of services to be performed by the Contractor.

## **13. COMPLIANCE WITH C.R.S. § 8-17.5-101, ET. SEQ. AS AMENDED 5/13/08:** Pursuant to Colorado Revised Statute (C.R.S.), § 8-17.5-101, *et. seq.*, as amended May 13, 2008, the Contractor shall meet the following requirements prior to signing this Agreement (public contract for service) and for the duration thereof:

- 13.1. The Contractor shall certify participation in the E-Verify Program (the electronic employment verification program that is authorized in 8 U.S.C. § 1324a and jointly administered by the United States Department of Homeland Security and the Social Security Administration, or its successor program) or the Department Program (the employment verification program established by the Colorado Department of Labor and Employment pursuant to C.R.S. § 8-17.5-102(5)) on the attached certification.
- 13.2. The Contractor shall not knowingly employ or contract with an illegal alien to perform work under this public contract for services.
- 13.3. The Contractor shall not enter into a contract with a subcontractor that fails to certify to the Contractor that the subcontractor shall not knowingly employ or contract with an illegal alien to perform work under this public contract for services.
- 13.4. At the time of signing this public contract for services, the Contractor has confirmed the employment eligibility of all employees who are newly hired for employment to perform work under this public contract for services through participation in either the E-Verify Program or the Department Program.

- 13.5. The Contractor shall not use either the E-Verify Program or the Department Program procedures to undertake pre-employment screening of job applicants while this public contract for services is being performed.
- 13.6. If the Contractor obtains actual knowledge that a subcontractor performing work under this public contract for services knowingly employs or contracts with an illegal alien, the Contractor shall: notify the subcontractor and the County within three (3) days that the Contractor has actual knowledge that the subcontractor is employing or contracting with an illegal alien; and terminate the subcontract with the subcontractor if within three days of receiving the notice required pursuant to the previous paragraph, the subcontractor does not stop employing or contracting with the illegal alien; except that the Contractor shall not terminate the contract with the subcontractor if during such three (3) days the subcontractor provides information to establish that the subcontractor has not knowingly employed or contracted with an illegal alien.
- 13.7. Contractor shall comply with any reasonable requests by the Department of Labor and Employment (the Department) made in the course of an investigation that the Department is undertaking pursuant to the authority established in C.R.S. § 8-17.5-102(5).
- 13.8. If Contractor violates this Section, of this Agreement, the County may terminate this Agreement for breach of contract. If the Agreement is so terminated, the Contractor shall be liable for actual and consequential damages to the County.

The remainder of this page is left blank intentionally.



IN WITNESS WHEREOF, the Parties have caused their names to be affixed hereto:

**Board of County Commissioners**

Steven J. Marisio Chair      7/19/16 Date

**Hays Companies**

Eric J. Rosales Signature      7/15/16 Date

ERIC ROSALES Printed Name      SR VP Title

**Attest:**  
Stan Martin, Clerk and Recorder

Channa  
Deputy Clerk

Approved as to Form:

D. East  
Adams County Attorney's Office

**NOTARIZATION OF CONTRACTOR'S SIGNATURE:**

COUNTY OF Adams)

STATE OF Colorado)SS.

Signed and sworn to before me this 15th day of July, 2016,

by ERIC ROSALES,

Laurie Arellano  
Notary Public

LAURIE ARELLANO  
NOTARY PUBLIC  
STATE OF COLORADO  
NOTARY ID 20064014209  
MY COMMISSION EXPIRES 04/11/2018

My commission expires on: 4-11-18

**CONTRACTOR'S CERTIFICATION OF COMPLIANCE**

Pursuant to Colorado Revised Statute, § 8-17.5-101, *et seq.*, as amended 5/13/08, as a prerequisite to entering into a contract for services with Adams County, Colorado, the undersigned Contractor hereby certifies that at the time of this certification, Contractor does not knowingly employ or contract with an illegal alien who will perform work under the attached contract for services and that the Contractor will participate in the E-Verify Program or Department program, as those terms are defined in C.R.S. § 8-17.5-101, *et seq.* in order to confirm the employment eligibility of all employees who are newly hired for employment to perform work under the attached contract for services.

**CONTRACTOR:**

HAYS COMPANIES  
Company Name

7/15/14  
Date

Eric J. Rosales  
Signature

ERIC ROSALES  
Name (Print or Type)

SR VP  
Title

Note: Registration for the E-Verify Program can be completed at: <https://www.vis-dhs.com/employerregistration>. It is recommended that employers review the sample "memorandum of understanding" available at the website prior to registering

**ADAMS COUNTY FORMAL REQUEST FOR PROPOSAL  
2016.016**

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**Addendum #1  
EMPLOYEE BENEFITS BROKER SERVICES RFP**

**All documents and Addendum related to this RFP  
will be posted on the Rocky Mountain Bid System at:  
<http://www.rockymountainbidsystem.com/Bids/ViewOpenSolicitations.asp>**

**Proposal issue date: April 13, 2016**

**Written questions regarding this RFP will be accepted through April 26, 2016**

**An Addendum to answer all vendor submitted questions  
will be issued no later than April 29, 2016**

**Proposal Opening Date: May 5, 2016**

**Time: 2:00 pm**

**Location: Adams County Government Center  
4430 South Adams County Parkway  
First Floor, Central Reception Desk  
Brighton, CO 80601**



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**ADAMS COUNTY**  
**COLORADO**

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**ADDENDUM #1**

**The purpose of this addendum is to answer vendor submitted questions for RFP 2016.016 Employee Benefits Broker Services.**

1. Our questions are not intended to require a significant amount of time or research in responding. Please feel free to respond simply or direct us to websites or other publicly available information. Please indicate how many retirees covered by your plans are early retirees and how many are over age 65?  
A) Approximately 400; None over 65
2. Please provide us with an approximate enrollment split between Kaiser and your self-funded medical plan.  
A) Approximately 50% each; we have seen some migration to the Kaiser plan from the UHC plan which we believe is due to some recent plan design changes and premium difference.
3. Is your on-site clinic established and operational?  
If so:
  - a. Who is the clinic operator?  
A) CareHere; Clinic began operation 9/28/15.
  - b. Are all employees, regardless of plan choice, able to use the clinic?  
A) Yes, employees who have opted out of the UHC or Kaiser plans have to pay an office co-pay.
  - c. What ages are serviced by the clinic? A) 2 years and up.
  - d. Is the clinic open to employees, dependents and/or retirees?  
A) Employees and dependent that are enrolled in one of our health plans (UHC or Kaiser); Retirees cannot use the clinic.
  - e. Does the clinic dispense any prescriptions? A) Yes
  - f. Does the clinic provide any wellness or population health management services? A) Yes
  - g. How much does the employee pay (if anything) for a primary care visit at the clinic?  
A) It's at no charge.
4. Please indicate the year in which Adams County anticipates an RFP solicitation for each of the following, by placing an "x" below or listing the lines of coverage to include the year in which an RFP is anticipated:

Coverage	Remainder of 2016	2017	2018	2019	2020	2021
Third-Party Administrator (medical)			X			
Self-Funded Medical Network	N/A					
Insured HMO	N/A					

Unbundled Pharmacy (PBM)	N/A					
Clinic Operator					X	
Wellness Program vendor	N/A					
Dental			X			
Vision			X			
Basic & Supplemental Term Life & AD&D					X	
Voluntary life and AD&D					X	
Disability					X	
Stop Loss			X			
Health Plan Consulting Services					X	
Employee Assistance Program (EAP)	N/A					
Other (please specify, i.e. unbundled disease management, FSA or COBRA Administration)	N/A					

5. Please indicate the year of your last self-funded medical claims audit.  
A) 2015
6. Please indicate the year of your last PBM audit.  
A) N/A
7. Has Adams County ever conducted a dependent eligibility audit?  
A) No
8. Do you require proof of dependent eligibility for new hires and documents to support mid-year status changes?  
A) Yes

9. What resources does the County currently use to benchmark your plan against your competitors?  
A) The Benefits Consultant provides this information.
10. Which other government entities and/ or private employers are included in current benchmarking?  
A) Front Range Counties and Cities
11. What benchmarking information is desired that is not currently available?  
A) We would get recommendations from the Benefits Broker.
12. Does the County offer a high deductible health plan? If so, do you offer pre-tax employee deduction for deposit to the HSA?  
A) No, but we will be considering this and looking to the Broker for recommendations with an onsite health clinic and IRS regulations
13. If the County sponsors a Health Reimbursement Arrangement (HRA) or Health Savings Account (HSA), please describe what is offered and how and when employer contributions are made to these accounts.  
A) N/A
14. Please briefly describe or direct us to communication materials available to employees and retirees regarding your on-site clinic, wellness programs and their benefit plans. This might include an employee benefits booklet, benefits website, newsletters, videos or other information (it appears as though detailed information may be available on your website following a secure log-in).  
A) Clinic-CareHere.com; Other materials posted on our county intranet-not available to non-employees.
15. Who currently updates your Summary Plan Description and other employee communications?  
A) The Benefits Administrator (county employee)
16. Please describe the assistance that is desired from your consultant in the communication regarding changes or new benefit offerings.  
A) Drafting educational materials and attendance at open enrollment meetings.
17. Are there any specific communication materials that your consultant would develop on your behalf?  
A) Yes, open enrollment materials; education materials on appropriate plan utilization.
18. What types of employee communication materials that are developed by others would the consultant be asked to review?  
A) Educational materials – flyers, mailings
19. Are any of medical plans offered by the County, grandfathered with respect to the Affordable Care Act?



- A) Yes, Kaiser
20. Which wellness tasks are linked to incentives? Please briefly describe the incentive.  
A) Completion of HRA, blood draw, follow-up consultation with clinic provider;  
Incentive: \$180 or Fitbit.
21. Does the County provide any wellness program incentives that are "outcome" based?  
A) Not at this time.
22. We understand that health plan consulting and other professional services are subject to public procurement guidelines that often require periodic marketing. We understand this RFP may have been issued in part as a result of these requirements. Please help us understand your readiness to make a change.
- a. But for public procurement guidelines, is it likely that this RFP would have still been issued at this time?  
A) Yes
- b. What specific improvements or enhancements would the County consider significant enough to outweigh the additional effort associated with making a change in your consulting arrangement?  
A) None, at this time.
23. For services that do not occur every year, such as formal RFPs, does the County prefer to have these costs spread over the term of the agreement, or to be billed for these services only in the year in which the service is performed?  
A) Billed in the year service is performed.
24. Is there a central database for all claims and encounter data? In other words, is there a data warehouse that receives medical and pharmacy data? If so, does the warehouse also receive any of the following?  
A) Yes-UHC and Kaiser have this data.
- a. Encounter data from the clinic  
A) CareHere – Clinic Operator
- b. EAP data  
A) None
- c. Biometric or health risk assessment data  
A) CareHere, UHC, Kaiser
25. Please help us understand your current fee structure with your broker? Monthly retainer, hourly rates, etc., and whether or not commissions are also included in your rates in any line of coverage and paid to Gallagher in addition to your fees?  
A) Monthly retainer, no separate commissions.
26. If commissions are a part of your rates and/or broker compensation, please identify the total annual dollar amount of such income (this number is readily available from Gallagher or the carrier(s)).

- A) N/A
27. Has a separate out of scope fee been paid to your current consultant in the past year or current year? If so please briefly describe the out of scope service(s).  
A) Work provided on placing and analysis of Clinic RFP.
28. Please share publicly available information as it relates to the annual budget amount or previous year expenses related to benefits consulting/brokerage services?  
A) N/A
29. What are the top three things that employees' state they value most about your current programs?  
A) Cost, Coverage, Wellness
30. What are the top three concerns, if any, that the County or employees have regarding your current programs?  
A) Based on a recent internal all employee survey, the top three concerns are escalating costs for medical services, choice of coverage, and sustainability of the current coverage based on the escalation of costs and utilization.
31. What is the effective date of the contract?  
A) Once the awarded supplier and the County have executed the agreement, this is the effective date of the contract – typically 15-30 days after award.
32. What contract term is the County looking for.  
A) One year term with the option for three (3) additional one-year extensions providing satisfactory service is given and all terms and conditions of the agreement have been fulfilled.
33. Can you elaborate on the number of meetings that the County would expect in a year? Please include strategy meetings, commissioner meetings, enrollment meetings, etc.  
A) Strategy Meetings-3  
Commissioner Meetings – 1  
Monthly/Quarterly Plans Performance Reviews – Telephonic – 6  
Face to Face – 4  
Open Enrollment - 6
34. What is the current employee participation by medical carrier - Kaiser & UHC?  
A) Approximately 50% for each one.
35. What is the current employee contribution levels by medical carrier – Kaiser & UHC?  
A) Approximately 22% of premium.
36. Please elaborate on the required level of wellness consulting expectations?  
A) Provide ideas and strategies to enhance participation in wellness programs.

37. Does the County have union contracts? If so, which employee populations are under a union contract? What do the contracts govern – plan design, contributions, etc?  
A) No union contracts and none anticipated.
38. Who is the Adams County's current consultant for the services included in this RFP? What was the annual fee/commission paid to the consultant for these services for the plan years beginning in 2014, 2015 and, if applicable, 2016?  
A) Gallagher Benefits Services
39. Is this RFP a mandated, cycle-driven initiative or is the County pursuing Broker Services to fulfill specific needs not currently being addressed?  
A) Mandated, cycle driven.
40. The document addresses specific carriers for the various coverages that Adams County provides to employees. Is it the intention of the County to stay with these carriers for future plan years?  
A) Yes, at this time.
41. The Scope of Work addresses wellness program consultation. Does Adams County currently utilize a wellness program?  
A) Yes, the County created it and it is run internally.
42. The Scope of Work addresses cost management that integrates with onsite clinics. Does Adams County currently operate any onsite clinics?  
A) Yes, one clinic. The clinic opened 9/28/15. It is operated through a contract with CareHere.
43. Is the response to be submitted ONLY on a thumb-drive or CD, or should a hard copy of the response accompany the thumb-drive/CD?  
A) No, please do not submit your response only on the thumb drive. From the solicitation, this is what will be required: one (1) (Original) hard copy, four (4) paper copies and one (1) CD or Thumb Drive of your firm's submitted proposal in a single PDF format.

**The Proposal opening due date and time remain the same: May 5, 2016 at 2:00 p.m. at the Adams County Government Center, 4430 South Adams County Parkway, First Floor Central Reception, Brighton, Colorado 80601.**

**Please incorporate this information into your RFP response.**

**End of Addendum #1**



**ADAMS COUNTY FORMAL REQUEST FOR PROPOSAL  
2016.016**

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**EMPLOYEE BENEFITS BROKER SERVICES RFP**

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**Time: 2:00 pm**

**Location: Adams County Government Center  
4430 South Adams County Parkway  
4<sup>th</sup> Floor, C4000A  
Brighton, CO 80601**



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**ADAMS COUNTY**  
**COLORADO**

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## GENERAL INSTRUCTIONS

1. The Adams County Board of Commissioners by and through its Purchasing Division of the Finance Department is accepting proposals for Employee Benefits Broker Services for the Human Resources Department.
2. **All documents related to this RFP will be posted on the Rocky Mountain Bid System at:**  
<http://www.rockymountainbidsystem.com/Bids/ViewOpenSolicitations.asp>
  - 2.1. Interested parties must register with this service to receive these documents.
  - 2.2. This service is offered free or with an annual fee for automatic notification services.
3. Written questions may be submitted through April 26, 2016. All questions are to be submitted to Anna Forristall, Contract Administrator, by email at [aforristall@adcogov.org](mailto:aforristall@adcogov.org).
4. An Addendum to answer all vendor submitted questions will be issued no later than April 29, 2016.
5. Proposals
  - 5.1. Sealed proposals for consideration will be received at the office of the Purchasing Division at the Adams County Government Center, 4430 South Adams County Parkway, Brighton Colorado 80601, up to 2:00 p.m. on May 5, 2016.
  - 5.2. The proposal opening time shall be according to our clock.
  - 5.3. Proposals will be publicly opened and the names of the companies submitting proposals will be read aloud.
  - 5.4. Proposals may be mailed or delivered in person and **must be** in a sealed envelope clearly labeled with Company Name, Proposal Number and Project Title.
  - 5.5. No proposals will be accepted after the due date and time established above except by written addenda.
  - 5.6. The proposal must be submitted on a CD or a Thumb Drive in a single PDF file. One (1) set of brochures or other supportive documents may be included with the proposal narrative.
  - 5.7. The two proposal signature pages "**CONTRACTOR'S CERTIFICATION OF COMPLIANCE**" pursuant to Colorado Revised Statute (C.R.S.), § 8-17.5-101, *et seq.*, as amended 5/13/08, and the "**PROPOSAL FORM**" acknowledging the receipt of addendum(s) must be signed and included as hard copy with the CD or Thumb Drive.

- 5.8. Proposals may not be withdrawn after date and hour set for closing. Failure to enter contract or honor the purchase order will be cause for removal of supplier's name from the Vendor's List for a period of twelve (12) months from the date of this opening.
- 5.9. In submitting the proposal, the vendor agrees that acceptance of any or all proposals by the Purchasing Manager within a reasonable time or period constitutes a contract. No delivery shall become due or be accepted unless a purchase order shall first have been issued by the Purchasing Division.
- 5.10. The County assumes no responsibility for late deliveries of mail on behalf of the United States Post Office or any other delivery system.
- 5.11. The County assumes no responsibility for a proposal being either opened early or improperly routed if the envelope is not clearly marked on the outside:

**EMPLOYEE BENEFITS BROKER SERVICES RFP 2016.016**

- 5.12. In the event of a situation severe enough to cause the Adams County Board of Commissioners to close the County offices for any reason, the Purchasing Manager has the prerogative of rescheduling the proposal opening time and date. No proposal will be considered above all other proposals by having met the proposal opening time and date requirements to the exclusion of those who were unable to present their proposal due to a situation severe enough to cause the Board of Commissioners to close the County offices.
- 5.13. Proposal must be submitted in the format supplied and/or described by the County. Failure to submit in the format provided may be cause for rejection of the proposal. Proposals must be furnished exclusive of taxes.
- 5.14. No award will be made to any person, firm, or corporation, which is in arrears upon any obligation to the County.
- 5.15. If submitting a joint venture proposal or a proposal involving a partnership arrangement, articles of partnership stating each partner's responsibilities shall be furnished and submitted with the proposal.
- 5.16. The County reserves the right to waive any irregularities or informalities, and the right to accept or reject any and all proposals, including but not limited to:
  - 5.16.1. Any Proposal which does not meet bonding requirements, or,
  - 5.16.2. Proposals which do not furnish the quality, or,
  - 5.16.3. Offer the availability of materials, equipment or services as required by the specifications, description or scope of services, or,
  - 5.16.4. Proposals from offerors who lack experience or financial responsibility, or,
  - 5.16.5. Proposals which are not made to form.

- 5.17. The Board of County Commissioners may rescind the award of any proposal within one week thereof or at its next regularly scheduled meeting; whichever is later, when the public interest will be served thereby.
  - 5.18. Issuance of this solicitation does not commit the County to award any Agreement or to procure or Agreement for any equipment, materials or services.
  - 5.19. If a formal Agreement is required, the Contractor agrees and understands that a Notice of Award does not constitute an Agreement or create a property interest of any nature until an Agreement is signed by the Awardee and the Board of County Commissioners and/or their authorized designee.
  - 5.20. Only sealed proposals received by the Purchasing Division of the Finance Department will be accepted; proposals submitted telephone, email, or facsimile machines are not acceptable.
  - 5.21. All documentation submitted in response to this solicitation will become the property of Adams County. All documentation maintained or kept by Adams County shall be subject to the Colorado Open Records Act. C.R.S. 24-72-201 *et. seq.* ("CORA"). Accordingly, respondents are discouraged from providing information that they consider confidential, privileged, and/or trade secrets as part of a response to this solicitation. Any portions of submissions that are reasonably considered confidential should be clearly marked. The County does not guarantee the confidentiality of any records.
6. Adams County is an equal opportunity employer.
  7. The County ensures that disadvantaged business enterprises will be afforded full opportunity to submit bids in response to all invitations and will not be discriminated against on the grounds of race, color, national origin, age, gender, or disability in consideration for an award.
  8. COOPERATIVE PURCHASING: Adams County encourages cooperative purchasing in an effort to assist other agencies to reduce their cost of bidding and to make better use of taxpayer dollars through volume purchasing. Contractor(s) may, at their discretion, agree to extend the prices and/or terms of the resulting award to other state or local government agencies, school districts, or political subdivisions in the event they would have a need for the same product/service. Usage by any entity shall not have a negative impact on Adams County in the current term or in any future terms.

The Contractor(s) must deal directly with any governmental agency concerning the placement of purchase orders/agreements, freight/delivery charges, contractual disputes, invoices, and payments. Adams County shall not be liable for any costs or damages incurred by any other entity.

9. **INSURANCE:** The Contractor agrees to maintain insurance of the following types and amounts:
- 9.1. Commercial General Liability Insurance: to include products liability, completed operations, contractual, broad form property damage and personal injury.
    - 9.1.1. Each Occurrence \$1,000,000
    - 9.1.2. General Aggregate \$2,000,000
  - 9.2. Comprehensive Automobile Liability Insurance: to include all motor vehicles owned, hired, leased, or borrowed.
    - 9.2.1. Bodily Injury/Property Damage \$1,000,000 (each accident)
    - 9.2.2. Personal Injury Protection Per Colorado Statutes
  - 9.3. Workers' Compensation Insurance: Per Colorado Statutes
  - 9.4. Professional Liability Insurance: to include coverage for damages or claims for damages arising out of the rendering, or failure to render, any professional services.
    - 9.4.1. Each Occurrence \$1,000,000
    - 9.4.2. This insurance requirement applies only to Contractors who are performing services under this Agreement as professionals licensed under the laws of the State of Colorado, such as physicians, lawyers, engineers, nurses, mental health providers, and any other licensed professionals.
  - 9.5. The Contractor's commercial general liability, and comprehensive automobile liability insurance policies and/or certificates of insurance shall be issued to include Adams County as an "additional insured," and shall include the following provisions:
    - 9.5.1. Underwriters shall have no right of recovery or subrogation against the County, it being the intent of the parties that the insurance policies so affected shall protect both parties and be primary coverage for any and all losses resulting from the actions or negligence of the Contractor.
    - 9.5.2. The insurance companies issuing the policy or policies shall have no response against the County for payment of any premiums due or for any assessments under any form of any policy.
    - 9.5.3. Any and all deductibles contained in any insurance policy shall be assumed by and at the sole risk of the Contractor.
  - 9.6. All insurers of the Contractor must be licensed or approved to do business in the State of Colorado. Upon failure of the Contractor to furnish, deliver and/or maintain such insurance as provided herein, this Agreement, at the election of the County, may be immediately declared suspended, discontinued, or terminated. Failure of the Contractor in obtaining and/or maintaining any required insurance shall not relieve the Contractor from any liability under this Agreement, nor shall the insurance requirements be construed to conflict with the obligations of the Contractor concerning indemnification.
  - 9.7. Each insurance policy herein required shall be endorsed to state that coverage shall not be suspended, voided, or canceled without thirty (30) days prior written notice by certified mail, return receipt requested, to the County.



- 9.8. At any time during the term of this Agreement, the County may require the Contractor to provide proof of the insurance coverage's or policies required under this Agreement.
  - 9.9. The Contractor shall not commence work under this contract until they have submitted to the County and received approval thereof, certificates of insurance showing that they have complied with the foregoing insurance.
  - 9.10. All referenced insurance policies and/or certificates of insurance shall be issued to include Adams County as an "additional insured." The name of the proposal or project must appear on the certificate of insurance.
  - 9.11. Underwriters shall have no right of recovery or subrogation against the County; it being the intent of the parties that the insurance policies so affected shall protect both parties and be primary coverage for any and all losses covered by the described insurance.
  - 9.12. The clause entitled "Other Insurance Provisions" contained in any policy including the County as an additional insured shall not apply to The County.
  - 9.13. If any of the said policies shall be or at any time become unsatisfactory to the County as to form or substance, or if a company issuing any such policy shall be or at any time become unsatisfactory to the County, the Contractor shall promptly obtain a new policy, submit the same to the Purchasing Manager of Adams County for approval and thereafter submit a certificate of insurance as herein above provided. Upon failure of the Contractor to furnish, deliver and maintain such insurance as provided herein, this contract, at the election of the County, may be immediately declared suspended, discontinued or terminated.
- 10.** Contractor shall comply with the requirements of the Occupational Safety and Health Act (OSHA) and shall review and comply with the County's safety regulations while on any County property. Failure to comply with any applicable federal, state or local law, rule, or regulation shall give the County the right to terminate this agreement for cause.
  - 11. COMPLIANCE WITH C.R.S. § 8-17.5-101, ET. SEQ. AS AMENDED 5/13/08:** Pursuant to Colorado Revised Statute (C.R.S.), § 8-17.5-101, *et. seq.*, as amended 5/13/08, the Contractor shall meet the following requirements prior to signing this Agreement (public contract for service) and for the duration thereof:
    - 11.1. The Contractor shall certify participation in the E-Verify Program (the electronic employment verification program that is authorized in 8 U.S.C. § 1324a and jointly administered by the United States Department of Homeland Security and the Social Security Administration, or its successor program) or the Department Program (the employment verification program established by the Colorado Department of Labor and Employment pursuant to C.R.S. § 8-17.5-102(5)) on the attached certification.

- 11.2. The Contractor shall not knowingly employ or contract with an illegal alien to perform work under this public contract for services.
- 11.3. The Contractor shall not enter into a contract with a subcontractor that fails to certify to the Contractor that the subcontractor shall not knowingly employ or contract with an illegal alien to perform work under this public contract for services.
- 11.4. At the time of signing this public contract for services, the Contractor has confirmed the employment eligibility of all employees who are newly hired for employment to perform work under this public contract for services through participation in either the E-Verify Program or the Department Program.
- 11.5. The Contractor shall not use either the E-Verify Program or the Department Program procedures to undertake pre-employment screening of job applicants while this public contract for services is being performed.
- 11.6. If Contractor obtains actual knowledge that a subcontractor performing work under this public contract for services knowingly employs or contracts with an illegal alien, the Contractor shall: notify the subcontractor and the County within three days that the Contractor has actual knowledge that the subcontractor is employing or contracting with an illegal alien; and terminate the subcontract with the subcontractor if within three days of receiving the notice required pursuant to the previous paragraph, the subcontractor does not stop employing or contracting with the illegal alien; except that the Contractor shall not terminate the contract with the subcontractor if during such three days the subcontractor provides information to establish that the subcontractor has not knowingly employed or contracted with an illegal alien.
- 11.7. Contractor shall comply with any reasonable requests by the Department of Labor and Employment (the Department) made in the course of an investigation that the Department is undertaking pursuant to the authority established in C.R.S. § 8-17.5-102(5).
- 11.8. If Contractor violates this Section, of this Agreement, the County may terminate this Agreement for breach of contract. If the Agreement is so terminated, the Contractor shall be liable for actual and consequential damages to the County.

**End General Information**

The remainder of this page is left blank intentionally.

## **STATEMENT OF WORK**

Adams County is seeking a Benefits Broker for the County's employee insurance benefits and is looking for continuity of services in the rapidly changing area of employee benefits. The County is particularly interested in a broker who can offer creative, innovative approaches, with a proven track record, that allows the County to maintain quality programs and contain or reduce costs.

The selected broker will perform a full range of benefit program services related to the acquisition, implementation, maintenance, communication and improvement of the County's employee insurance benefits.

A second phase may be incorporated in the process, in which the Committee will invite a limited number of vendors who received the highest scores during phase one to provide an oral presentation. If the Committee incorporates this second phase, the numbers of vendors who are invited to provide oral presentations will be determined by the Committee after the written Proposals have been scored. The evaluative score from the oral presentation will be used to determine the top rated vendor(s).

## **SCOPE OF WORK**

- Negotiate County benefit plan renewals to include plan marketing and contract review for the following:
  - United Healthcare (UHC) Self Funded Health Plans
  - Stop Loss Plan
  - Kaiser Health Plan
  - Delta Dental Self Funded and Fully Insured Plans
  - VSP Self Funded Vision Plan
  - Life Insurance
  - Short Term Disability
  - Long Term Disability
  - FMLA Administration Services
  - Early Retiree Health Plans
  - Headstart Student Accident Plan
  - Volunteer Medical Plan
- Review of all carrier contracts and other documents for accuracy
- Provide actuary services to include:
  - Receipt and analysis of claims data from all plans
  - Monthly self funded plans performance/experience report to include trend analysis
  - Year end IBNR analysis and recommendations

- Provide liaison and advocate services with carriers on:
  - Coverage interpretations
  - Claims administration
- Provide annual benchmarking report on Front Range public entity benefit plans and industry specific reports
- Determine and recommend the most cost efficient funding methods for benefit programs
- Provide updates and planning on Health Care Reform and other compliance issues
- Facilitate periodic meetings with UHC and Kaiser Health Plans to review utilization reports
- Provide consultation on wellness programs upon request
- Provide consultation and support on Employee Health Clinic and integration of health clinic measures with UHC claims data
- Attend monthly and quarterly meetings to review self funded health plan and Employee Health Clinic performance
- Provide updates, education, and recommendations on:
  - Health Care Reform
  - Industry Trends and Patterns
  - Compliance Issues
- Provide options and strategies to address health plans increasing costs and sustainability to include:
  - Plan Design
  - Contribution Strategies
  - Early Retiree Blending
  - Cost Containment Programs
- Assist with open enrollment marketing and education to include making employees and dependents better consumers
- Assist with the implementation and communication of new programs or changes to existing programs, which may include attending and presenting information at Open Enrollment meetings when requested. Work closely with the Benefits Team to develop and execute the benefits communication strategy

- Assist with development of long range goals, objectives and strategies to sustain the County's health plans including recommending innovative ideas and new products, programs and services to ensure a competitive, valued and cost effective benefits program
- Introduce proven programs and ideas to aggressively manage healthcare costs that fully integrate with an onsite clinic philosophy
- Evaluate and make recommendations on plan design in light of industry trends and labor market conditions, claims cost trends, alternative delivery systems and legal requirements. Evaluate eligibility, cost-sharing and benefit structure and network savings
- Provide full transparency of all fees with specific details for services provided including:
  - Monthly/Annual Fees
  - Special Project Fees
  - All other fees, specifically itemized



## **BROKER QUESTIONNAIRE**

**Please include your answers to these questions in your proposal.**

1. Describe the ownership of your organization and provide a brief company history, with focus on your employee benefits division including the number of employees within CO, the total amount of insurance written within the State of Colorado and the total amount of insurance written for public entities in Colorado. Describe the corporate structure of the office that would service Adams County, if chosen.
2. Provide the responsibility and background information of each member of the proposed account team. List the office location for each individual.
3. Describe the training (industry, internal, computer, other) that your firm expects or requires your staff to receive?
4. Provide details about how our account will be handled.
5. Describe any wellness and education services that you expect to provide to our account and any additional services that are available at our request. Note which services will be subject to an additional fee. Please provide samples of materials that you offer.
6. Do you provide employee communication services for your clients' employees? If so, please provide a general description of your capabilities. Please provide sample employee communication materials that you have distributed to other clients. How do you help facilitate annual open enrollments? Include technology based approaches and identify additional costs, if any.
7. Describe the financial and actuarial services that you offer. Describe how you can assist us with metrics/ROIs for our benefits program.
8. Discuss briefly any other divisions or special expertise you have that may be helpful to Adams County's Benefits program.
9. Describe how you will approach the marketplace. What information or procedures will you expect of the County, prior to marketing our coverage?
10. Which markets do you typically represent? If your firm has ownership in any managing general agent, surplus lines broker, reinsurance broker, insurer, reinsurer or other organization you would use in placing insurance coverage's, please identify them.
11. Discuss procedures used by your firm in evaluating insurers in terms of financial integrity or acceptable capacity.
12. Discuss the time required to market coverage and your view of Adams County's role in the process.

13. Please include a list of any benefits services that may be available to the County and include the cost of those services including online benefits services and dependent audits. Please provide samples of these services.
14. Provide details of how your firm will be compensated. List any services that you charge for separately.
15. Please provide two references of accounts that have terminated services within the past two years. Please describe the reason(s) for termination.
16. Please provide four current account references.
17. Please list any current clients that are governmental entities.
18. Discuss any impending changes in your organization that could impact the delivery of your services.
19. Describe the form of professional liability or errors and omissions insurance carried by your company and the amount of coverage.
20. Describe in detail your service philosophy, and the number of staff members available to support your clients.
21. List ways that your firm can assist with the management of insurance, including preparation of claims activity reports from carriers; executive summary reports; underwriting analysis for annual renewals; annual financial projections for budgeting purposes analysis, etc.
22. Describe the process your firm uses for carrier renewals and negotiations.
23. Indicate how you keep clients informed of regulatory and legislative changes that affect insurance plans.
24. Describe any other facets of your organization and your firm's experience that are relevant to this proposal that have not been previously described and that you feel warrant consideration.

## **EVALUATION PROCESS**

All proposals will be evaluated based on the following criteria:

- The extent that the proposal meets the requirements in this RFP.
- Market expertise and experience of the broker representative that will be assigned to our account.
- Understanding of the services requested and outlined in the scope of work.
- Location and availability of the personnel assigned to the County's account.
- Experience with similar programs (health clinic and self funded plans)
- Itemized Broker fees

## **END OF SCOPE OF WORK**

The remainder of this page is left blank intentionally.

### **Submittal Checklist**

- Vendor Information Form
- W-9
- Contractor's Certification of Compliance (Signature required)
- Proposal Form/Contractor's Statement (Signature required)
- Broker Questionnaire responses
- Two (2) References of accounts that have terminated services within the past two years
- Four (4) Current References
- One (1) marked Original and Four (4) paper copies of the proposal submittal
- One (1) CD or Thumb Drive of submitted proposal in a single PDF document



**Finance Department**  
4430 South Adams County Parkway  
Brighton, CO 80601  
PHONE 720.523.6055 FAX 720.523.6058

## VENDOR INFORMATION FORM

**All suppliers must complete and return this form as well as a W-9**  
*(Payments & New Vendor #'s will not be processed without a completed W-9)*

### PLEASE PRINT OR TYPE ALL INFORMATION

Enter the name of Adams County employee and/or Department/Elected Office requesting this form be completed.

\_\_\_\_\_  
*Employee Name*

\_\_\_\_\_  
*Department/Elected Office*

Company Name (Please include dba name, if applicable.)

\_\_\_\_\_  
*Company Name*

\_\_\_\_\_  
*DBA Name (if applicable)*

Does this company function solely as a manufacturer rep or distributor? YES  NO

If YES, is invoice payment sent to your remit-to address or the manufacturer?

If Remit-to, please attach or forward a list of the companies with their corresponding remit-to address.

Does this company have more than one location with the same Federal Tax ID number that Adams County also conducts transactions with? YES  NO

If YES, please copy and complete this form for each location.

Remit-To Information (*Invoice Payment*):

\_\_\_\_\_  
*Company Name*

\_\_\_\_\_  
*Address*

\_\_\_\_\_  
*Address 2*

\_\_\_\_\_  
*City*

\_\_\_\_\_  
*County*

\_\_\_\_\_  
*State*

\_\_\_\_\_  
*Zip Code*

\_\_\_\_\_  
*Phone Number*

\_\_\_\_\_  
*Fax Number*

Address for Purchase Orders/Contracts (*If different from above.*)

\_\_\_\_\_  
*Address*

\_\_\_\_\_  
*Address 2*

\_\_\_\_\_  
*City*

\_\_\_\_\_  
*County*

\_\_\_\_\_  
*State*

\_\_\_\_\_  
*Zip Code*

\_\_\_\_\_  
*Phone Number*

\_\_\_\_\_  
*Fax Number*



Phone Number for Quotes or Placing Orders and Fax Number to send a Purchase Order or a Request for Quote

\_\_\_\_\_  
*Phone Number*

\_\_\_\_\_  
*Fax Number*

**Company Information**

\_\_\_\_\_  
*Web Address*

\_\_\_\_\_  
*Company Email Address*

E-Mail Address for Purchasing Orders or Request for Quotes (if different from above)

\_\_\_\_\_  
*Company Email Address*

**Contact Information**

\_\_\_\_\_  
*Contact Name*

\_\_\_\_\_  
*Position/Title*

\_\_\_\_\_  
*Contact Phone Number*

\_\_\_\_\_  
*Contact Fax Number*

\_\_\_\_\_  
*Contact Email Address (if different than above)*

**BUSINESS CLASSIFICATION** – Please check all that apply and attach supporting documents for these business classifications:

- |   |   |
|---|---|
| <input type="checkbox"/> Small Business   | <input type="checkbox"/> Veteran Owned            |
| <input type="checkbox"/> Disadvantaged  | <input type="checkbox"/> Vietnam Veteran          |
| <input type="checkbox"/> Woman Owned  | <input type="checkbox"/> Service Disabled Veteran |
| <input type="checkbox"/> Hub-Zone   |   |
| <input type="checkbox"/> Business is 51% owned by physically disabled individual(s) |   |

**ETHNICITY OF BUSINESS** – Please check where applicable

- |  |  |
|--|--|
| <input type="checkbox"/> Black American              | <input type="checkbox"/> Native American |
| <input type="checkbox"/> Hispanic American           | <input type="checkbox"/> Caucasian       |
| <input type="checkbox"/> Asian Pacific American      | <input type="checkbox"/> Other _____     |
| <input type="checkbox"/> Subcontinent Asian American |  |

**CONFLICT OF INTEREST**

Does this company employ any Adams County employees or their immediate family members? YES  NO

If YES, please explain

Does this company have any financial interests with an Adams County employee? YES  NO

If YES, please explain

*Thank you!*

**CONTRACTOR'S CERTIFICATION OF COMPLIANCE**

Pursuant to Colorado Revised Statute, § 8-17.5-101, *et seq.*, as amended 5/13/08, as a prerequisite to entering into a contract for services with Adams County, Colorado, the undersigned Contractor hereby certifies that at the time of this certification, Contractor does not knowingly employ or contract with an illegal alien who will perform work under the attached contract for services and that the Contractor will participate in the E-Verify Program or Department program, as those terms are defined in C.R.S. § 8-17.5-101, *et seq.* in order to confirm the employment eligibility of all employees who are newly hired for employment to perform work under the attached contract for services.

CONTRACTOR:

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (Print or Type)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

Note: Registration for the E-Verify Program can be completed at: <https://www.vis-dhs.com/employerregistration>. It is recommended that employers review the sample "memorandum of understanding" available at the website prior to registering



**ADAMS COUNTY**  
**COLORADO**

**PROPOSAL FORM**  
**EMPLOYEE BENEFITS BROKER SERVICES 2016.016**

**CONTRACTOR'S STATEMENT**

I have read and fully understand all the special conditions herein set forth in the foregoing paragraphs, and by my signature set forth hereunder, I hereby agree to comply with all said special conditions as stated or implied. In consideration of the above statement, the following proposal is hereby submitted.

<b>Written Amount for ONE YEAR OF SERVICE</b>	<b>\$</b>
<b>Please break-down the above cost (What does this Cost include?)</b>	<b>Dollar Amount</b>

WE, THE UNDERSIGNED, HEREBY ACKNOWLEDGE RECEIPT OF THE FOLLOWING:  
Addenda Numbers \_\_\_\_\_ If None, Please write NONE.

Company Name	Date
Address	Signature
City, State, Zip Code	Printed Name
County	Title
Telephone	Fax
Email Address	

# EXHIBIT A



RESPONSE TO REQUEST FOR PROPOSAL

## Request for Proposal 2016.016

### Employee Benefits Broker Services

Delivering Effective Employee Benefits Brokerage Services for Organizational Success

### Prepared For:



May 5, 2016

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F. Sample Risk Pool Management Analysis	
G. Truveris' RxChoice Software	





## COVER LETTER

May 5, 2016

Purchasing Division  
Adams County Government Center  
4430 South Adams County Parkway  
Brighton, CO 80601

RE: Request for Proposal 2016-016

Team Adams County,

On behalf of the entire consulting team at Hays Companies, we want to thank you for the opportunity to showcase Hays Health and Welfare Consultancy capabilities in response to the County's Request for Proposal. I believe that after reviewing our response, Adams County will come away with a solid understanding of what makes Hays uniquely positioned to balance your day-to-day administration and employee benefit program risk management solutions in the market. The Hays team we have assembled is one that will offer unparalleled service, enhance strategic decision making, provide detailed program assessments, and support all aspects of your day-to-day needs.

Please note that our electronic response features links to online videos highlighting some of our areas of expertise while introducing you to the Hays culture.

We welcome the opportunity to meet with your team to discuss how Hays Companies may successfully partner with Adams County.

If you have questions about any of the material contained in this response, please do not hesitate to contact us. Thank you!

Sincerely,



**Eric Rosales, Senior Vice President**

Hays Companies of Denver  
1125 17th Street, Suite 400  
Denver, CO 80202  
(303) 279-3412

[erosales@hayscompanies.com](mailto:erosales@hayscompanies.com)

**Vigilant Innovative Engaged**  
**Experts Trusted Value Entrepreneurial**  
**Performance-Driven Credible**



## COVER LETTER

1. Describe the ownership of your organization and provide a brief company history, with focus on your employee benefits division including the number of employees within CO, the total amount of insurance written within the state of Colorado and the total amount of insurance written for public entities in Colorado. Describe the corporate structure of the office that would serve Adams County, if chosen.

Hays Companies is a national, full service, privately-held brokerage and consulting firm, which specializes in employee benefits, risk management, and private client consulting. Hays was founded in 1994 through the entrepreneurial spirit of James C. Hays and five other senior level individuals from major brokerage firms. Hays was formed to fill the void of customer service and creative ideas left untouched in the marketplace. Our goal from the beginning has been to provide our expertise to help our clients protect assets, manage risks, and solve problems through a customized service delivery model. What started as six people has now grown to form a staff of over 750 professionals and over 2,400 clients serviced.

We invite you to take a sneak peek at the Introduction to Hays Companies via the following video below (click on the image, or follow this link - <https://vimeo.com/152605935>):



Our growth since our inception in 1994 has been completely organic, growing one client at a time. There have been no mergers or acquisitions involving Hays since 1994, and we have no debt. In 2015, Business Insurance ranked Hays as the 21st largest brokerage firm in the United States (based on 2014 revenues). We are currently the 2nd largest privately-held employee benefits brokerage firm in the United States. Our Employee Benefits practice comprises 50% of Hays Companies total revenue. This is uncommon in the industry as most consulting firms are more heavily focused on Property and Casualty business.





## VENDORS/CARRIER RELATIONSHIPS

The timeline below outlines Hays Companies' organic growth since 1994 to become the 21st largest brokerage firm in the country:



Hays currently has 35 offices nationally, 25 of which provide employee benefit services. These locations include Denver, Chicago, Milwaukee, Minneapolis, Kansas City, St. Louis, Boston, Los Angeles, Salt Lake County, San Francisco, Fort Lauderdale, Washington D.C., New York/New Jersey, Portland, Phoenix, Seattle, Indianapolis, Des Moines, Charlotte, Philadelphia, Sioux Falls, Atlanta, Wichita and Dallas. Throughout the 25 Hays employee benefit offices there are over 350 benefit professionals. Hays Companies is licensed in all 50 states.

### Industries we serve:



## VENDORS/CARRIER RELATIONSHIPS

Hays Companies of Denver was established in 2004 by 2 individuals, Joe Long and Eric Rosales. Our growth since opening has been completely organic, growing one client at a time. Today, the Denver office has 110+ benefit clients with a heavy focus on public entities. The Denver office employs 35 insurance professionals (20 employee benefits professionals) and is a full service office, providing employee benefits, risk management, and private client consulting services. We are unable to provide the amount of insurance written in Colorado. Please refer to question #17 for additional information.

*Please refer to the Appendix (C) for a Hays Companies of Denver Client List.*

2. Provide the responsibility and background information of each member of the proposed account team. List the office location of each individual.



*Further details of our proposed Denver Consulting Team are listed on the following page.*

Team Member	Account Responsibilities
<p>Practice Leader - Hays Companies of Denver</p> <p>Eric Rosales</p>	<ul style="list-style-type: none"> <li>▪ Practice Leader of Hays Companies of Denver</li> <li>▪ Knowledge champion for all Hays resources</li> <li>▪ Provides high level strategic direction</li> <li>▪ Assists with existing client development</li> </ul>





## VENDORS/CARRIER RELATIONSHIPS

<b>Sr. Benefits Consultant</b>	<ul style="list-style-type: none"><li>▪ Strategic Issues/Direction</li><li>▪ Plan Design</li><li>▪ Financing of Benefits</li><li>▪ Coordination of all Hays activities</li><li>▪ Day-to-Day contact</li></ul>
Sarah Manning	
<b>Financial Consultant</b>	<ul style="list-style-type: none"><li>▪ Responsible for all financial analysis</li><li>▪ Oversees all underwriting and marketing</li><li>▪ Monitoring of plan financials and budget</li><li>▪ Prepares cost and trend analysis</li></ul>
Chris Ewing	
<b>Wellness Consultant</b>	<ul style="list-style-type: none"><li>▪ Wellness program design &amp; outreach initiatives</li><li>▪ Foster partnerships with wellness vendors</li><li>▪ Pre and post program implementation</li><li>▪ Analyze clinical outcomes &amp; participation</li></ul>
Melissa Henrich	
<b>Communication Consultant</b>	<ul style="list-style-type: none"><li>▪ Custom design of all employer/employee communications</li><li>▪ Enrollment guides, newsletters, posters, PowerPoints</li><li>▪ Strategy &amp; Implementation Comm./Wellness Campaigns</li><li>▪ Online app and web creation / maintenance</li></ul>
Derrick Templin	

***Please refer to the Appendix (D) for complete Team Biographies.***

### **3. Describe the training (industry, internal, computer, other) that your firm expects or requires your staff to receive?**

Hays is dedicated to continual education among its staff. This is supported through leadership round tables, regular in-house legislative debriefings, carrier specific training summits and active industry association requirements. Hays further supports external lifetime learning opportunities through tuition reimbursement programs and rewards for industry designations such as SPHR/PHR/CEBS.

Our staff receives onsite continuing education on a variety of employee benefit topics throughout the year. These are commonly in the form of webinars presented by our home office. We also have regularly scheduled training sessions presented by our own specialist





## VENDORS/CARRIER RELATIONSHIPS

groups or outside vendors. The following are a few examples of recent and future training topics:

- Pharmacy Benefits Analysis
- Health Care Reform
- Communication Tools
- Strategic Planning
- Wellness Strategies Overview
- Confidentiality and Security.

#### 4. Provide details about how our account will be handled.

Serving as an extension of your benefits function, we team with your staff to deliver results. Our goal is to anticipate your needs and resolve concerns before they become problems. Our delivery model for routine annual services is a proven way to gather information and measure progress against our clients' strategic direction. Our process begins with a Research and Discovery Session. In this Research and Discovery Session, Hays will begin by surveying the County's stakeholders and work to help them understand the spectrum of solutions. In an effort to develop a strategic roadmap, inclusive of short and long term goals, we outline opportunities for cost reduction and improved results.

Additionally, we will work to identify the needs, concerns and desires of your various employee groups. Through detailed discussions between the County's Finance, Human Resources and Benefits departments, as well as any of the County's employee groups, we often find varying concerns, priorities and perceptions. As a consultant to The County, our task is to identify the needs of the various stakeholders and develop a common benefit plan strategy.



## VENDORS/CARRIER RELATIONSHIPS

### Hays Companies' Five Step Service Model



From a tactical perspective, our 5-step service model incorporates all components of benefits management, including:

- **Objective Setting:** This is a detailed process to be consistent with the County's philosophy, financial and retention objectives.
- **Program Design:** We will utilize benchmarking data and our Health Plan Intelligence analysis to design a program that meets the County's diverse member needs while remaining cost effective.
- **Vendor Evaluation and Marketing:** Hays will aggressively negotiate the appropriate renewal action with insurance carriers and when appropriate, market the plan. A formal request for proposal will be delivered to qualified markets and a comprehensive market evaluation will be provided to assist in vendor selection.
- **Implementation, Communication, and On-going Support:** Hays will work closely with the selected vendors to ensure timely implementation, provide employee communication materials and continued administrative support.
- **Data Analysis and Program Monitoring:** We continually monitor actual plan performance to determine if your objectives are being met.



## VENDORS/CARRIER RELATIONSHIPS

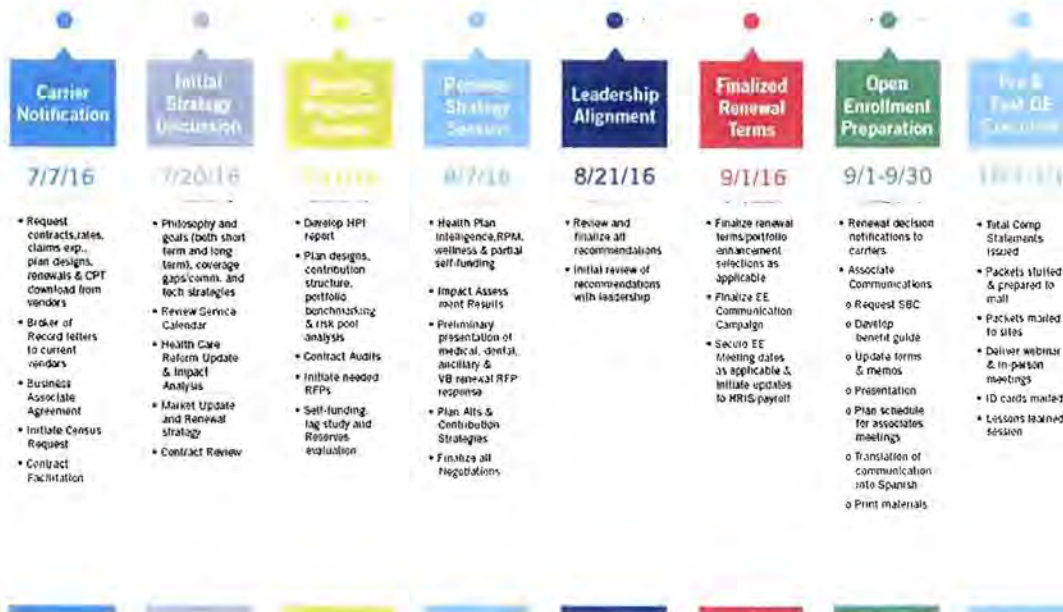
Once we establish your objectives and expectations, we will evaluate, design, communicate, implement and monitor all facets of your benefits. We utilize sophisticated data analysis tools to help you understand how your plan participants utilize health care. We then assist The County to purchase health care services in the most efficient manner.

More specifically, at the outset of our relationship (if Hays Companies is awarded your business) and directed toward your 2016/2017 renewal, we would do the following to ensure a smooth transition:

1. Meet with the County to address existing issues that require attention.
2. Establish goals and objectives and set a multi-year approach to your benefit programs
3. Immediately collect all data available to perform an "audit" on current status of all health & welfare programs.
4. Implement Hays Service Calendar and work in progress for the upcoming year to use as a guideline for the County and Hays Companies.
5. The above will happen within 1 week of takeover or endorsed Broker of Record letter.

*Please refer to the sample Proposed Implementation Schedule on the following page. This is based on a July 1st takeover date and a January 1st renewal date.*

### Hays Companies Implementation Timeline





## OTHER SERVICES AND PROGRAMS

5. Describe any wellness and education services that you expect to provide to our account and any additional services that are available at our request. Note which services will be subject to an additional fee. Please provide samples of materials that you offer.

All of the services discussed in this question, and throughout this Request for Proposal, are included in our flat fee described on page 32. Please refer to the Appendix for sample educational materials.

### Wellness

There are two ways to understand the impact of wellness and preventive services. The first is to look at utilization of services. This is accomplished by mining claims data either through available carrier reports or through Hays' proprietary Health Plan Intelligence (HPI) report (discussed in further detail elsewhere in our response) to understand how a workforce is using wellness/preventive benefits. At a high level, the data can be analyzed to see how many visits were coded by the physician offices as being preventive. At a more defined level, the number of specific preventive screenings can be culled for analysis. For example, we can look at how many men 40 years and older had a PSA (prostate-specific antigen) test screening for prostate cancer in the preceding 12 months. When utilization of these types of services is low, Hays will work with the County to develop benefit and clinical strategies to enhance service utilization in order to promote early identification of risk factors and/or potentially catastrophic disease states.

The above described an analysis of traditional medical services focused on wellness and prevention. Many organizations also offer wellness and preventive services through wellness programs or adjunct vendors.

These services can vary from health risk assessments to healthy food choices in a cafeteria to biometrics to health coaching. The analysis of these programs differs in that participation levels, follow-through on risk factors, and outcomes related to changed behaviors are the focus.

Hays Companies takes a broad approach to the health of your workforce. This means that we are concerned with understanding and managing your risk not only from lifestyle choices but also from chronic conditions, as well as urgent/time limited conditions such as maternity. In designing health and wellness strategies, our process is to first define your cost drivers so that program initiatives are targeted to bring you as much Value on Investment (VOI) as possible. Almost all employers can achieve value from health and wellness programs in a short amount of time versus achieving a statistically valid Return on Investment (ROI) over a number of years.



## OTHER SERVICES AND PROGRAMS

Hays Companies believes wellness can be a key component in the strategic planning going into an employer-sponsored health plan. As part of our commitment to wellness, Hays Companies has developed a strategy integrating our analytical expertise and resources with health care professionals that understand how to build and implement effective wellness plans. This experience comes directly from the front lines of health care, nursing, and from working within organizations with effective wellness programs.

Our Health Strategies Consultant, Melissa Henrich, works directly with our clients to understand the impact of health on their productivity, absenteeism, health plan costs, and sustainability. Melissa will serve as the dedicated Wellness Consultant for the County.

Melissa works closely with our Consultants and Account Managers to assist in strategically designing and implementing disease management programs, wellness plans, and other medical care management plans that complement the unique needs of each employer.

Hays Companies Health Strategies & Wellness team holds expertise in:

- Strategic planning within the total benefits design model for health strategies, including those targeted at utilization review, large case management, disability, wellness, disease management, EAP, predictive modeling, health risk assessments and behavioral health.
- Utilization and outcome data analysis and interpretation to assist clients in identifying and understanding clinical needs within their population. This analysis is the first step towards building a customized solution to meet each client's needs.
- Evaluation of vendor activities, strategies, and outcomes (pre/post-program implementation).
- Assistance in implementing medical care management strategies, with a special focus on outreach initiatives to the member.

Our experience with wellness is unique to every client. It is not enough to purchase a wellness program from a vendor and blanket the organization with the various literature, e-mails and program incentives. A wellness program is only effective after thorough analyses of utilization, trends, demographics and large case exposures have been completed. Only then can the health care experts from Hays make custom recommendations that will be truly beneficial and give a measurable return on the investment.





## OTHER SERVICES AND PROGRAMS

### Education Seminars

Hays Companies continually offers various seminars and webinars throughout the year on subjects such as legislative issues, product review, plan design and other human resource matters. Recent webinar topics included: HIPAA Privacy, Health Care Reform, A Review of HSA, HRAs and FSAs and wellness/disease management programs.

In 2014, we introduced a new, four-part “White Board Seminar Series” which educates our clients and prospects on secrets that the insurance carriers do not want you to know. Topics included: Conquer Health Care Reform through Risk Pool Management, Health Plan Funding and Catastrophic Claims Management, Exploring the Myths and Misconceptions of Employer Sponsored Health Care, as well as Plan Design Tools, Tactics and Strategies.

In 2015, we introduced a new round of seminars, including two new topics: Workers Compensation & Health Plan Data Analytics, and Plan Design, Consumerism & Wellness

Programs. Please note that our seminars and many of our webinars are certified for Continuing Education credits with HRCI.

Our 2016 Whiteboard Seminar Series includes topics such as: Risk Pool Management: How to Develop a Winning Health Plan; Pharmaceuticals: A Plan Sponsor's Best Friend and Worst Enemy; Data Analytics: A Complete Enterprise Approach to Cost Containment; and, High Value at Low Cost: New Solutions for Recruitment & Retention.

**2016 SEMINAR SERIES**  
Can't Understand why your employee health plan is so expensive?

#1 **NEW!** **Conquer Health Care Reform through Risk Pool Management** (Tuesday, March 10<sup>th</sup>)  
#2 **NEW!** **Pharmaceuticals: A Plan Sponsor's Best Friend and Worst Enemy** (Thursday, March 12<sup>th</sup>)  
#3 **NEW!** **Data Analytics: A Complete Enterprise Approach to Cost Containment** (Friday, April 21<sup>st</sup>)  
#4 **NEW!** **High Value at Low Cost: New Solutions for Recruitment & Retention** (Tuesday, May 19<sup>th</sup>)

The keynote speaker for our White Board Seminar Series is **Daniel Dwyer**, Executive Vice President and Director of Underwriting for Hays Companies.

**Westin Hotel (Westminster)**  
10000 Westminster Boulevard  
Westminster Colorado 80122  
8:30 AM to 11:00 AM  
#1 March 10<sup>th</sup>

**Hilton Garden Inn Denver Tech Center**  
7675 East Union Ave.  
Denver Colorado 80237  
1:30 PM to 4:00 PM  
#2 March 10<sup>th</sup>

#3 April 21<sup>st</sup>  
#4 May 19<sup>th</sup>

Be sure to register as spaces fill up fast!  
Sign up by email at [Denver@hayscompanies.com](mailto:Denver@hayscompanies.com)

**Hays**

6. Do you provide employee communication services for your clients' employees? If so, please provide a general description of your capabilities. Please provide sample employee communication materials that you have distributed to other clients. How do you help facilitate annual open enrollments? Include technology based approaches and identify additional costs, if any.

Hays Companies has in-house communications and design specialists to help create your open enrollment communications. This will provide the County with a professional, Fortune 500-quality



## OTHER SERVICES AND PROGRAMS

benefit communications piece for use at open enrollment or during employee recruitment. The communication guide will effectively outline your organization's benefit program in a concise brochure.

***Please refer to the Appendix (E) for a sample Open Enrollment Guide customized for Adams County by our in-house graphic design team.***

Effective communication is essential to the success of your employee benefit programs. At Hays Companies, we do not view communication as an open-enrollment process only, but as an ongoing process to help employees recognize the value of health and welfare plans. Our service delivery model for employee benefit consulting goes beyond program design; it includes strategic communication consulting, as well as development and design of materials, fulfillment, and integration of plan vendor websites and materials. We recognize the importance of high-quality employee communications in support of new and existing benefits programs. Using professional communication tools, we help you effectively deliver the program message and reinforce the benefit program objectives.

In typical consulting relationships, communication services are usually outside the scope of employee benefit consulting services and typically require more financial resources from the client. To support your ongoing communication strategy, Hays Companies will provide the following services:

- ✦ Online communication
- ✦ Professional communication brochures, including all design and print services
- ✦ Open enrollment/educational meetings
- ✦ Focused information and articles for benefit newsletters
- ✦ Total Reward and other supplemental employee benefit communications
- ✦ Benefit fair support
- ✦ Webinars and webinar support
- ✦ Seminars and seminar support
- ✦ Client Resource Portal

We will build and maintain a comprehensive online mobile application which is completely customized for your benefits program. There is no additional cost for Hays Companies to build and maintain a custom, online mobile application for the County. My Benefits Compass allows you and your employees to:





## OTHER SERVICES AND PROGRAMS

- Access and print generic ID cards with group information
- Download and print benefit related documents/forms
- Quickly find service contact information and online resources
- Download carrier apps for your individual benefit specific information
- Review benefit plan design information
- Download company benefit guides, posters, flyers contact cards and more
- Watch educational benefit videos
- Find online provider directories

With the Hays Mobile App solutions, employees can access:

- Benefits & coverage Information
- Medical ID cards
- Benefits forms
- Providers and service contracts
- Payroll and timesheets
- Retirement balances
- Wellness plans
- News and events



Additionally, we contribute to internal client newsletters and draft “new benefit” introduction letters. In general, the goal of our communication services is to generate the following advantages:

- Improved costs by encouraging participants to make smart, informed choices
- Enhanced morale/productivity, particularly if you are making benefit changes
- Decreased burden on HR/internal staff
- Lower risk of litigation

### 7. Describe the financial and actuarial services that you offer. Describe how you can assist us with metrics/ROIs for our benefits program.

Our Financial Consultants are underwriters who have prior experience working for insurance companies and understand the many nuances of health plan underwriting. This allows for in depth review and aggressive negotiations on plan renewals.

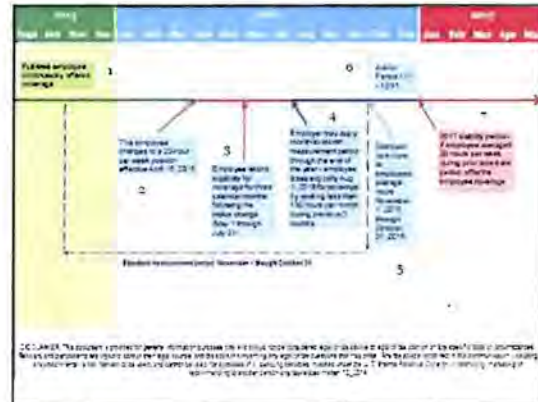


## OTHER SERVICES AND PROGRAMS

Many of our underwriting services are incorporated on a daily basis behind the scenes as we evaluate renewals and develop plan designs for our clients. Some of the traditional health plan underwriting services we perform on a regular basis include:



- Complex plan projections
- Plan design changes
- Actuarial alignment between multiple plan designs and multiple tiers
- Employee contribution analysis
- Migration analysis (when multiple plans are present)
- IBNR calculations
- Fully-insured to self-funding analysis
- Plan design comparison calculators for employees
- Health Care Reform related services include minimum value and actuarial value determinations (required under ACA)
- HCR Financial Impact Analysis Modeling
- Cadillac Tax Projections



Additional actuarial & underwriting services are provided through our corporate office.

### **Resumes of our Lead Underwriting professionals are below:**

#### **David Ross - Executive Vice President & Director of Underwriting Services**

David Ross is an Executive Vice President and the Director of Underwriting Services at Hays Companies, and he oversees the actuaries on our staff.

David's primary responsibilities include the development and maintenance of financial tools and methodologies that improve our clients' ability to effectively manage their employer-sponsored health plans. David's role keeps him actively involved in the management of key accounts, representing over 350,000 members.

Additionally, David acts as a national resource and the primary source of both internal and external education and support regarding efficient health plan structure. David spends much of his time





## OTHER SERVICES AND PROGRAMS

traveling around the country educating consultants, employers, and legislative bodies on the many counter-intuitive and nuanced components of effective health care cost management.

Prior to joining Hays Companies in 2004, David worked in the Actuarial/Underwriting department at Blue Cross Blue Shield of Minnesota where he evaluated financial risk as a function of claims-experience and defined pricing strategies for both insured and self-funded business that satisfied Blue Cross's strategic objectives. David was also utilized as an educational liaison between Actuarial, Underwriting, Marketing, Brokers and group leaders.

David periodically teaches statistics at Minnesota State University where he earned his bachelor's degree in Finance. He is a licensed agent for health and life insurance.

### **Alexander C. Scutro - Senior Underwriting Consultant**

Al Scutro is currently the Senior Underwriting Consultant at Hays Companies.

Al is a leader in the national Corporate Underwriting Department, where his primary function is to help develop the tools and methodologies Hays uses to assist employers in effectively managing their health plans.

He also speaks to groups across the country regarding medical plan financials and underwriting, advising and educating Financial and Human Resource professionals about employee benefit programs. Al's unique, dynamic approach to presentations has made him a popular lecturer. Al is also a national resource in account management, helping to devise and implement financial management strategies for Hays clients.

Prior to joining Hays Companies in 2009, Al worked in various financial services roles at the Bank of New York Mellon, most recently for the fixed income asset manager Standish. He is a graduate of the University of Massachusetts at Boston.

Hays Companies' primary differentiators are in our unique consulting processes and our comprehensive strategic planning. We begin any new engagement by thoroughly learning about our client so that we can formulate a long-term plan. In order for us to help you reach your goals, we must fully understand your issues and objectives. This process starts with an in-depth dialogue. We continually evaluate your benefit plans to make sure that both program design and performance are trending towards stated objectives.





## OTHER SERVICES AND PROGRAMS

On an ongoing basis, we will measure program initiatives and other key indices against the established baseline, normative and competitive data. We perform an in-depth analysis prior to each renewal/employee benefit enrollment cycle in order to measure key cost drivers and measure the impact of strategies implemented in prior years.

Regarding a specific process, Hays performs the following steps for all existing clients when developing or refining a strategy for benefit programs and plans:

1. **Outline Current State:** During this phase we meet with our clients to clearly document the plans and programs currently in place. This phase includes inventorying all existing benefits and partners through the development of a benefit manual, a complete review of all legal contracts and compliance related documents, and an analysis of the medical plan to determine major cost and utilization trends within the population.
2. **Set Strategic Direction:** During this phase, your Hays account management team will meet with you to deliver our Phase 1 findings as well as recommendations for alterations or improvements to the current benefit plan. From this phase, we collectively agree on a short-term direction and work with you to develop an annual service calendar for the upcoming year.
3. **Implement Improvements:** Following the establishment of our strategic direction, we manage the process of improving your benefit model. This phase would include, if necessary, marketing existing benefit programs, working with your current partners to improve/change existing benefits, and the development and implementation of new programs.
4. **Evaluating Effectiveness:** At Hays, the process does not end with implementation. At the heart of all of our processes is a thorough review of our recommendations and actions to evaluate their effectiveness. We believe in regular in-person meetings with our clients to continually evaluate plan performance.

Through our unique strategic consulting process, our clients are able to better leverage their benefits funding to create better plans that cost less. Hays is the only organization that has developed a proven financial management process for employee benefits. We call this process Risk Pool Management and the results are more impressive with each passing year.



## OTHER SERVICES AND PROGRAMS

### At Hays, we provide our clients:

**A plan cost that is less expensive:** According to a recent national benefit survey conducted by Mercer (comprised of approximately 2500 employers); 96% of our clients have a total healthcare expense that is lower in cost than the average reported in this survey. The difference in premiums between Hays and other firms represents an average savings of 18% per participant for our clients.

**A price trend that is less dramatic:** According to this same survey, employers accepted an average increase of 2.1% in 2013 and another 3.9% increase in 2014 **after making plan changes**. Compare to Hays: Our clients' costs increased an average of +0.9% per year during this same period. This further breaks down to an increase of +3.3% for our clients choosing to remain fully insured and flat cost trends (+0.0%) for clients that partially self-fund.

**A plan design that is better than peers:** Again, according to this same survey, the average PPO deductible for employers is \$500 with 80% coinsurance. At Hays, our clients have a average deductible of only \$300 and median coinsurance of 85%.

In summary, our clients have lower cost per employee, a lower cost trend, and more generous benefits. This is important in your industry due to the competitive hiring landscape you face and the tight budgets with which you must work.

### How is Hays different? It's in the outcome:

The concepts we deploy are the same programs being utilized by the top 2% of employers in the country (AT&T, Caterpillar, General Electric, Verizon, etc). Each of these companies has an annual cost inflation that is 3-4% for healthcare; but the national average trend is always reported around 7%. Yet, the middle market rarely sees the 7% but instead is subject to 8-12% increases on average. There is a reason, and the processes are quite different.





## OTHER SERVICES AND PROGRAMS

### Risk Pool Management (RPM) Summary:

Hays Companies provides a unique consulting process based on the knowledge that the objectives of the insurance carrier are not always “in sync” with those of their clients.

The objective of the insurance carrier has been to grow membership by implementing rating subsidies throughout the premium billing structure. (Many consultants simply mirror these rate relationships year-over-year, never questioning their validity). These subsidies increase the cost of your employee-only coverage with offsetting reductions for the dependent premium. Employers will typically define their cost sharing strategy against these inaccurate rates, thus further increasing the dependent subsidy beyond their corporate strategic goal.

The outcome achieves the goals of the carrier through increased membership (and thereby more premiums) in your group plan.

The Hays Solution: Our underwriters help you identify your risk tolerance, while mitigating additional risk the insurance company is trying to get you to insure. Implementing better strategies reduces our clients’ renewal cost adjustments without the need to chase every marketplace product trend.

***Please refer to Appendix (F) for a sample Risk Pool Management Analysis.***

### Knowing Your Data and Your Cost Drivers:

**Health Plan Intelligence (HPI):** HPI is the center of our consulting model. It is one of the key differentiators in the design and financial performance of your plan (HPI is discussed in greater detail in our Response to Question 1.4 in Section II). This program and database is a proprietary analysis tool developed to determine how efficiently claims flow through your health plans. Our HPI reporting system allows you to develop a comprehensive medical strategy based on your own historical claims and demographics. This credible data reflects how, where, when, and why your employees buy healthcare.

- HPI is a detailed analysis of your claims over a 12- to 24-month period providing for frequency of care, cost of care, discount rates, service categories, and diagnostic codes.
- HPI provides a detailed analysis of the performance of your plan and compares it against the 1,000,000 members in the database and adjusted to your demographic composition.



## OTHER SERVICES AND PROGRAMS

- HPI analyzes behavioral claims that can become preventable claims in the future.
- HPI measures the health of your population, including the severity of chronic medical conditions.
- HPI develops a predictive health score based on the diagnosis groups and recommended treatment patterns from Johns Hopkins.
- HPI identifies risk to create actionable information.

### 8. Discuss briefly any other divisions or special expertise you have that may be helpful to Adams County's Benefits program.

Hays employs a full-service Compliance and Research Department located at our headquarters in Minneapolis. Adams County will have full access to our Compliance and Research staff.

*Below are brief resumes of the primary Hays Companies Research & Compliance professionals:*

#### **Ben C. Graves - Director of Research & Compliance**

Mr. Graves joined Hays Companies in 2009. Previously, Ben was General Counsel and the Director of Compliance for Administration Resources Corporation, a Cafeteria Plan and COBRA administration services company. In his current role, Ben is responsible for technical and compliance advice for Hays Companies team members and their clients, regarding employee welfare benefits, utilizing legislation, agency rules and guidance.

Prior to entering the employee benefits field, Ben provided safety and risk management consulting services for various employers and clients. He has over 27 years of experience in risk management and benefits.

#### **Cindy Niesen - Research & Compliance Coordinator**

Ms. Niesen has been with Hays Companies since 2004. She has worked for a national brokerage firm, an insurance company and a third party administrator. Cindy is also a trained paralegal. She specializes in document preparation/review and assisting clients with 5500 filings. Cindy brings Hays Companies over 20 years of experience in the insurance industry.

#### **Additional Legal Support**

Hays Companies also maintains on retainer two benefits attorneys in Colorado. We have partnered with these firms in particular because both bring unique expertise related to ERISA, Health Care





## OTHER SERVICES AND PROGRAMS

Reform, and state and federal regulations. We provide our local ERISA counsel services for ERISA-related questions and documentations at no additional charge to our clients.

***Below are the names and credentials of the two external benefit attorneys we use out of our Denver office:***

**Renee W. O'Rourke - GreenbergTraurig, LLP**

Credentials:

LL.M., University of Denver, 1985

B.S., Business Administration, University of Southern Colorado, 1981

J.D., University of Denver Sturm College of Law, 1984

Renée O'Rourke focuses her practice on employee benefits and ERISA, including retirement plans, executive and stock compensation and health, welfare and fringe benefit plans. Her experience in employee benefits includes representation of clients before the Internal Revenue Service (at both the audit and appellate levels) and the Department of Labor and includes designing, drafting and amending profit sharing plans, money purchase pension plans, target benefit plans, defined benefit plans, 401(k) plans, 457(b) and (f) plans, 457 trusts and custodial agreements, 403(b) plans and group trusts. She also has assisted numerous clients in the implementation and financing of leveraged employee stock ownership plans (ESOPs).

Her experience in the health, welfare and fringe benefits area includes designing, drafting and implementing cafeteria plans, medical expense reimbursement plans (medical FSAs), dependent care assistance plans (dependent care FSAs), self-insured medical plans, wellness programs,

HSAs, HRAs, retiree medical plans, disability plans, severance pay plans and voluntary employees' beneficiary associations (VEBAs).

Renée has negotiated and documented the employee benefit provisions in numerous mergers, acquisitions and dispositions in stock and asset transactions and joint ventures and has assisted clients in restructuring benefits following corporate transactions. She has advised clients on many aspects of employee benefit matters including affiliated service group, controlled group and separate line of business issues, prohibited transactions, complex distribution matters and discrimination testing.

She has also advised clients on ERISA fiduciary duties, COBRA, plan terminations, workforce downsizing, \$1 million compensation deduction limitation, Montrose parachutes, Medicare secondary payer rules, Colorado health insurance rules and benefits provisions in the Family and





## OTHER SERVICES AND PROGRAMS

Medical Leave Act (FMLA), Americans With Disabilities Act (ADA) and Age Discrimination in Employment Act of 1967 (ADEA). In addition, she has served as an expert witness in fiduciary duty litigation and litigation involving an ESOP.

### Mark W. Major - Law Offices of Mark W. Major

Credentials:

J.D., magna cum laude, Creighton University Law School, Omaha, NE

B.A., summa cum laude, Sociology, Creighton University, Omaha, NE

Mark has practiced as an employee benefits attorney for over thirty years in private practice as well as being in-house ERISA counsel for corporations in the cable, telecommunications, and oil and gas industries and as a U.S. compliance team leader for a worldwide human resources consulting firm where he serviced employers of all sizes.

Working closely with officers, managers and staff across human resources, labor, finance, trust investment and corporate development departments, as well as dealing with numerous vendors from the consulting side, has given Mark a unique and broad perspective on the legal challenges faced by sponsors of employee benefits programs.

Throughout his career, Mark has focused on balancing an attention to detail and technical excellence with the ability to focus on the big picture in order to effectively relate compliance essentials to his clients and colleagues and develop solutions that fit their specific needs.

### 9. Describe how you will approach the marketplace. What information or procedures will you expect of the County, prior to marketing our coverage?

Hays Companies is fully equipped to assist with analyzing your options, making data-driven recommendations, and managing the County's self-funded and fully insured plans. A brief overview of how Hays Companies manages the process is below.

Our process to evaluate the efficiency of partially self-insured plans is highly analytical. If the plan is structured properly, while the "risk" is limited with proper funding, the financial cash flow upside for an employer is significant. In our experience with non-profit organizations, including our municipality clients, a trust can be utilized to fund a self-funded medical plan. Hays Companies has the experience and resources to set-up, maintain and administer these types of trusts.



## OTHER SERVICES AND PROGRAMS

### Information / Data Analysis

Information and education is critical to effectively managing costs of benefit plans. Without sufficient data it is impossible to design programs that will be priced appropriately. We are the experts in this aspect of benefits and cost management.

The identification and analysis of cost containment starts with our Health Plan Intelligence audit. Our HPI software allows us to conduct an internal analysis of your health plan performance by plugging in your group's raw claim data which we receive directly from the carrier or administrator.

### Risk Pool Management Analysis

Risk Pool Management is a complex strategy that is proprietary to Hays Companies and has been a major contributor to reducing our client's renewal costs.

Self-insured plans typically rely on carrier projections of cost when budgeting for a new plan year. Unfortunately, most projections that are tied to the purchase of Stop Loss insurance are largely automated and have what reinsurers sometimes refer to as "acceptable variability" and/or are deliberately under-estimated for strategic or carrier competitive purposes. The result of either can be an under-funded estimate of actual cost that creates the following problems for group health and/or dental plans:

- An insufficient budget
- A large renewal increase
- Employee-contributions do not match the employer's intent, which results in a higher cost to the employer.
- The actual cost of COBRA participation is incorrectly defined, which also results in a higher cost to the employer.

To eliminate these concerns, we have developed a sophisticated projection modeling tool that eliminates as much statistical variation as possible, which allows for the following as it pertains to the carrier's projections:

- If the projection is correct – our formula merely corroborates their estimate.
- If the projection is too high – our formula allows for informed negotiations with the vendor regarding their contractual attachment point rate.
- If the projection is too low – our formula identifies a presumed aggregate corridor that quantifies the group's savings relative to the purchased aggregate corridor.





## OTHER SERVICES AND PROGRAMS

Regardless of the relationship between the two projections, our clients enjoy the comfort of knowing that, (a) variation from the budget will be insignificant, (b) renewal increases higher than trend will be virtually non-existent, (c) employee contributions will actually reflect the intent of the employer, and (d) COBRA participants will be paying the appropriate amount of premium.

### Negotiation of Administrative Fees

The most significant problem facing employer-groups regarding administrative fees is the lack of transparency. Even when administrative fees are seemingly low, they may in fact be quite high given the tendency for administrators to hide network access fees, provider settlement fees, and contract fees within the claims. This type of administrative pricing is called a "fee schedule." If overlooked or inadequately defined, fee schedule arrangements disallow the quantification of actual administrative costs and thereby limit the ability to negotiate effectively. Similarly, administrators often subsidize their fees by retaining pharmacy rebates that would otherwise be paid to a self-insured group.

Hays Companies utilizes its superior data analysis, experience, and leverage within the industry to identify and quantify fee schedules to negotiate transparent arrangements with administrators. Rx rebating is contractually defined for our clients and we hold administrators to the terms of the contract through our ability to monitor claims activity.

### Determination of Premium Equivalency Rate

Most groups are largely unaware of the detrimental financial ramifications associated with the actuarial misalignment of premium equivalency rates – particularly when employees are eligible for more than one plan. Rate-development is further complicated by the fact that actuarial alignment involves holding the proportional relationship among three variables constant. Those variables are:

- The relationship among tiers (e.g. single, 2-party, family) on the same plan.
- The relationship between the same tiers on different plans (e.g. the family rate on Plan A relative to the family rate on Plan B)
- The overall relationship among multiple plans as defined by pure actuarial richness.

After combining all costs (claims, administration, Stop Loss, access fees, rebates, etc.), the renewal formula developed and utilized by Hays Companies, funnels all costs through an alignment algorithm that appropriately balances the variables identified above. The inputs for the algorithm depend on data extracted from the Health Plan Intelligence report. The output of the analysis results in perfectly aligned premium equivalency rates that act as the base-point for contribution (employee premium) modeling.



## OTHER SERVICES AND PROGRAMS

### Pricing of Employee Premiums

Actuarially aligned premium equivalency rates are only part of the equation. Most employer groups make critical errors during the contribution modeling that can result in significantly higher cost to the employer. These mistakes are typically due to the misalignment of contributions relative to the carefully aligned total rate. When misalignment of contributions occurs, employees will migrate to a plan that is best for them. Migration caused by misalignment is always to the financial detriment of the group.

Our clients avoid this pitfall with consultation and tools that easily illustrate and quantify the effects of migration in a split-risk pool. By appropriately managing the plan's contribution structure, groups can avoid all of the following:

- Under-funding the account;
- Excessively large renewals;
- Elevated discretionary trend applied by Underwriters; and
- Inadvertent subsidization of one tier by another.

We believe that thorough analysis and plan efficiency evaluation must be completed prior to approaching the marketplace. Please refer to our response to question #12 for our approach to plan marketing.

**10. Which markets do you typically represent? If your firm has ownership in any managing general agent, surplus lines broker, reinsurance broker, insurer, reinsurer or other organization you would use in placing insurance coverages, please identify them.**

Hays Companies does not represent or have any ownership or affiliation with any general agent, insurance company, third-party administrator, or any other consulting or brokerage firm. This allows us to remain 100% objective and base all decisions on our clients' best interests. Furthermore, Hays Companies avoids conflict of interest issues by removing commissions from the process whenever possible. In instances in which Hays Companies is awarded overrides, bonuses, supplemental compensation, contingency fees, etc. we apply these to our clients' service fees (pro-rated if multiple clients are insured with the same carrier) and fully disclose these awards. We firmly believe that we work for our clients first and not any insurance company, third-party administrator, or provider network. You can be assured we will always work with Adams County's best interests in mind.





## OTHER SERVICES AND PROGRAMS

### 11. Discuss procedures used by your firm in evaluating insurers in terms of financial integrity or acceptable capacity.

Hays Companies believes it is important to annually audit vendors and providers to assure consistent and accurate delivery of service and stability. There are several types of audits available. Some of these can be performed by Hays internally and others would require us to solicit proposals from vendors for various audits and working directly with your carrier.

Hays Companies works internally and with a number of vendors to provide contingency and procedural audits. Contingency audits are generally designed to look for specific claims overpayments and usually focus on larger claims only. Contingency audits are generally paid as a percentage of the savings. We also look at Procedural audits for our clients. Procedural audits are generally designed to look at how claims are processed and paid and will generally expose errors in the claim payment and process system. The costs for procedural audits vary greatly and are primarily dependent upon the scope of the audit. Hays will commit to at least sharing in the cost of this type of audit, and, in most instances, we have found that we can absorb 100% of the audit cost on behalf of our clients.

In addition we work with our Legal and Compliance team on a quarterly basis to review the solvency and stability of the carriers that Hays and our clients work with. You can rest assured that we will notify The County of any potential insolvency or stability issues well in advance before it reaches the membership. We will then outline a strategy to best address this issue and provide options and resources for The County to review in the case that a change needs to be made.

### 12. Discuss the time required to market coverage and your view of Adams County's role in the process.

We believe in managing the renewal process, instead of the renewal process managing The County and us. In order to more effectively manage the renewal process, Hays has implemented several steps:

1. Start the process early
2. Pre-renewal meeting
3. Underwriting the renewal before receiving the actual renewal from the carrier
4. Use proprietary software tools to forecast trends and negotiate with carriers

Our unique renewal process typically starts nine months prior to your renewal dates to de-emphasize the transactional component of the process and allow sufficient time to ensure a smooth



## OTHER SERVICES AND PROGRAMS

enrollment process. At the end of the first plan quarter, we run our Health Plan Intelligence (HPI) reports on an incurred basis, which initiates the renewal process for the following year. Shortly after a complete financial analysis, we will initiate an objective-setting session (pre-renewal) for the next plan year with the County. We will discuss service issues, market trends, and benchmarks and how they relate to your programs. We will also present our medical claims analysis and identify any problem areas.

We will identify solutions (plan design, network, chronic disease programs, possible marketing, etc.) to any problematic areas. After this pre-renewal, we will request renewals from all vendors and conduct strategic and/or competitive marketing for the benefit plans.

For all of our clients, we establish an annual service calendar that will provide an overview of key deliverables for a given year. This service calendar is designed to include, but is not limited to, key renewal dates, marketing timeline, rate and budget finalization deadlines, open enrollment planning, eligibility transfers, reviews of all contracts, service agreements and SPDs, as well as TPA/carrier performance measure and reviews.

The initial vendor selection process is also very important and we find that the more thoroughly we review the vendors upfront, the more likely they are able to meet the performance standards set out by Hays and our clients. As a result, we will evaluate potential vendors through a rigorous vendor selection process. We have elaborated on each of these below and provided a "Sample Vendor Selection/Renewal Analysis Work Plan" flowchart further outlining the process and timelines.

### Program Design

Using a variety of strategies, we will help the County build a program that fits the established Human Resources and financial objectives. We will benchmark your plan against other employers based upon geographic and industry parameters that are meaningful to The County. This information will assist you in developing plans that are competitive with other employers in the area.

Program design encompasses more than just plan design. Plan design is important to accomplishing the benefit value objectives established for the plan and employees. It also helps to encourage proper use of the health plan or discourage inappropriate health care utilization.

Programs such as disease management, wellness or therapeutic prescription interchange serve to strengthen an organization's ability to improve the health of its population.





## OTHER SERVICES AND PROGRAMS

We will work with the County to ensure that programs and plans are properly coordinated to give you the best opportunity to achieve optimal plan performance.

### Vendor Evaluation and Selection

Once the program is designed, we will help the County assess the vendor markets through a comprehensive Request for Proposal (RFP) process. RFPs are tailored to reflect the specific needs of the County. They are then distributed to vendor markets that are most capable of delivering in accord with the established design. We coordinate the finalist interview process, which allows you the opportunity to meet and select the ultimate vendor to support your program.

Our specialty resources will further enhance our ability to support the County with vendor evaluation and marketing. This allows you to make “apples to apples” comparisons of the vendors under evaluation.

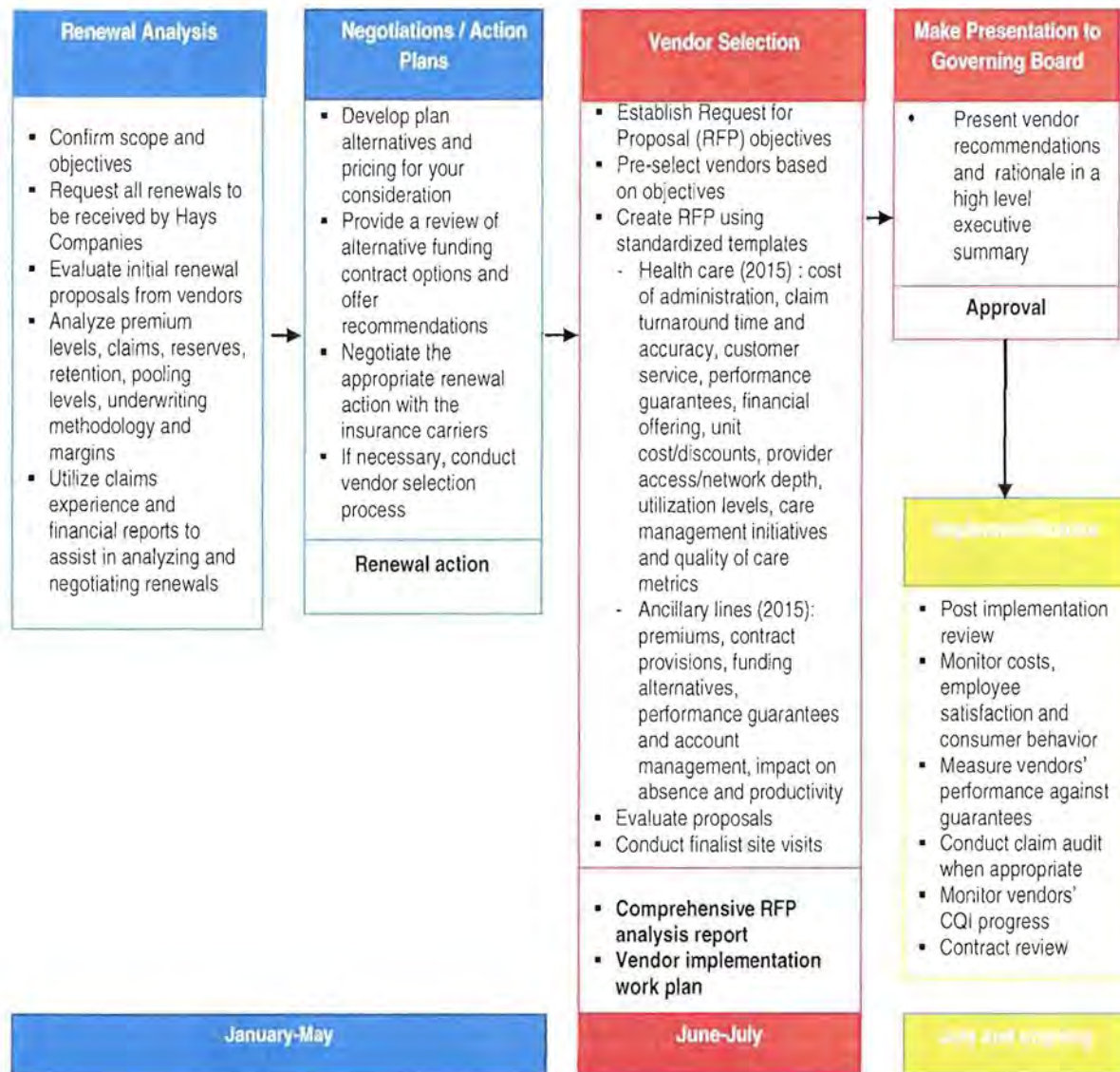
### Implementation, Communication and Ongoing Administrative Support

As part of the vendor selection process, we demand implementation and ongoing performance guarantees of all vendors. We also recognize communication is critical to the successful implementation of a new benefit plan. We will provide the County with the professional communication tools to help educate employees on the new program features. Further, we provide ongoing administrative and compliance support during implementation, allowing you the time to focus on your core business activities.

The schedule to review the County's plan and assess alternative strategies and tactics would ideally start at least six months prior to commencing your annual open enrollment communications.

## OTHER SERVICES AND PROGRAMS

### Vendor Selection / Renewal Analysis Sample Work Plan (Based on January 1 renewal)



13. Please include a list of any benefits service that may be available to the County and include the cost of those services including online benefits services and dependent audits. Please provide samples of these services.

We maintain an extensive library of compliance data, tax guides, surveys, sample policies and benefit/HR periodicals. New developments are quickly communicated via client community e-mail alerts, monthly mailings and quarterly newsletters. We also hold regular client seminars on timely benefit topics.





## OTHER SERVICES AND PROGRAMS

Hays Companies provides numerous services both to our own employees and to our clients in the areas of research, support and compliance assistance:

- Strategic partnerships with ERISA and Employment Law attorneys
- Internal Compliance and Research Department
- Assistance with COBRA, FMLA, ERISA, etc.
- Form 5500 preparation
- Recent and proposed regulations
- HIPAA Privacy Manual
- **Client Resource Portal** – database comprised of numerous resources including legislative updates, relevant articles, forms, checklists, policies, and model documents. THE COUNTY is welcome to utilize our Demo Login for the Client Resource Portal:
  - Go to <https://hayscompanies.clientportalonline.com>
  - User ID: jdoe1789
  - Password: Password1
- **ThinkHR** – Third party service provided at no cost to all Hays clients that includes unlimited telephone and email consultation with dedicated PHR/SPHR professionals who assist with a variety of Human Resource issues and needs, such as:
  - Health Care Reform
  - Handbook review
  - Conflict resolution
  - HR audits
  - Wage & hour
  - EEO/ADA/FMLA guidance
  - Statutory compliance
  - Policy & procedure review
  - Research & benchmarking
  - Harassment & discrimination
  - **ThinkHR Learn**: Over 200 management and/or employee electronically deployable EB and PC training solutions that develop employees and ensure compliance.
  - Popular subject categories: employment, workplace safety, harassment, environmental compliance, wellness, HIPAA, discrimination and customer service.
  - **ThinkHR Comply**: An award-winning, SHRM endorsed, resources center for all of your workforce issues. Thousands of forms, documents, tools and checklists (including electronic EE Handbook and policy builder resources yet not intended to replace local market comprehensive EE handbook reviews or audit resources).

## OTHER SERVICES AND PROGRAMS



**ThinkHR Live**  
A team of HR experts standing by to answer your questions and provide advice.

**ThinkHR Learn**  
Training solutions that develop employees and ensure compliance.

**ThinkHR Comply**  
An award-winning resource center for all of your workforce issues.

**Human Capital Consulting** - Hays also understands that Adams County's success is linked to your human capital. The importance of recruiting, retaining and motivating employees is greater than ever. The investment made in your organization's human capital helps support your organization's goals. Hays provides access to services to help the County with a comprehensive suite of consulting needs. In tandem with our dedicated business partners we help you with the design and deployment of various human capital initiatives.

### Surveys

Hays Companies can create custom surveys related to benefit satisfaction, culture/member relations and interest in new benefit offerings (e.g. voluntary benefits, HSAs and consumer driven health plans, etc.). We utilize Cvent, a leader in online survey development and deployment software, to build and maintain surveys and administer the results. The questions can be any combination of multiple choice, scale answers, pick those that apply or free form response. The survey can be web only or a combination of web/paper. Any paper responses would be entered into Cvent survey system by Hays associates to assure employees of confidentiality of their responses. We have unlimited sorting and "drill down" capabilities of the survey results.

### 14. Provide details of how your firm will be compensated. List any services that you charge for separately.

Hays Companies is proposing annual compensation of **\$115,000.00** based on the services described in this response and the Core Services outline provided on the following pages. This fee will begin on the start date of the contract. **The annual rate is guaranteed not to increase**





## BROKER QUESTIONNAIRE

**for 3 years.** We are willing to receive our compensation from commissions, an agreed upon fee, or a combination of both (fees can be billed either monthly or quarterly if the County desires to use a fee-based compensation structure). Any commissions earned on the current in-force policies will be credited toward the proposed compensation.

Furthermore, Hays Companies avoids conflict-of-interest issues by removing commissions from the process whenever possible. In instances in which Hays Companies is awarded overrides, bonuses, supplemental compensation, contingency fees, etc. we apply these to our clients' service fees (pro-rated if multiple clients are insured with the same carrier) and fully disclose these awards. We firmly believe that we work for our clients first and not any insurance company, third-party administrator, or provider network. You can be assured we will always work with the County's best interests in mind.

We are very flexible regarding how we are compensated. We know the services we provide both from a customer service level and from a technical standpoint, are unsurpassed in the industry. We also realize that our clients' needs continually change and evolve, so we will frequently monitor our services and resources to ensure that your Hays team is consistently providing the necessary support and guidance to assist you in meeting your benefit plan objectives and financial targets.

Lastly, we recognize that the County may dismiss Hays Companies as their broker at any time for failure to provide consulting services to the County's standards. We ask that the County provide a 30-day notice in the event that changes are desired.

***Please refer to Hays Core Services on the following pages.***

Core Services	Service Examples
<b>Strategic Planning</b>	<ul style="list-style-type: none"><li>✓ Plan Philosophy &amp; Objective Setting (Short and Long Term Benefit Strategy and Execution)</li><li>✓ Cost Sharing Strategies</li><li>✓ Risk Pool Management</li><li>✓ Health Care Reform Compliance, Actuary Analysis &amp; Forecasting</li><li>✓ COBRA Administration</li><li>✓ Wellness Solutions</li><li>✓ Total Rewards</li><li>✓ Service Calendar Management</li><li>✓ Open Issues Log Management</li></ul>



## BROKER QUESTIONNAIRE

	<ul style="list-style-type: none"> <li>✓ International Benefits</li> <li>✓ Management / Employee Training and Development</li> <li>✓ Human Capital Consulting Services</li> </ul>
<b>Compliance</b>	<ul style="list-style-type: none"> <li>✓ Seminars</li> <li>✓ State &amp; Federal Legislative Updates</li> <li>✓ Health Care Reform Consultancy</li> <li>✓ 5500 Preparation (Delivered Signature and E-Filing Ready)</li> <li>✓ ERISA/DOL</li> <li>✓ COBRA (Hays Paid Administration)</li> <li>✓ HIPAA</li> <li>✓ ADA, FMLA, PDL, CFRA</li> <li>✓ EE Handbooks</li> <li>✓ Pension</li> <li>✓ Discrimination Testing</li> <li>✓ Management / Employee Training &amp; Development</li> <li>✓ HR Live Hotline: SPHR/PHR certified experts on demand</li> <li>✓ HR Comply: SHRM endorsed resource center</li> <li>✓ LMS On Demand: Electronically deployable management and employee training courses.</li> </ul>
<b>Benefit Design</b>	<ul style="list-style-type: none"> <li>✓ Provider Networks - PPO/ HMO/EPO</li> <li>✓ Executive Programs</li> <li>✓ Benefit Levels</li> <li>✓ Consumer Driven Plans (H.R.A./H.S.A.)</li> <li>✓ Defined Contribution Plans</li> <li>✓ Benchmarking</li> <li>✓ Funding Approach (Insured, Self-Funded, Minimum Premium, Retro, etc.)</li> </ul>
<b>Health Strategies</b>	<ul style="list-style-type: none"> <li>✓ Data driven, custom branded wellness campaigns and supporting materials</li> <li>✓ Participation or outcome based (third party vendor) wellness facilitation</li> <li>✓ Biometric screenings - third party vendor or medical provider facilitation (per participant fee may apply for biometric participants)</li> <li>✓ Health risk appraisals</li> <li>✓ Survey evaluations</li> </ul>





## BROKER QUESTIONNAIRE

<b>Vendor Management</b>	<ul style="list-style-type: none"> <li>✓ Aggressive Vendor Negotiations</li> <li>✓ Performance Guarantee</li> <li>✓ Competitive Marketing</li> <li>✓ Contract Reviews</li> <li>✓ Implementation Management</li> <li>✓ Problem Resolution</li> <li>✓ Stewardship Meetings</li> </ul>
<b>Communication</b>	<ul style="list-style-type: none"> <li>✓ Written: <ul style="list-style-type: none"> <li>Enrollment Guides</li> <li>Branded EE Benefit Brochures</li> <li>Total Compensation Statements</li> </ul> </li> <li>✓ Online/Mobile: Custom Benefit Communications sites</li> <li>✓ Employee Meetings</li> <li>✓ Data Driven Custom Wellness Campaigns</li> <li>✓ Employee Surveys</li> <li>✓ Newsletters</li> <li>✓ Seminars</li> </ul>
<b>Administration</b>	<ul style="list-style-type: none"> <li>✓ Section 125 / 105 / 129 / 132 sourcing and implementation</li> <li>✓ COBRA vendor evaluation and admin assistance</li> <li>✓ Enrollment / Eligibility assistance</li> <li>✓ Fulfillment vendor evaluation and implementation assistance</li> <li>✓ Dependent Eligibility Audits</li> <li>✓ Benefit Administration Platform RFP, Sourcing and Implementation</li> </ul>
<b>Plan Management</b>	<ul style="list-style-type: none"> <li>✓ Customized Reporting Package</li> <li>✓ Lag Studies</li> <li>✓ Benchmarking – Marketplace &amp; Industry Specific</li> <li>✓ COBRA Rate Calculations</li> <li>✓ Domestic Partner Policy &amp; Imputed Income Rate Development</li> <li>✓ Employee Contribution Modeling</li> <li>✓ Risk Pool Management</li> <li>✓ Disease Management &amp; Health Awareness Programs</li> <li>✓ Summary Of Coverage</li> <li>✓ Stop Loss Analytics – Opportunity Cost Analysis</li> </ul>



## BROKER QUESTIONNAIRE

15. Please provide two references of accounts that have terminated services within the past two years. Please describe reason(s) for termination.

### **Qualfon**

Renea Malara  
Benefits Manager  
(970) 212-8834  
[rmalara@qualfon.com](mailto:rmalara@qualfon.com)

Qualfon formerly Center Partners was a Hays client from June 2004 – December 2012. Employee Benefits program was absorbed into their parent company's plan. They had over 2,750 employees on their benefits plans.

### **Aurora Bank FSB / Aurora Commercial Corp.**

Samuel Lombardo  
Benefits Manager  
720-913-5697  
[benefits@denvergov.org](mailto:benefits@denvergov.org)

Aurora bank was a former Hays client that was dissolved and went out of business in 2014. They had over 2,000 employees on their benefit plans during the time we worked with them

16. Please provide four current account references.

### **City of Fort Collins**

2,000 employees  
Lynn Sanchez  
Benefits Manager  
Phone: 970-416-2098  
Email: [lysanchez@fcgov.com](mailto:lysanchez@fcgov.com)

### **City of Westminster**

1,500 employees  
Lisa Chrisman  
Employee Development and Benefits Manager  
Phone: 303-658-2151  
Email: [lchrisma@cityofwestminster.us](mailto:lchrisma@cityofwestminster.us)

### **City of Lakewood**

1,500 Employees  
Nancy Rhode  
Benefits and Compensation Manager  
Phone: 303-987-7710  
Email: [nanrho@lakewood.org](mailto:nanrho@lakewood.org)

### **Vivage Quality Health Partners**

3,000 Employees  
Tillie Schiffler  
Director of Human Resources



## BROKER QUESTIONNAIRE

Phone: 303-274-3138

Email: [tschiffler@vivaage.com](mailto:tschiffler@vivaage.com)

### 17. Please list any current clients that are governmental entities.

We have extensive local and national experience with governmental entities, including but not limited to over 70 municipalities representing approximately 75,000 employees and \$450 million in premiums. Hays has a strong understanding of the Adams County's benefits environment. On the next page we have listed a few additional Denver office public sector clients.

City of Durango	City of Montrose	Colorado Mesa University
Eagle County	Moffat County	Routt County
St. Vrain School District	Tri-County Health	Gunnison School District
Steamboat Springs Schools	Montrose County	Town of Vail
Office of the District Attorney 18 <sup>th</sup> , Judicial District		Town of Breckenridge

*On the Following page is a sample list of additional national Hays Companies' Public Sector Clients:*





## Clients We Serve:



Arapahoe Library District  
(Colorado)

California Teachers Association

Chase County, Nebraska

City Utilities of Springfield, Missouri

The City of Clovis, New Mexico

The City of Florissant, Missouri

The City of Fremont (Nebraska)  
Dept. of Utilities

The City of Imperial, Nebraska

The City of Lawrence, Kansas

The City of McCook, Nebraska

The City of Peoria, Arizona

Teton County, Wyoming

The City of Milwaukee,  
Wisconsin

The City of Rolla, Missouri

The City of Scottsdale, Arizona

The City of Shawnee, Kansas

The City of Sullivan, Missouri

The City of Tempe, Arizona

Grand Forks Public Schools

Haysville USD 261 (Kansas)

Milwaukee Public Schools

Minneapolis Public Schools

Sioux Falls School District

Western Minnesota Municipal  
Power Agency

18. Discuss any impending changes in your organization that could impact the delivery of your services.

Hays Companies does not anticipate any future changes to our organization.



## BROKER QUESTIONNAIRE

19. Describe the form of professional liability or errors and omissions insurance carried by your company and the amount of coverage.

Hays Companies has Professional Liability and Errors & Omissions coverage through AIG with a \$5,000,000 limit.

20. Describe in detail your service philosophy, and the number of staff members available to support your clients.

Hays Companies of Denver currently has 20 employees in our Benefits department. Our team works in unison to provide the highest level of service possible to our clients. We focus 100% on client service and the entire team is available on a consistent basis to respond and serve our client's needs.

Every client at Hays Companies has a client service agreement that outlines all deliverables throughout the year along with a service guarantee. At year end, we sit with our clients and deliver a stewardship report that outlines the service goals and financial goals that were set. Our team structure, as described previously, is set-up to ensure that there are multiple levels of review of work product and output. Every member of the team has an active working knowledge of the account and peer review is a consistent practice.

We believe that you can't provide customer service without follow through. Our Consultants, Account Managers, and Financial Consultants all approach client service with the philosophy of solution and resolution. We are adamant about discussing and tracking the goals and objectives of each of our clients. One example is our Client Service Calendar, which we develop with each individual client on an annual basis. We utilize this tool to work plan and adhere to our clients' expectations. Additionally, the team will be actively involved in the day-to-day issues that arise and track such issues with documented follow-up.

At the beginning of each year we sit down with our clients and develop a Service Calendar for that year. We use our Service Calendar as a working document and planning tool with our customers. It changes based on client's service needs. Our Service Calendar is also used as an objective/goal setting tool and as a method of accountability for not only Hays Companies but also our clients.

*Please see the sample Service Calendar on the following page:*





# BROKER QUESTIONNAIRE

<b>January</b> <ul style="list-style-type: none"> <li>■ Set up monthly financial tracking format for 2010</li> <li>■ Update benefit summaries, rate &amp; fee history, etc.</li> <li>■ Finalize contract/ SPD review</li> </ul>	<b>February</b> <ul style="list-style-type: none"> <li>■ Request Schedule A forms</li> <li>■ Host strategy/planning meetings with vendor partners medical/dental/life/disability vision</li> </ul>	<b>March</b> <ul style="list-style-type: none"> <li>■ Evaluate and select HRA vendor</li> <li>■ Follow-up on Schedule A collection</li> <li>■ Deliver quarterly IBNR update to finance</li> </ul>	<b>Qtr. 1</b>	
<b>April</b> <ul style="list-style-type: none"> <li>■ Evaluate Total Comp Statement vendors/tools</li> <li>■ Life/Disability carrier RFP submitted to market</li> <li>■ Initial HRA communications to EE's</li> <li>■ 2009 Financial Recap/ Wrap-up</li> </ul>	<b>May</b> <ul style="list-style-type: none"> <li>■ Initiate Claims Audit with TPA</li> <li>■ Request renewals</li> <li>■ Deliver Plan's Claims Utilization Report and Clinical Analysis</li> </ul>	<b>June</b> <ul style="list-style-type: none"> <li>■ Life/Disability RFP responses received</li> <li>■ 5500 filing completed</li> <li>■ Deliver quarterly IBNR update to finance</li> </ul>		<b>Qtr. 2</b>
<b>July</b> <ul style="list-style-type: none"> <li>■ Deliver Total Comp Statements</li> <li>■ Receive outcome of Claims Audit</li> <li>■ Insured renewals received</li> <li>■ 2011 Self-funded cost projections delivered</li> </ul>	<b>August</b> <ul style="list-style-type: none"> <li>■ Final renewal negotiations completed</li> <li>■ Self-funded plan design modeling and valuation delivered</li> <li>■ Benchmarking completed</li> </ul>	<b>September</b> <ul style="list-style-type: none"> <li>■ Executive approval of 2011 rates/contributions</li> <li>■ Confirm rates to HRIS vendor</li> <li>■ Deliver quarterly IBNR update to finance</li> </ul>		
<b>October</b> <ul style="list-style-type: none"> <li>■ New vendor implementation as needed</li> <li>■ Open enrollment process starts</li> <li>■ Conduct employee meetings</li> </ul>	<b>November</b> <ul style="list-style-type: none"> <li>■ Conclude open enrollment</li> <li>■ Discussion of 2011 initiatives</li> <li>■ Plan document/amendment review initiated</li> </ul>	<b>December</b> <ul style="list-style-type: none"> <li>■ Finalize new vendor implementation as needed</li> <li>■ Final IBNR YTD delivered to finance</li> </ul>		<b>Qtr. 4</b>

■ Financial    
 ■ Employee Satisfaction    
 ■ Administrative Effectiveness    
 ■ Behavior Management

21. List ways that your firm can assist with the management of insurance, including preparation of claims activity reports from carriers; executive summary reports; underwriting analysis for annual renewals; annual financial projections for budgeting purposes analysis, etc.

Hays Companies utilizes a wide variety of tools, processes, and resources to assist our clients in the ongoing review and administration of their Health and Welfare programs. Throughout the year, we provide detailed financial reporting and perform in-depth analyses of your claims in order to get a complete picture of how your plans are performing.



The most basic—but very important—tool for administering your benefits program is our monthly financial reporting package. We compile claims, enrollment data and financial accounting reports from all carriers and vendors on a monthly basis and deliver it to you for review.





## BROKER QUESTIONNAIRE

This monthly reporting package provides a detailed analysis on either fully insured or self-funded plans, including large claim tracking, year-to-date comparison data, projected expenses vs. actual expenses, IBNR calculations, 24-month rolling projections and employee/employer contribution tracking.

This report can be broken down by location, departments, and plan options as requested. The report is also readily available at any time upon the request of Adams County.

We will also provide the County with a sophisticated claims data analysis and auditing tool annually called Health Plan Intelligence (HPI). Our in-depth HPI report evaluates your claims experience and provides valuable information to help us make intelligent decisions on how we can control your claim costs when it comes to high dollar claims, network discounts and plan designs. This report also provides us with demographic data, comparative and normative data, benchmarking data and lifestyle-related claims data.

Additionally, Hays Companies works closely with our carrier partners to deliver customized ad hoc reports to our clients. However, we take the effort, cost, and the guess work out of trying to get the proper report from the carrier with our own HPI reporting tool.

HPI provides us with the data needed to deliver customized and ad hoc reports. We extract a raw data file directly from your carrier or claims administrator which includes every claim down to the CPT and ICD-9 level. As a result, we have the ability to run many degrees of ad hoc reports. These ad hoc reports are an online extension of the HPI report (called HPI Analytics) and provide unlimited drill down capabilities. As a client, we can provide you with access to this report to run your own reports or we can run them for you.



# BROKER QUESTIONNAIRE

**HPI ANALYTICS**  
Powered by Health Plan Intelligence

Home Reports Bookmarks Export Full Screen Refresh Help Log Out

XYZ Incorporated - January 2012 through December 2012, Incurred Claims - Chronic Disease

Report Properties  
Chronic Disease

Filters

Reset Apply

Viewless Visits  
Members - Viewless Visits  
Members - Incurable Visits

Provider Status  
PUS  
NOLUAR

Subgroups  
Design - High Plan  
Design - Low Plan  
Inps - High Plan  
Inps - Low Plan  
Dns - High Plan  
Dns - Low Plan  
Wecostn - High Plan

Weight  
Bill Underweight

Chronic Disease	Services	Mors	Svc/Mor	Billed Charge	Plan Paid	% Paid	Paid/Mor
Total	13,992	1,318	14.4	\$9,248,566	\$5,330,734	100.0%	\$4,031
Chronic Disease Members	6,351	260	26.4	\$4,355,038	\$2,637,390	49.5%	\$10,144
Asthmatics	1,159	40	29.2	\$427,670	\$262,801	4.6%	\$6,570
Coronary Heart Disease Patients	752	28	26.9	\$840,157	\$340,956	6.4%	\$12,145
Depression-related Disorder Patients	1,474	36	40.9	\$497,194	\$319,821	6.0%	\$8,804
Diabetics	1,624	83	30.7	\$1,013,056	\$654,712	12.3%	\$10,392
High Blood Pressure Patients	4,085	142	28.8	\$3,200,042	\$1,963,653	36.8%	\$13,830
Obesity Patients	190	7	25.7	\$98,826	\$61,466	1.2%	\$6,781
Non-Chronic Members	12,141	1,058	11.5	\$4,890,528	\$2,693,404	50.5%	\$2,531

## HPI Dashboard

To view a video on HPI Dashboard, follow this link: <http://vimeo.com/84253332>



## HPI Analytics

To view a video on HPI Analytics, follow this link: <https://vimeo.com/84253331>



## HPI BeneCalc

To view a video on HPI BeneCalc, follow this link: <http://vimeo.com/84253333>



Enter Password: hays

Shown on the following page are a few screenshots of ad hoc reports extracted from our online HPI Analytics tool:





# BROKER QUESTIONNAIRE

Executive Viewer Options Help Logout

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Document Folders

Controls

Reset Apply

Medical Services

- Chiropractic Encounter
- Emergency Room Visit
- Inpatient Hospital Admission
- Inpatient Surgery
- Laboratory Services
- Mental Health Visit
- Other Services
- Outpatient Hospital Encounter

Relationship

- Dependent
- Employee
- Spouse

Gender

- Female
- Male

Age Band

HPI Online

Disease Categories

Disease Categories	Incidents	Pct Incid	Mbrs	Billed Charge	Pct Paid	Avail Pct	Avail Paid
All Disease Categories	174	100.00%	125	\$78,447.25	\$60,066.83	\$470.85	\$145.21
Injury and Poisoning	88	50.58%	61	\$11,084.32	\$25,579.74	\$455.95	\$376.17
Systemic and Ill-Defined Conditions	21	12.07%	15	\$19,136.07	\$15,189.14	\$920.44	\$723.29
Respiratory System Diseases	27	15.52%	18	\$7,804.85	\$5,536.58	\$289.07	\$204.91
Nervous System Diseases	20	12.64%	19	\$9,953.20	\$2,743.93	\$179.69	\$125.63
382.9-UNS-OTITIS MEDIA	19	10.92%	17	\$2,483.40	\$2,627.77	\$192.84	\$139.50
381.01-ACUTE SEROUS-OTITIS MEDIA	1	0.57%	1	\$92.15	\$79.71	\$32.15	\$23.71
388.40-OTOPRHEA UNSPEC	1	0.57%	1	\$63.35	\$62.45	\$69.29	\$62.45
384.20-UNS PERFORATION TYMPANIC MEMBRANE	1	0.57%	1	\$108.24	\$0.00	\$108.24	\$0.00
Mental Disorders	4	2.30%	4	\$2,464.40	\$2,366.72	\$616.63	\$591.63
Endocrine, Metabolic and Nutritional	3	1.71%	3	\$2,426.57	\$2,183.92	\$2,426.57	\$2,183.92
Circulatory System Diseases	1	0.57%	1	\$1,790.20	\$1,592.17	\$1,990.20	\$1,592.17
Digestive System Diseases	5	2.87%	5	\$3,456.54	\$1,379.90	\$691.31	\$275.99
Sensory System Diseases	4	2.30%	2	\$1,647.81	\$1,015.44	\$266.35	\$125.59
Infectious and Parasitic Diseases	4	2.28%	4	\$2,070.97	\$129.58	\$345.14	\$154.93
Skin Diseases	4	2.28%	5	\$1,683.90	\$889.24	\$208.74	\$111.25

Columnset Page 1 / 1 Rowset Page 1 / 1

Done Lookit.net

## Unhealthy Behaviors

Costs and Number of Members with Conditions

Condition	Physical Inactivity		Poor Nutrition		Tobacco Use		Substance Abuse		Total Members	% of Total
	Count	Amount	Count	Amount	Count	Amount	Count	Amount		
Coronary Heart Disease	52,167	22	52,167	22	52,167	22			54,678	23
Obesity	\$2,406	9	\$2,406	9					\$2,406	9
Colonial Cancer			2,157	2					\$24,970	2
Diabetes			\$46,033	72					\$46,033	72
High Blood Pressure			521,667	128					\$34,664	128
High Cholesterol			\$12,372	49					\$12,372	49
Stroke			521,122	12	521,122	12			\$29,432	12
Lung Cancer					\$17	1			\$17	1
COPD (Chronic Obstructive Pulmonary Disease)					521,210	26			\$23,280	26
Cancer of the Oral Cavity/Pharynx					\$3,177	1			\$3,177	1
Tobacco Use					52,167	6			\$1,456	6
Alcohol Abuse							\$2,896	2	\$2,896	2
Use of Prescription Medications							\$1,297	1	\$1,297	1
Alcohol Dependence							\$242	2	\$242	2
Cardiovascular							521,210	4	\$28,280	4
Drug Abuse							\$1,081	1	\$1,081	1
Use of Prescription Medications									\$2,782	2
Drug Dependence									\$2,782	2
Other									\$2,782	2
<b>Total</b>	<b>\$ 38,083</b>	<b>32</b>	<b>\$ 205,555</b>	<b>236</b>	<b>\$ 112,230</b>	<b>69</b>	<b>\$ 33,802</b>	<b>15</b>	<b>\$ 4,060,115</b>	<b>100%</b>

Hays The information contained in these documents is proprietary to Hays Companies and is not to be distributed to parties outside of ABC Company without the express written permission of a representative of Hays Companies

Not only does the HPI report evaluate the efficiency of all aspects of your medical plan performance, it also gives us a database to perform plan design modeling based on your actual claims (versus underwriter assumptions). This is performed through our online HPI BeneCalc tool.





## BROKER QUESTIONNAIRE

BeneCalc looks at what a plan design change will save, how many participants it will affect, and the potential savings or cost. It will essentially predict the financial impact from an employer and member perspective. Quantification of member impact is particularly useful during labor negotiations and for employee communications in general.

This report is available online and our clients can also be given access to run various scenarios. Clients can run “what if” scenarios on inpatient, outpatient, physician office, wellness and chronic disease data to identify the cost drivers behind their healthcare costs.

*Below are a few examples of BeneCalc reports:*

### EMERGENCY ROOM VISITS

XYZ Incorporated

Choose Subgroups

	Baseline		→	Alternative	
	In-Network	Out-Network		In-Network	Out-Network
Plan Design Info					
Copayment Per Visit	\$ 50	\$ 50	→	\$ 150	\$ 150
Coinurance Rate	80 %	70 %		80 %	80 %
Network Performance Info	Coverage	Discounts		Coverage	Discounts
Reported in Underlying Data	99.92%	9.45%			
Used in Modeling	82.90 %	14.82 %	→	82.90 %	14.82 %
Expected Change in Utilization				-12.00 %	
Expected Medical Inflation Rate				10.00 %	
Member Impact				284 (18.93%)	
Annual Expected Percent Cost/(Savings) in Category				(24.60%)	
Annual Expected Percent Cost/(Savings) to Total Paid				(1.36%)	
Annual Expected total Dollar Cost/(Savings)				(\$61,331)	
Annual Expected Cost/(Savings) per Member				(\$40.89)	
Annual Expected Cost/(Savings) per Employee				(\$94.36)	



## EMERGENCY ROOM VISITS

XYZ Incorporated

Choose Subgroups

	Baseline		→	Alternative	
	In-Network	Out-Network		In-Network	Out-Network
Plan Design Info					
Copayment Per Visit	\$ 50	\$ 50	→	\$ 150	\$ 150
Coinsurance Rate	90 %	70 %		60 %	60 %
Network Performance Info	Coverage	Discounts		Coverage	Discounts
Reported in Underlying Data	93.93%	9.45%			
Used in Modeling	82.90 %	14.62 %	→	82.90 %	14.62 %
Expected Change in Utilization				-12.00 %	
Expected Medical Inflation Rate				10.00 %	
Member Impact				254 (-18.93%)	
Annual Expected Percent Cost/(Savings) in Category				(24.60%)	
Annual Expected Percent Cost/(Savings) to Total Paid				(1.36%)	
Annual Expected total Dollar Cost/(Savings)				(\$61,331)	
Annual Expected Cost/(Savings) per Member				(\$40.89)	
Annual Expected Cost/(Savings) per Employee				(\$94.36)	

## WELLNESS/ROUTINE VISITS

XYZ Incorporated

Choose Subgroups

	Baseline		→	Alternative	
	In-Network	Out-Network		In-Network	Out-Network
Plan Design Info					
Copayment Per Visit	\$ 30	\$ 30	→	\$ 0	\$ 0
Coinsurance Rate	90 %	70 %		100 %	70 %
Network Performance Info	Coverage	Discounts		Coverage	Discounts
Reported in Underlying Data	99.76%	9.86%			
Used in Modeling	99.00 %	9.88 %	→	99.00 %	20.00 %
Expected Change in Utilization				25.00 %	
Expected Medical Inflation Rate				8.00 %	
Member Impact				317 (+21.13%)	
Annual Expected Percent Cost/(Savings) in Category				70.53%	
Annual Expected Percent Cost/(Savings) to Total Paid				0.61%	
Annual Expected total Dollar Cost/(Savings)				\$27,339	
Annual Expected Cost/(Savings) per Member				\$18.23	
Annual Expected Cost/(Savings) per Employee				\$42.06	





## BROKER QUESTIONNAIRE

To demonstrate the power of HPI, please refer to the graph below. From 2007-2016 the average annual health insurance increase was 8.7%. Over that same time period, the average annual health insurance increase for Hays Companies' clients utilizing Health Plan Intelligence was 4.6%!

### Health Plan Intelligence vs. National Trend Annual Health Care Cost Per Employee



\*\*Health Plan Intelligence Aggregate Book-of-Business - 2007 - 2015



Lastly, through our partnership with Truveris, our prescription drug consulting services evaluate the competitiveness of your contract with your Pharmacy Benefit Manager (PBM). Through years of experience, we have gained knowledge of the moving pieces within a PBM contract. Truveris has software that allows us to measure contract pricing from all angles. The prescription drug report pulls raw data on every script filled by a client's employee and their family members. This process usually uncovers hidden costs within the contract that affect both employer and employee costs. We are able to create transparent contracts with PBM's that eliminate these hidden costs and ultimately save the employer and employee money. The entire process allows us to negotiate better pricing on behalf of our clients and also helps the employer communicate, educate and control future prescription costs.

***Please refer to the screenshots on the following page of a sample Prescription Drug Audit.***





# BROKER QUESTIONNAIRE

## Broad Network / Broad Formulary

### Major statistics

- 68,622 Pharmacies
- 100% Current Pharmacy Coverage
- 100% Current Pharmacy Coverage
- 100% Current Pharmacy Coverage
- 100% Current Pharmacy Coverage
- 100% Current Pharmacy Coverage
- 100% Current Pharmacy Coverage
- 100% Current Pharmacy Coverage



### 2015 Plan Paid

Category	Savings \$	Savings %
Brand Brand (37 Drugs)	\$70,004	4.40%
Brand Brand (29 Drugs)	\$19	0.01%
Brand Generic	\$38,331	13.70%
Max Order Brand	\$915	0.21%
Max Order Generic	\$984	1.27%
Specialty	\$125	0.00%
Admin Fees	\$11,456	4.00%
Rebates	\$1,820	2.30%
<b>TOTAL</b>	<b>\$50,658</b>	<b>20.75%</b>

### Five Unmitigated Truths: PBM Industry

1. If your PBM employs "spread" pricing or charges the payer an amount above what they have paid for a drug, you are over paying for your drugs across the board.
  2. If you do not have and have unlimited access to your drug spend claims data, you have placed your company in a "top-wr" situation.
  3. If you cannot audit your PBM annually with an auditor of "your sole choosing", you will be unable to accurately calculate the true cost of your drugs.
  4. PBM audits without unlimited access to pharmaceutical manufacturer rebate contracts and network pharmacy contracts are meaningless and of no value.
- Visit us on our website at [envisiorx.com](http://envisiorx.com)



ENVISION  
PHARMACEUTICALS  
(800) 875-1111

ENVIORX.COM

Savings: **22.65%**

Example Co. 2 Plan Through

Year	Ingrdient Cost	Dispensing Fees	Admin Fees	Rebates	Total	Member	Plan	Current Cost	Savings	Alignment
2014	\$139,767	\$4,724	\$1,438	\$1,915	\$147,844	\$49,564	\$142,642	\$284,072	\$21,716	\$
2015	\$168,517	\$4,764	\$1,560	\$3,481	\$178,322	\$50,021	\$149,814	\$316,837	\$24,816	\$0
2017	\$1,132,711	\$2,000	\$2,417	\$1,012	\$1,138,140	\$44,562	\$1,093,127	\$2,150,011	\$24,401	\$
<b>TOTAL</b>	<b>\$565,347</b>	<b>\$12,516</b>	<b>\$35,946</b>	<b>\$1,16,901</b>	<b>\$596,509</b>	<b>\$150,168</b>	<b>\$446,741</b>	<b>\$771,713</b>	<b>22.65%</b>	<b>\$0</b>

### Formulary



### Total Drug Spend



Please refer to the Appendix (G) for information on TruVeris' RxChoice Software.



### 22. Describe the process your firm uses for carrier renewals and negotiations.

Hays Companies excels in the renewal negotiation process. We have established preferred senior broker relationships with all of the major carriers and administrators. As a significant producing broker, we have the leverage necessary to successfully negotiate on behalf of our clients. We have been successful in securing significant cost savings on behalf of our clients as a result of our data-driven renewal process, market presence and experience of our senior staff.

The above dynamic gives us several advantages in the marketing, implementation, service and renewal negotiations with vendors. As part of our regular due diligence process, we routinely provide the following services:

- Pre-renewal benchmarking and utilization analysis
- Identification of key markets to partner with our clients
- Development and distribution of Request for Proposal (RFP) based on the established objectives
- Provide detailed analysis of competitive proposals and recommendations

When a vendor change is indicated, we will coordinate the flow of information between the County and the carrier (or administrator) to ensure that all necessary elements are completed for a timely transition. To assist us in identifying key activities required for a successful transition, we will prepare and provide you with a detailed Implementation Timeline and Service Calendar.

After the renewal/implementation, we will work with the County and the vendors to ensure your plans continue to meet identified objectives, provide assistance and intervention where necessary to ensure quality service is delivered, and provide you with regular updates on legislative and compliance issues, new product developments and trends.

Hays also provides significant support with both the drafting and review of Plan Documents and Summary Plan Descriptions. The Hays process begins with a detailed review of Plan documents by your account management team to ensure that technical benefit and eligibility information is both clear and accurate. Subsequent to that review, Hays' Legal and Compliance department provides an additional review to ensure that Plan Documents and SPD(s) contain all of the required language and is represented in a way consistent with the County's expectations.

### 23. Indicate how you keep clients informed of regulatory and legislative changes that affect insurance plans.

Keeping the County informed on regulatory and legislative developments is especially important as it relates to Health Care Reform. With the help of our Compliance team, we will keep you aware of and compliant with the numerous Health Care Reform mandates.

Additionally, in order to assist the County in analyzing the effect of health care reform's "Pay or Play" regulations, we will conduct actuarial modeling to estimate the financial impact of PPACA based on your individual plan structure and demographics.

We provide our clients with a variety of ACA-specific reports and documents, including:

- PPACA Impact Analysis Report PPACA Migration Study
- Federal Notice Templates
- 2018 Excise Tax Viability Study

Modeling is customized by the County's demographics. Premiums, tax implications, employer penalties, employee costs under the exchange, and federal subsidies are all projected.

Hays has the ability to monitor regulatory and legislative developments at both the State and Federal level. We will advise the County regarding legislation and regulations impacting employee benefits on both the Federal and State levels and recommend solutions.

A critical differentiator for Hays – we will provide indemnified legal opinions around Health & Welfare issues as part of our compliance and legal services at no additional cost. With many clients, we act as their sole source of compliance support.

We have a corporate compliance department and law firms on retainer specializing in ERISA compliance.

Our services include preparation of the necessary HIPAA documents (e.g. Business Associate agreements, SPD privacy and security language, privacy notices and training materials), in addition to assistance with all other applicable laws and regulations.

We maintain an extensive library of compliance data, tax guides, surveys, sample policies and benefit/HR periodicals. New developments are quickly communicated via client community e-



## BROKER QUESTIONNAIRE

mail alerts, monthly mailings and quarterly newsletters. We also hold regular client seminars on timely benefit topics.

Hays Companies also provides numerous services both to our own employees and to our clients in the areas of research, support and compliance assistance:

- Strategic partnerships with ERISA and Employment Law attorneys
- Internal Compliance and Research Department
- Assistance with COBRA, FMLA, ERISA, HIPAA
- Form 5500 preparation
- Recent and proposed regulations
- HIPAA Privacy Manual



At the beginning of any new engagement, we complete a thorough review and compliance audit. If compliance issues are found we move quickly to amend the situation. After that initial assessment is completed, the consulting team works as an extension of your HR staff to remind the County of any upcoming compliance requirements. On an annual basis, Hays compiles a compliance calendar for every client. Any time there is a new requirement or update on existing regulations, Hays Companies notifies all the affected clients and ensures full understanding by the client. In short, Hays provides our clients with the answers they need before they need it, rather than expecting them to figure it out for themselves.

Anytime there are benefit-related legislative or legal questions, our Consultants rely on our Compliance and Research staff to provide fact-based answers and then communicate them back to our clients.

Updates on changes in federal and state laws, including employee benefit-related compliance issues and Health Care Reform are communicated to our clients on a regular basis. These updates are generally provided by email and descriptive newsletters. We also discuss these items and the impact on benefit plans in regularly held meetings with our clients.

Hays also provides significant support with both the drafting and review of Plan Documents and Summary Plan Descriptions.



## BROKER QUESTIONNAIRE

The Hays process begins with a detailed review of plan documents by your account management team to ensure that technical benefit and eligibility information is both clear and accurate. Subsequent to that review, Hays' Legal and Compliance department provides an additional review to ensure that Plan Documents and SPDs contain all of the required language and is represented in a way consistent with the County's expectations.

**24. Describe any other facets of your organization and your firm's experience that are relevant to this proposal that have not been previously described and that you feel warrant consideration.**

There are a number of challenges that employers are facing with their benefit programs as we look at the next several years. All employers are starting to see a shift in the work force as one generation starts to retire and a younger generation replaces them. This younger generation has different expectations of benefits, how does an employer remain up to date with these changes and continue to be an employer of choice in the markets they serve? Hays Companies believes we understand this challenge and have the tools and resources to help employers with this transition. As it relates specifically to the question, there are three issues Hays would look to address with the County to help remain an employer of choice, offering great benefits and lowering costs. Those challenges are:

1. Reviewing the population you insure or your Risk Pool.
2. Rx and specifically specialty Rx. Across the Country Rx spend is increasing at almost double the rate of medical claims. More drug manufactures are producing specialty medications that are being used more frequently and increasing costs.
3. Understanding what is driving your plan costs and how to combat this. Plan design of a benefit plan is typically an insignificant piece to reducing costs, yet this is the first thing an employer will look at when costs are rising. Hays companies takes a different approach by reviewing utilization data and cost drivers that allow employers to continue to offer lower deductibles while not increasing costs.

How does Hays companies help employees with these challenges? We have outlined at a high level our strategies below and throughout this RFP.

### Risk Pool Management (RPM) Summary:

Hays Companies provides a unique consulting experience where we recognized early on how the objectives of the insurance carrier are not always in sync with their clients. The objective of the insurance carrier has been to grow membership by implementing rating





## BROKER QUESTIONNAIRE

subsidies throughout the premium billing structure. (Most consultants simply mirror these rate relationships year over year never questioning their validity). These subsidies increase the cost of your employee only coverage with offsetting reductions for the premium need for dependents. Employers will typically define their cost sharing strategy against these inaccurate rates thus further increasing the subsidy beyond their corporate strategic goal. The outcome is in sync with the goals for your carrier representing increased membership (and thereby more premiums) in your group plan.

The Hays Solution: Our underwriters help you identify the group you should be insuring, and not the extra group the insurance company is trying to get you to insure. Implementing our models reducing our clients renewal cost adjustments to Medical CPI (<4%) without the need chase every marketplace product trend.

### Making Healthcare Accessible through Onsite Clinics:

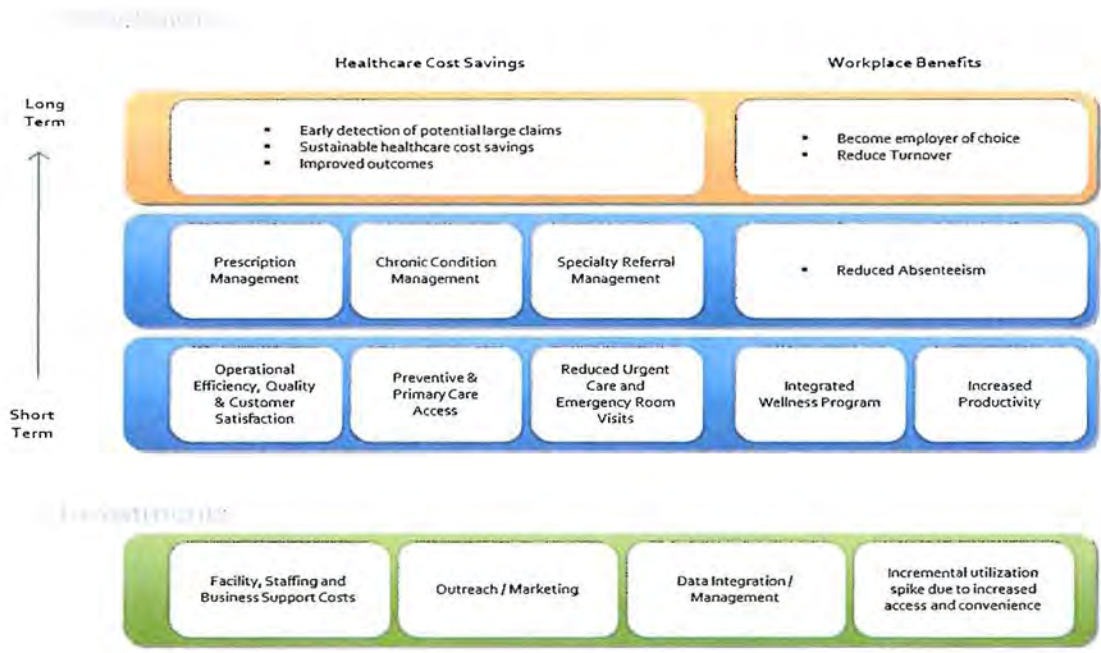
Hays Companies has developed a specialized practice dedicated to the development of onsite clinics for our larger clients. Although this service is not at the forethought of most Human Resource representatives; implementing onsite employer services can dramatically improve the health and productivity of population.

- ✦ Improve the Health of Employee Population
- ✦ Reduce/Control Future Healthcare Spend
- ✦ Enhance Benefits Package Offered to Employees:
- ✦ Recruit and Retain the Best Employees
- ✦ Optimize Access to Primary Care
- ✦ Increase Productivity = WIN/WIN
- ✦ Reduce Absenteeism





# BROKER QUESTIONNAIRE



## APPENDIX

- A. Contractor's Certification of Compliance
- B. Proposal Form
- C. Hays Companies of Denver Client List
- D. Hays Team Biographies
- E. Adams County Sample Open Enrollment Guide
- F. Sample Risk Pool Management Analysis
- G. Truveris' RxChoice Software

## CONTRACTOR'S CERTIFICATION OF COMPLIANCE

Pursuant to Colorado Revised Statute, § 8-17.5-101, *et seq.*, as amended 5/13/08, as a prerequisite to entering into a contract for services with Adams County, Colorado, the undersigned Contractor hereby certifies that at the time of this certification, Contractor does not knowingly employ or contract with an illegal alien who will perform work under the attached contract for services and that the Contractor will participate in the E-Verify Program or Department program, as those terms are defined in C.R.S. § 8-17.5-101, *et seq.* in order to confirm the employment eligibility of all employees who are newly hired for employment to perform work under the attached contract for services.

CONTRACTOR:

HAYS COMPANIES  
Company Name

5/5/10  
Date

ERIC ROSALES  
Name (Print or Type)

  
Signature

SENIOR VICE PRESIDENT  
Title

Note: Registration for the E-Verify Program can be completed at: <https://www.vis-dhs.com/employerregistration>. It is recommended that employers review the sample "memorandum of understanding" available at the website prior to registering





**ADAMS COUNTY**  
**COLORADO**

**PROPOSAL FORM**  
**EMPLOYEE BENEFITS BROKER SERVICES 2016.016**

**CONTRACTOR'S STATEMENT**

I have read and fully understand all the special conditions herein set forth in the foregoing paragraphs, and by my signature set forth hereunder, I hereby agree to comply with all said special conditions as stated or implied. In consideration of the above statement, the following proposal is hereby submitted.

ONE HUNDRED FIFTEEN THOUSAND \$ 115,000.00  
Written Amount for ONE YEAR OF SERVICE Dollar Amount  
Please break-down the above cost (What does this Cost include?)

---

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WE, THE UNDERSIGNED, HEREBY ACKNOWLEDGE RECEIPT OF THE FOLLOWING:  
Addenda Numbers #/ If None, Please write NONE.

<u>HAYS COMPANIES</u>	<u>5/5/16</u>
Company Name	Date
<u>1125 17th ST. SUITE 400</u>	<u>Eric J. Rosales</u>
Address	Signature
<u>DENVER, CO 80202</u>	<u>ERIC ROSALES</u>
City, State, Zip Code	Printed Name
<u>DENVER</u>	<u>SENIOR VICE PRESIDENT</u>
County	Title
<u>(720) 279-3412</u>	<u>(720) 279-3401</u>
Telephone	Fax
Email Address <u>erosales@hayscompanies.com</u>	



# Denver Client Listing



Agfinity  
 Air Methods  
 All Copy Products  
 AlloSource  
 Alpine Lumber Co.  
 ANB Bank  
 Applewood Plumbing Heating and Electric  
 Arapahoe Library District  
 Balfour Senior Living  
 BioScrip  
 Black Creek Capital  
 Bonfils Blood Center  
 Boulder Scientific Company  
 Brush School District  
 Century Communities  
 Center Partners  
 Central Nebraska Public Power (NE)  
 Chase County Community Hospital (NE)  
 Chase County (NE)  
 Chuck Latham Associates  
 Ciris Energy  
 City of Durango  
 City of Fort Collins  
 City of Imperial (NE)  
 City of Lakewood  
 City of McCook (NE)  
 City of Montrose  
 City of Westminster  
 Colorado Mesa University  
 Cornerstone Programs Corporation  
 Colorado Mountain Medical  
 Denver Center for the Performing Arts  
 Denney Transport  
 Denver Museum of Nature & Science



Denver Rescue Mission  
 Designs by Sundown  
 Developmental Disabilities  
 Resource Centers (DDRC)  
 Discovery Natural Resources  
 District Attorney 18<sup>th</sup> Judicial District  
 Dry Systems Technologies  
 Eagle County  
 Eagle River Water & Sanitation District  
 EnCon United / Stresscon  
 Floyd's Truck Center, Inc. (WY)  
 Frontier Mechanical  
 Gallegos Corporation  
 Greenleaf Wholesale Florist  
 GF Gaming Corporation  
 Group Publishing  
 Ground Engineering Consultants  
 Gunnison School District  
 Highstreet IT Solutions  
 Hospital Shared Services (HSS)  
 Holdrege Memorial Homes (NE)  
 Imagine!  
 Inspirato  
 Intermountain Rural Electric Association  
 La Plata Electric Association  
 Labs, Inc.  
 Laramar Group  
 Larimer Associates  
 Lowe/Destination  
 Martin / Martin, Inc.  
 Merritt Equipment  
 Metro West Housing Solutions

Middle Park Medical Center  
 Moffat County  
 Mount Carmel Homes  
 Neenan Archistruction  
 National Bank Holdings  
 Nebraska Salt & Grain Co. (NE)  
 Northern Colorado Water District  
 North Metro Community Services  
 Northridge Movers  
 Oregon Trail Equipment (NE)  
 Orthman Manufacturing  
 Paulsen, Inc.  
 Pason  
 Perkins County Health Services (NE)  
 Real Capital Solutions  
 Risas Dental and Braces  
 Republic Financial Corporation  
 Resurrection Christian School  
 Routt County  
 South Routt School District RE-3  
 Steamboat Springs School District  
 Town of Vail  
 Town of Breckenridge  
 Trinidad Benham  
 Tri-County Health  
 UDR  
 US Space Foundation  
 Valmont Industries (NE)  
 Valley Hope Association (KS)  
 Via West  
 Vivage  
 Waterpik  
 Weathercraft Companies (NE)  
 Western Sugar Cooperative



LARAMAR



WESTMINSTER



All Together. Certain.





# Eric Rosales

**Eric Rosales**  
**Senior Vice President / Lead Consultant**  
**Hays Companies of Colorado**

1125 17<sup>th</sup> Street  
Suite 400  
Denver, Colorado 80202  
Phone: 720-279-3412  
erosales@hayscompanies.com

Eric is a Senior Vice President for Hays Companies in Denver, Colorado. He is responsible for the internal operations of the benefits department as well as account management responsibilities. He specializes in providing consulting and financial analysis of the client's employee benefit programs. Eric has over 23 years of employee benefit experience.

Prior to joining Hays in 2003, Eric worked for 6 1/2 years as a Benefit Analyst and then Senior Client Consultant for the world's largest insurance consulting firm. In 2002, as a Senior Client Consultant, Eric was responsible for 14 large accounts that generated nearly \$1 million in revenue. Eric's responsibilities as a Consultant included establishing employer health plan philosophies and setting plan objectives to meet employer financial guidelines. As a Benefit Analyst, Eric's primary responsibilities were underwriting for self-funded employers, renewal negotiations, financial analysis, request for proposal preparation, marketing, monthly claim reporting, plan modeling, setting accrual rates, and IBNR analysis.

Prior to joining the insurance consulting industry, Eric gained 7 years of experience working for a large regional third party claims administrator where he was manager of both the Stop-Loss and Funding departments. He was responsible for management of client funds including distribution of claim and premium payments, excess loss claims filing, and claim reimbursements from Stop-Loss carriers. Eric is currently the Lead Consultant for 11 clients.

## **Recognition**

Eric is one of the original principals hired to open the Hays Denver office. The office recently celebrated its 10 year anniversary. Eric holds a Life and Health insurance license.

## **Client Experience (past/present)**

Time Warner Telecom (tw telecom)  
City of Thornton  
Larimer County  
Center Partners  
City of Fort Collins  
City of Westminster  
City of Loveland  
The Denver Center for the Performing Arts  
Water Pik







# Sarah Manning

**Sarah Manning**  
**Senior Benefits Consultant**  
**Hays Companies of Colorado**

1125 17<sup>th</sup> Street

Suite 400

Denver, Colorado 80202

Phone: 720-279-3440

smanning@hayscompanies.com

Sarah is a Senior Benefits Consultant for Hays Companies in Denver, Colorado. She specializes in strategic benefits consulting and financial analysis of employee benefit programs. Sarah has over 10 years of healthcare industry experience.

Prior to joining Hays in 2013, Sarah was an Account Executive for a regional brokerage firm in the Denver area. Her primary role was to consult with clients during the renewal process as well as manage the client relationship throughout the year. She held this role for 6 years, and was responsible for over 30 Key Accounts.

Sarah began her career in 2003 working as an analyst for a large national TPA. There she gained experience with the reinsurance marketing process, contribution strategies, and vendor negotiations.

## **Recognition**

Sarah received her Bachelor of Science in Business Administration from the University of Phoenix, holds a Life and Health insurance license, and is pursuing an RHU designation.

## **Client Experience (past/present)**

Water Pik

Town of Vail

City of Westminster

Sonnenalp Resort

Century Communities



# Chris Ewing

**Chris Ewing**  
**Financial Consultant**  
**Hays Companies of Colorado**

1125 17<sup>th</sup> Street

Suite 400

Denver, Colorado 80202

Phone: 720-279-3411

cewing@hayscompanies.com

Chris is a Financial Consultant for Hays Companies in Denver, Colorado. He specializes in financial strategy and oversight and underwriting for group health plans. He is responsible for the financial analysis, plan budgeting and design, vendor marketing and selection, claim reporting, benefit modeling, and renewal negotiations for his client's plans. Chris has over 7 years of employee benefit experience.

Prior to joining Hays in 2015, Chris worked for 7 years as a Benefit Analyst and Technical Consultant for the world's largest insurance consulting firm. As a Technical Consultant, he provided financial oversight and underwriting for groups ranging in size from 200 – 15,000 employees. Chris has experience working on both private sector and public entity business. His responsibilities included day-to-day financial account management, internal team management, and driving strategy and planning discussions with his clients.

## **Recognition**

Chris received his Bachelor of Science in Finance from Colorado State University in Fort Collins, Colorado.

## **Client Experience (past/present)**

DISH Network

Level 3 Communications

City of Colorado Springs

Disney

City of Fort Collins

St. Vrain Valley School District

Junior Achievement USA

IT Services Holdeo

Sunrise Medical

Longmont Clinic



# Derrick Templin

**Derrick Templin**  
**Communication Consultant**  
**Hays Companies of Colorado**

1125 17<sup>th</sup> Street

Suite 400

Denver, Colorado 80202

Phone: 720-279-3414

dtemplin@hayscompanies.com

Derrick is a Marketing Specialist for the Hays Companies in Denver, Colorado. Derrick specializes in marketing design and communication strategy. He is responsible for all benefit open enrollment communications creation and focused marketing/ branding campaigns for employers and their employees. This includes: Fortune 500 benefit brochure creation, Custom APP /Web Development and implementation, posters, flyers, newsletters, contact cards and all other print/digital forms of media. He also holds a Life, Accident and Health insurance license.

## **Recognition**

Derrick received his Bachelor of Science in Communications/Advertising with a minor in Business from Brigham Young University.

## **Client Experience (past/present)**

Sonnenalp Hotels of Vail

UDR

Laramar

Bonfils

AlloSource

TeleNav

Valmont Industries

Waterpik

Arizona State University Foundation

Denver Museum of Nature and Science

HSS

Black Creek Group

Inspirato

City of Ft. Collins

and more





# Melissa Henrich

## Melissa Henrich Wellness Consultant Hays Companies

1125 17<sup>th</sup> Street  
Suite 400  
Denver, Colorado 80202  
Phone: 816-460-7239  
mhenrich@hayscompanies.com

Melissa is a Wellness Consultant out of the Hays Companies of Kansas City office. Prior to joining Hays Companies, Melissa was a Health Enhancement Coordinator for Saint Luke's Health System. In this role, Melissa worked onsite with large employers developing and deploying long-term wellness strategies. Key areas of focus where, leverage creative programs under tight budget restraints, publishing monthly newsletters, developed brand identity, fostering partnerships with wellness vendors, and defining creative ways to achieve maximum participant participation. Melissa has worked with a variety of industries and employers of differing sizes.

Melissa's key areas of expertise include:

- Strategic planning within the total benefits design model for Health strategies, including those targeted at utilization review, large case management, disability, wellness, disease management, EAP, predictive modeling, health risk assessments, and behavioral health.
- Evaluation of vendor activities, strategies, and outcomes pre and post program implementation.
- Assistance in implementing medical care management strategies, with a special focus on outreach initiatives to the member.

### Recognition

Melissa has a B.S. in Kinesiology from Kansas State University and an MBA in Healthcare Management from the University of Phoenix.

### Client Experience (past & present)

Kansas City Southern Railways (KCS)  
AMSCO  
Basic American Foods (BAF)  
NEBCO  
Henderson Engineers  
MRIGlobal/NREL  
Silpada  
George Butler Associates (GBA)



# ABC

## Financial Report



**December 2015**  
for plan year:  
July 1, 2015 - June 30, 2016

**2015-2016**

Hays Companies of Denver 1125 17th Street, Suite 400, Denver CO, 80202



All. Together. Certain.

## COMPENSATION DISCLOSURE

Hays is a privately held corporation providing the managing employees a vested interest in the success of the organization. The company is owned by its managing employees, there is no outside ownership. This type of corporate structure ensures that those leading the organization remain focused on satisfying the customers' needs.

Hays Companies may receive compensation in the form of fees and/or commissions for the insurance brokerage services, risk management, consulting, employee benefits and financial services planning provided to clients. Hays Companies may also receive additional compensation from certain insurers, wholesalers and insurance markets with whom it places business and to whom it provides services. This additional compensation may be based on or computed according to a variety of factors, including but not limited to the overall volume of business placed, size of placements, growth, and/or profitability. Please contact Hays Companies for additional compensation information.

Hays Companies expects all employees to exercise the highest standards of honesty, integrity and fairness in business practice and the conduct of Hays Companies' affairs. It is important that we represent the interests of our clients in a sound, reliable and trustworthy fashion. In addition, all officers, directors and employees of Hays Companies must fully comply with all applicable laws and regulations, and also with the Hays Companies Ethics Policy.



## PRIVACY

At the Hays Companies, we value your trust and are committed to the responsible management, use and protection of business or personal information. When we refer to "you" we mean those individuals and firms who have provided us with business or personal information in conjunction with inquiring about, applying for, or obtaining a financial product or service from us. All financial service companies collect a certain amount of this information to help service customers and administer their business. This Notice describes our policy regarding the collection, disclosure, and protection of business or personal information.

"Information", as used in this Notice, means information that identifies an entity or individual personally and is not otherwise available to the public. It includes financial information such as credit history, income, financial benefits, policy or claim information. It also includes personal health information such as individual medical records or information about an illness, disability or injury.

Hays Companies collects business and personal information to help service your transactions with us and to support our business operations. This information may be obtained directly from the individuals themselves, from corporate clients duly authorized to release such information and from certain third parties, such as insurance companies. Depending on the type of product or service applied for or obtained through us, personal information may include names, addresses, income, and claim histories.

To serve you and to administer our business, we may share certain business and personal information, only as permitted by law, with affiliates, such as business associates and our employees. We may also share business and personal information, again only as permitted by law, with unaffiliated third parties, such as insurance companies, administrators, and service providers who help us serve you and administer our business.

Our employees have access to business or personal information in the course of doing their jobs, which includes underwriting policies, paying claims, developing new products or advising customers about products and services. All of our employees are required to sign a confidentiality agreement in which they agree to protect the information to which they may have access.

We use manual and electronic security procedures to maintain the confidentiality and integrity of information in our possession and to guard against its unauthorized access. Some techniques we employ to protect information include secured files, user authentication, encryption, firewall technology and the use of detection software.

We are responsible for identifying information that must be protected, providing an adequate level of protection for that data and granting access to protected data only to individuals who must use it in the performance of their job-related duties. Employees who violate our Privacy Policy will be subject to disciplinary action, which may include termination.

Disclosure of your information will only be done with your proper written authorizations or as otherwise permitted or required by law. We will not share your business or personal information with anyone for purposes unrelated to Hays Companies business operations.

This Notice describes the privacy policies of Hays Companies. The privacy policy applies to individuals and firms who obtain or apply for a financial product or service, or have done so in the past. We will continue to follow our privacy policy regarding information even when a business relationship no longer exists between us.

# Executive Summary - Financial Analysis



Hays Companies is pleased to present ABC Company the December 2015 financial analysis. This report outlines monthly fixed fees and claims cost for the Medical/Rx plans. All increases and decreases are based on changes to PEPM costs, as costs fluctuate with increases and decreases in enrollment.

## Medical/Rx Plan

- Monthly enrollment has averaged 225 participants. This is 1.7% higher than the previous plan year average of 221 participants.
- Fixed fees are the amount paid in administration, network access and stop loss premium. Med/Rx fixed feeds average \$166.48 PEPM.
- Total gross Medical/Rx claims (before claims over SSL are removed) average \$701.90 PEPM, and are -20.9% lower than the previous plan year average of \$887.42 PEPM.
- For the 2015/2016 specific stop-loss contract period, there are 4 claimants (in total) exceeding \$50K. Large claimants generate 31% of your total Medical/Rx claims cost. Large claims activity typically represents 25% to 30% of the total claims cost on an annual basis. Of the 4 claimants, 1 is above the specific stop loss deductible of \$100K with \$37,556 in total reimbursements YTD.
- Net Medical/Rx claims cost (after specific stop loss claims are removed) average \$673.31 PEPM.
- Total plan costs are calculated by adding total fixed fees plus net Medical/Rx claims cost. The total YTD plan costs are \$839.79 PEPM.
- Budgeted costs are approximately \$1,242.67 PEPM. Total YTD plan costs are currently running -32.4% below budget.





# ABC Company



## 2015/2016 Financial Summary

February 16, 2016

PEPM Year over Year Total Plan Costs								
Year	Average Enrollment Med/Rx	Fixed Fees PEPM	Net Med/Rx Claims Cost PEPM	Total Plan Cost	Annualized Total Plan Cost	Budget PEPM	Annualized Total Budget	% Annualized Total Costs to Budget Immature
<sup>1</sup> 2015-2016	225	\$166.48	\$673.31	\$839.79	\$2,265,746	\$1,242.67	\$3,352,720	68%
% Change	2%		-24%	-27%		7.50%		
<sup>2</sup> 2014-2015	221	NA	\$887.42	\$1,147.99	\$3,047,904	\$1,156.00	\$3,047,904	100%
% Change	18%		-5%	-2%		15.06%		
<sup>2</sup> 2013-2014	187	NA	\$933.08	\$1,170.58	\$2,632,639	\$1,004.65	\$2,632,639	100%
% Change			24%	4%		1.73%		
<sup>2</sup> 2012-2013	150	NA	\$751.28	\$1,125.99	\$2,020,018	\$987.56	\$2,020,018	100%
% Change								

<sup>1</sup>2015/2016 Annualized Plan Cost is estimated from monthly average

<sup>2</sup>2012/2013 through 2014/2015 "Total Plan Costs" and "Annualized Total Budgets" are based off of fully insured premiums paid.

Specific Stop Loss Contract			
Year	Specific Stop Loss Premium Pd	Reimbursements Paid	Loss Ratio
2015-2016	\$97,148	\$38,561	40%

\$100K specific deductible; Med/Rx Included

2015-2016 Large Claimants		
Relationship	Total Paid	Amt > Spec
EE	\$137,556	\$37,556
<b>Total</b>	<b>\$137,556</b>	<b>\$37,556</b>



# ABC Company



## 2015-2016 Medical/Rx Financials

2015-2016															
	Enrollment		Fixed Costs			Claims					Total Plan Cost				
	OAP	Plan	Admin	Stop-Loss	Total	Medical	RX	Total	Amount > Specific	Total Net Paid Claims	Maximum Claims Liability	Medical & Rx Total Plan Cost	Total Med/Rx Budget (ER + EE Contribution)	Employee Contributions	ABC Net Plan Costs
Jul-15	229		\$1,015	\$11,235	\$12,250	\$50,256	\$25,698	\$75,954	\$0	\$75,954	\$67,560	\$89,204	\$284,745	\$28,522	\$59,682
Aug-15	230		\$2,034	\$20,523	\$22,557	\$100,489	\$40,001	\$140,490	\$0	\$140,490	\$135,119	\$163,047	\$285,280	\$28,576	\$134,471
Sep-15	228		\$4,014	\$42,563	\$46,577	\$210,222	\$40,058	\$250,280	\$1,005	\$249,275	\$270,237	\$295,852	\$281,585	\$28,205	\$267,647
Oct-15	230		\$5,000	\$40,877	\$45,877	\$100,233	\$42,856	\$143,089	\$0	\$143,089	\$270,287	\$188,966	\$284,050	\$28,455	\$160,511
Nov-15	216		\$3,855	\$48,000	\$51,855	\$85,472	\$40,947	\$126,419	\$37,328	\$89,091	\$268,327	\$140,946	\$270,360	\$27,081	\$113,864
Dec-15	216		\$6,555	\$38,904	\$45,459	\$177,145	\$33,482	\$210,627	\$228	\$210,399	\$271,644	\$255,858	\$270,360	\$27,081	\$228,776
Jan-16															
Feb-16															
Mar-16															
Apr-16															
May-16															
Jun-16															
2015/2016 Totals	1,349		\$22,472	\$202,103	\$224,575	\$723,817	\$223,042	\$946,859	\$38,561	\$908,298	\$1,283,174	\$1,132,873	\$1,676,360	\$167,921	\$964,952
AVG Month	225		\$3,745	\$33,684	\$37,429	\$120,636	\$37,174	\$157,810	\$3,213	\$151,383	\$213,862	\$188,812	\$279,393	\$27,987	\$160,825
AVG PEPM			\$16.66	\$149.82	\$166.48	\$536.56	\$165.34	\$701.90	\$28.58	\$673.31	\$951.20	\$839.79	\$1,242.67	\$124.48	\$715.31
% Change	1.7%					-26.6%	5.5%	-20.9%		-24.1%		-26.8%	8.2%	54.9%	-33.0%
2014/2015 Totals	2655					\$1,939,976	\$416,112	\$2,356,088		\$2,356,088		\$3,047,904	\$3,047,904	\$213,367	\$2,834,537
AVG Month	221					\$161,665	\$34,676	\$196,341		\$196,341		\$253,992	\$253,992	\$17,781	\$236,211
AVG PEPM						\$730.69	\$156.73	\$887.42		\$887.42		\$1,147.99	\$1,147.99	\$80.36	\$1,067.62

2015 Plan Costs				
Month	EE	ES	ECH	Fam
Month 1				
Admin	\$2.89	\$4.15	\$3.40	\$5.85
ISL	\$18.33	\$41.22	\$33.00	\$55.96
ASL	\$0.72	\$1.20	\$1.29	\$2.23
Attachment	\$125.65	\$276.42	\$226.16	\$389.50
Month 2				
Admin	\$3.78	\$8.31	\$6.80	\$11.70
ISL	\$36.66	\$80.66	\$65.99	\$114.00
ASL	\$1.45	\$3.16	\$3.59	\$4.45
Attachment	\$251.29	\$552.84	\$452.32	\$779.00
Month 3-12				
Admin	\$8.55	\$16.61	\$13.59	\$23.40
ISL	\$73.32	\$161.31	\$131.98	\$227.30
ASL	\$2.87	\$6.30	\$5.17	\$8.90
Attachment	\$502.58	\$1,105.67	\$904.64	\$1,558.00

	Budget Rates	Employee Contributions
EE Only	\$535.00	\$54.00
EE + Spouse	\$1,145.00	\$115.00
EE + Child(ren)	\$950.00	\$95.00
Family	\$1,650.00	\$165.00

Total Plan Liability	
YTD Maximum Aggregate Liability	\$1,283,174
YTD Expected Aggregate Liability	\$1,026,539
YTD Actual Aggregate Liability	\$908,298
Maximum Loss Ratio	71%
Expected Loss Ratio	88%

Budget Accounting	
Total Costs vs. Total Budget:	67.6%
Estimated Surplus:	\$543,487

Fully Insured Runout	
Total	\$84,422
PEPM	\$62.58
Mature Medical	\$735.89

# ABC Company

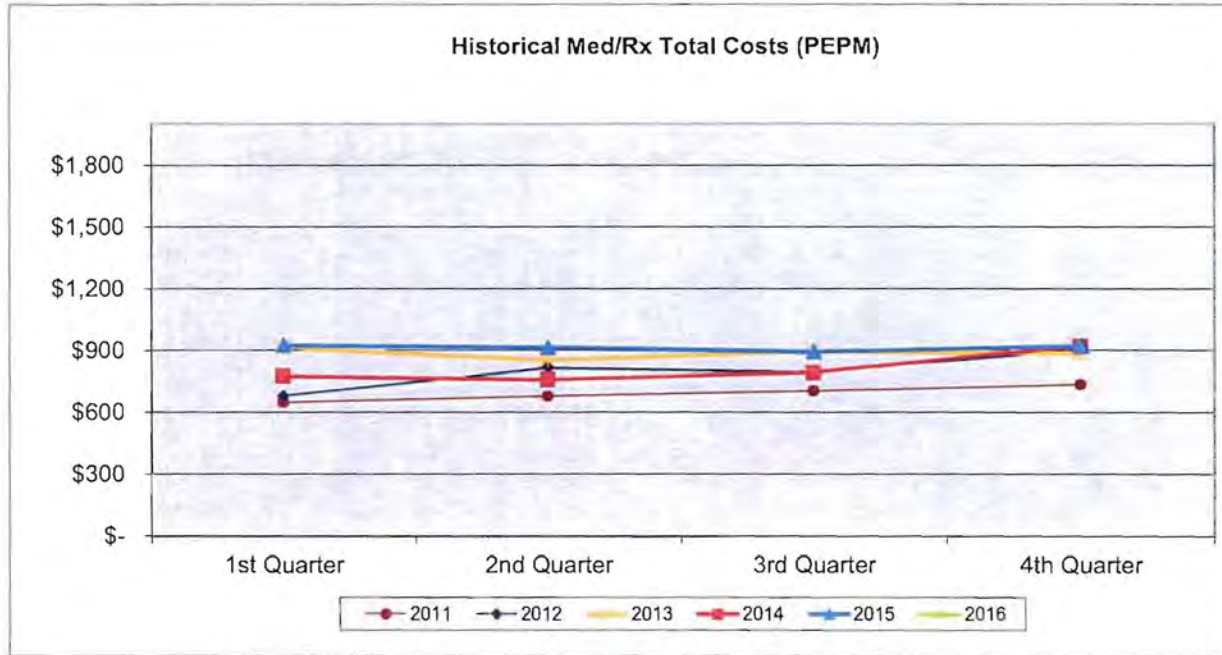


## Large Claim Analysis - Claims over \$50,000

Specific Level: \$100,000		2015-2016 Plan Year		Change from Prior Month
Coverage Includes: Medical and Rx				
Relationship	Condition	Amount Paid	Over Specific	
EE	Encounter for antineoplastic chemot	\$137,556	\$37,556	\$228
SP	Osteoarthros-local-nsa primary	\$56,250	\$0	\$52
EE	Oth spec rotator cuff syndromes	\$51,236	\$0	\$1,563
CH	Awaiting Diagnosis	\$50,222	\$0	\$222
<b>Total Large Claims</b>		<b>\$295,264</b>	<b>\$37,556</b>	<b>\$2,065</b>
<b>Total Medical &amp; Rx Claims Paid</b>		<b>\$946,859</b>		
<b>Percentage of Medical &amp; Rx Claims Paid</b>		<b>31%</b>		



## Historical Costs - Medical/Rx



Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Change
2011	\$ 650.15	\$ 679.89	\$ 705.84	\$ 737.84	
2012	\$ 681.48	\$ 817.08	\$ 796.41	\$ 904.90	22.6%
2013	\$ 913.47	\$ 852.88	\$ 897.01	\$ 887.70	-1.9%
2014	\$ 778.27	\$ 760.48	\$ 794.42	\$ 924.48	4.1%
2015	\$ 930.85	\$ 919.16	\$ 897.14	\$ 925.28	0.1%
2016					

- All yearly data illustrated on a CY basis (1/1 - 12/31)
- Quarterly data is cumulative over the course of the year
- Includes Medical / Rx / Fixed Costs
- Accounts for any plan changes year to year

Average Trend Per Year (2011-2016): 6.2%





Hays Companies of Denver  
1125 17th Street, Suite 400  
Denver, CO 80202  
720-279-3400

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A decorative graphic consisting of a 3x3 grid of colored squares. The top row contains dark blue, light blue, and green squares. The middle row contains red, medium blue, and yellow squares. The bottom row contains yellow, a white square with a faint vertical line, and light blue squares.

# Employee Benefits Consulting Services

Risk Pool Management - Opportunity Analysis  
April 2014

Presented To:  
ABC Company LLC

**All. Together. Certain**

	Employee	Employee + Spouse	Employee + Child(ren)	Family
<b>Plan 1</b>				
Rate	\$773.53	\$1,492.92	\$1,191.24	\$1,918.36
Rate Tier Relationship	1.00	1.93	1.54	2.48
Rate Relative to Plan 1	1.00	1.00	1.00	1.00
Contribution	<b>\$353.53</b>	<b>\$1,072.92</b>	<b>\$771.24</b>	<b>\$1,498.36</b>
Contribution Tier Relationship	1.00	3.03	2.18	4.24
Contribution Relationship to Plan 1	1.00	1.00	1.00	1.00
Employee Value	<b>1.00</b>	<b>1.00</b>	<b>1.00</b>	<b>1.00</b>
<b>Plan 2</b>				
Rate	\$592.13	\$1,149.91	\$911.88	\$1,468.49
Rate Tier Relationship	1.00	1.94	1.54	2.48
Rate Relative to Plan 1	0.77	0.77	0.77	0.77
Richness Relative to Plan 1	<b>0.89</b>	<b>0.89</b>	<b>0.89</b>	<b>0.89</b>
Contribution	<b>\$172.13</b>	<b>\$729.91</b>	<b>\$491.88</b>	<b>\$1,048.49</b>
Contribution Tier Relationship	1.00	4.24	2.86	6.09
Contribution Relationship to Plan 1	0.49	0.68	0.64	0.70
Employee Value	<b>1.83</b>	<b>1.31</b>	<b>1.40</b>	<b>1.27</b>
<b>Plan 3</b>				
Rate	\$406.93	\$834.20	\$756.89	\$1,176.03
Rate Tier Relationship	1.00	2.05	1.86	2.89
Rate Relative to Plan 1	0.53	0.56	0.64	0.61
Richness Relative to Plan 1	<b>0.84</b>	<b>0.84</b>	<b>0.84</b>	<b>0.84</b>
Contribution	\$0.00	\$414.20	\$336.89	\$756.03
Representative Contribution <sup>11</sup>	<b>\$1.00</b>	<b>\$414.20</b>	<b>\$336.89</b>	<b>\$756.03</b>
Contribution Tier Relationship	1.00	414.20	336.89	756.03
Contribution Relationship to Plan 1	0.00	0.39	0.44	0.50
Employee Value	<b>296.97</b>	<b>2.18</b>	<b>1.92</b>	<b>1.66</b>
<b>Plan 4</b>				
Rate	\$362.57	\$743.27	\$674.39	\$1,047.84
Rate Tier Relationship	1.00	2.05	1.86	2.89
Rate Relative to Plan 1	0.47	0.50	0.57	0.55
Richness Relative to Plan 1	<b>0.80</b>	<b>0.80</b>	<b>0.80</b>	<b>0.80</b>
Contribution	\$0.00	\$323.27	\$254.39	\$627.84
Representative Contribution <sup>11</sup>	<b>\$1.00</b>	<b>\$323.27</b>	<b>\$254.39</b>	<b>\$627.84</b>
Contribution Tier Relationship	1.00	323.27	254.39	627.84
Contribution Relationship to Plan 1	0.00	0.30	0.33	0.42
Employee Value	<b>282.82</b>	<b>2.66</b>	<b>2.43</b>	<b>1.91</b>

<sup>11</sup> To avoid a negative contribution, this illustration uses a \$1.00 Employee Only representative employee contribution.



Sample Tiering Development

Illustrative Only

**EMPLOYEE**

Population	Average Age	Factor	Relative Relationship to Single Coverage
Employee	38.1	1.1141	1.0000 1.0

**EMPLOYEE + SPOUSE**

Population	Average Age	Factor	Relative Relationship to Single Coverage	Number per Contract	Relative Relationship to Single Coverage (Combined)
Employee	54.7	1.5193	1.3637	1.0000	1.3637
Spouse	54.4	1.5120	1.3571	1.0000	1.3571
					<b>2.7</b>

**EMPLOYEE + CHILD(REN)**

Population	Average Age	Factor	Relative Relationship to Single Coverage	Number per Contract	Relative Relationship to Single Coverage (Combined)
Employee	48.5	1.3680	1.2279	1.0000	1.2279
Children	13.2	0.5063	0.4544	2.2932	1.0421
					<b>2.8</b>

**FAMILY**

Population	Average Age	Factor	Relative Relationship to Single Coverage	Number per Contract	Relative Relationship to Single Coverage (Combined)
Employee	48.7	1.3729	1.2323	1.0000	1.2323
Spouse	48.2	1.3606	1.2213	1.0000	1.2213
Children	11.9	0.4745	0.4259	2.2480	0.9575
					<b>3.4</b>

Rate Alignment

Illustration

	EE	EE+SP	EE+CH	F
Total Annual Cost of All Plans Combined	<b>\$9,792,142</b>			
Total Monthly Cost of All Plans Combined	<b>\$816,012</b>			
<b>Plan 1</b>				
Enrollment	32	4	5	0
Rate Relationship to	1.00	2.70	2.30	3.40
Rate Relationship Coefficient	32.00	10.80	11.50	0.00
Total Unadjusted Coefficient	54.30			
Richness Relative to	100.0%			
Total Coefficient Relative to	54.30			
Current Rate	\$773.53	\$1,492.92	\$1,191.24	\$1,918.36
Budget Rate	<b>\$498.59</b>	<b>\$1,157.00</b>	<b>\$985.99</b>	<b>\$1,456.96</b>
Confirm Relationship to	1.00	2.70	2.30	3.40
Total Monthly Cost	<b>\$23,269</b>			
<b>Plan 2</b>				
Enrollment	55	11	17	13
Rate Relationship to	1.00	2.70	2.30	3.40
Rate Relationship Coefficient	55.00	29.70	39.10	44.20
Total Unadjusted Coefficient	168.00			
Richness Relative to	89.0%			
Total Coefficient Relative to	149.52			
Current Rate	\$592.13	\$1,149.91	\$911.88	\$1,468.49
Budget Rate	<b>\$381.38</b>	<b>\$1,029.73</b>	<b>\$677.16</b>	<b>\$1,296.70</b>
Confirm Relationship to	1.00	2.70	2.30	3.40
Total Monthly Cost	<b>\$64,072</b>			
<b>Plan 3</b>				
Enrollment	379	34	71	45
Rate Relationship to	1.00	2.70	2.30	3.40
Rate Relationship Coefficient	379.00	91.80	163.30	153.00
Total Unadjusted Coefficient	787.10			
Richness Relative to	84.0%			
Total Coefficient Relative to	661.16			
Current Rate	\$406.93	\$834.20	\$756.89	\$1,176.03
Budget Rate	<b>\$339.56</b>	<b>\$771.86</b>	<b>\$627.96</b>	<b>\$1,228.60</b>
Confirm Relationship to	1.00	2.70	2.30	3.40
Total Monthly Cost	<b>\$283,321</b>			
<b>Plan 4</b>				
Enrollment	384	72	133	122
Rate Relationship to	1.00	2.70	2.30	3.40
Rate Relationship Coefficient	384.00	194.40	305.90	414.80
Total Unadjusted Coefficient	1299.10			
Richness Relative to	80.0%			
Total Coefficient Relative to	1039.28			
Current Rate	\$362.57	\$743.27	\$674.39	\$1,047.84
Budget Rate	<b>\$345.81</b>	<b>\$935.60</b>	<b>\$788.47</b>	<b>\$1,165.57</b>
Confirm Relationship to	1.00	2.70	2.30	3.40
Total Monthly Cost	<b>\$445,350</b>			
Confirm Total Monthly Cost of All Plans Combined	<b>\$816,012</b>			
Confirm Total Annual Cost of All Plans Combined	<b>\$9,792,142</b>			



Medical Contributions

	CURRENT				ALIGNED				% Change				\$ Change			
	EE	EE+SP	EE+CH	F	EE	EE+SP	EE+CH	F	EE	EE+SP	EE+CH	F	EE	EE+SP	EE+CH	F
<b>Plan 1</b>																
Budget Rate	\$773.53	\$1,492.92	\$1,191.94	\$1,918.36	\$498.32	\$1,137.06	\$881.59	\$1,454.56	-14.6%	-22.5%	-17.3%	-24.1%	\$194,101	\$134,000	\$109,628	\$1,801,967
EE Contribution	\$353.53	\$1,072.92	\$771.24	\$1,498.36	\$96.32	\$371.93	\$418.23	\$905.81	-92.6%	-46.7%	-45.8%	-39.5%	\$1,072.92	\$1,072.92	\$1,072.92	\$1,072.92
EE Contribution Percentage	45.7%	71.5%	64.7%	78.1%	6.1%	49.4%	42.4%	62.2%								
ER Contribution	\$420.00	\$420.00	\$420.00	\$420.00	\$402.20	\$585.07	\$567.36	\$551.15	-1.2%	39.3%	35.1%	31.2%	\$17,980	\$165.07	\$147.36	\$131.15
ER Contribution Percentage	54.3%	28.1%	35.3%	21.9%	93.9%	50.6%	57.6%	37.8%								
Enrollment	32	4	5	0	32	4	5	0								
Total EE Annual Contribution	\$233,530				\$69,653				-73.2%				\$171,877			
Total EE Annual Contribution Percentage	53.1%				22.4%											
Total ER Annual Contribution	\$266,640				\$216,570				4.8%				-\$50,070			
Total ER Annual Contribution Percentage	46.9%				77.6%											
Total Annual Cost	\$440,170				\$279,222				-36.6%				-\$160,948			
<b>Plan 2</b>																
Budget Rate	\$592.18	\$1,149.91	\$911.88	\$1,468.49	\$351.58	\$1,030.15	\$777.19	\$1,290.70	-35.6%	-10.5%	-3.8%	-11.7%	\$22,100.00	\$17,100.00	\$14,100.00	\$12,100.00
EE Contribution	\$172.13	\$729.91	\$491.88	\$1,048.49	\$23.42	\$509.02	\$372.23	\$806.17	-86.4%	-30.3%	-24.3%	-23.1%	\$1,048.49	\$1,048.49	\$1,048.49	\$1,048.49
EE Contribution Percentage	29.1%	63.5%	53.9%	71.4%	6.1%	49.4%	42.4%	62.9%								
ER Contribution	\$420.00	\$420.00	\$420.00	\$420.00	\$357.96	\$520.71	\$504.95	\$490.52	-14.8%	24.0%	20.2%	15.8%	\$179,610	\$100.71	\$84.95	\$70.52
ER Contribution Percentage	70.9%	36.5%	46.1%	28.6%	93.9%	50.6%	57.6%	37.8%								
Enrollment	55	11	17	13	55	11	17	13								
Total EE Annual Contribution	\$473,862				\$284,347				-40.0%				-\$189,515			
Total EE Annual Contribution Percentage	49.5%				37.0%											
Total ER Annual Contribution	\$493,840				\$494,517				0.1%				-\$677			
Total ER Annual Contribution Percentage	50.5%				63.0%											
Total Annual Cost	\$957,702				\$768,865				-19.7%				-\$188,837			
<b>Plan 3</b>																
Budget Rate	\$406.93	\$834.20	\$756.89	\$1,176.03	\$309.96	\$971.86	\$827.90	\$1,293.81	-11.5%	16.5%	9.4%	4.1%	\$14,000.00	\$137.68	\$71.01	\$47.82
EE Contribution	\$1.00	\$414.20	\$336.89	\$756.03	\$22.11	\$480.42	\$351.22	\$760.88	2110.7%	16.0%	-1.3%	0.6%	\$21.11	\$66.22	\$14.43	\$4.85
EE Contribution Percentage	0.2%	49.7%	44.5%	64.9%	6.1%	49.4%	42.4%	62.2%								
ER Contribution	\$405.93	\$420.00	\$420.00	\$420.00	\$337.85	\$491.46	\$476.58	\$462.97	-16.8%	17.0%	13.5%	10.2%	\$13,978.89	\$71.46	\$56.58	\$42.97
ER Contribution Percentage	99.8%	50.3%	55.5%	35.7%	93.9%	50.6%	57.6%	37.8%								
Enrollment	379	24	71	45	379	24	71	45								
Total EE Annual Contribution	\$868,828				\$1,006,753				15.9%				\$137,925			
Total EE Annual Contribution Percentage	25.0%				29.6%											
Total ER Annual Contribution	\$2,609,170				\$2,593,097				-0.6%				-\$16,073			
Total ER Annual Contribution Percentage	75.0%				70.4%											
Total Annual Cost	\$3,470,998				\$3,309,850				-4.6%				-\$161,148			
<b>Plan 4</b>																
Budget Rate	\$362.57	\$743.27	\$674.39	\$1,047.84	\$342.81	\$921.00	\$784.47	\$1,163.37	-5.4%	24.5%	16.9%	11.2%	\$11,000.00	\$182.33	\$114.08	\$117.73
EE Contribution	\$1.00	\$323.27	\$254.20	\$627.84	\$21.05	\$457.53	\$334.59	\$734.65	2005.4%	41.5%	31.5%	15.4%	\$20.05	\$134.28	\$80.20	\$96.81
EE Contribution Percentage	0.3%	43.5%	37.7%	59.9%	6.1%	49.4%	42.4%	62.2%								
ER Contribution	\$361.57	\$420.00	\$420.00	\$420.00	\$321.76	\$468.05	\$453.89	\$440.92	-11.0%	11.4%	8.1%	5.0%	\$10,979.95	\$48.05	\$33.89	\$20.92
ER Contribution Percentage	99.7%	56.5%	62.3%	40.1%	93.9%	50.6%	57.6%	37.8%								
Enrollment	384	72	133	122	384	72	133	122								
Total EE Annual Contribution	\$1,009,077				\$2,087,225				99.7%				\$1,078,147			
Total EE Annual Contribution Percentage	32.7%				39.1%											
Total ER Annual Contribution	\$3,111,193				\$3,256,980				-4.7%				-\$144,987			
Total ER Annual Contribution Percentage	67.3%				60.9%											
Total Annual Cost	\$4,923,272				\$5,344,205				8.5%				\$420,933			
Total EE Annual Contribution	\$3,185,298				\$3,440,978				8.0%				\$255,680			
Total EE Annual Contribution Percentage	32.5%				35.1%											
Total ER Annual Contribution	\$6,706,844				\$6,351,164				-5.1%				-\$355,680			
Total ER Annual Contribution Percentage	67.5%				64.9%											
Total Annual Cost	\$9,792,142				\$9,792,142				0.0%				\$0			

<sup>(1)</sup> In the current environment, the employer pays \$420 towards the total rate no matter the employee's election. The remainder is charged to the employee as a buy-up. In the aligned environment EE contributions reflect a weighted average of current contributions.

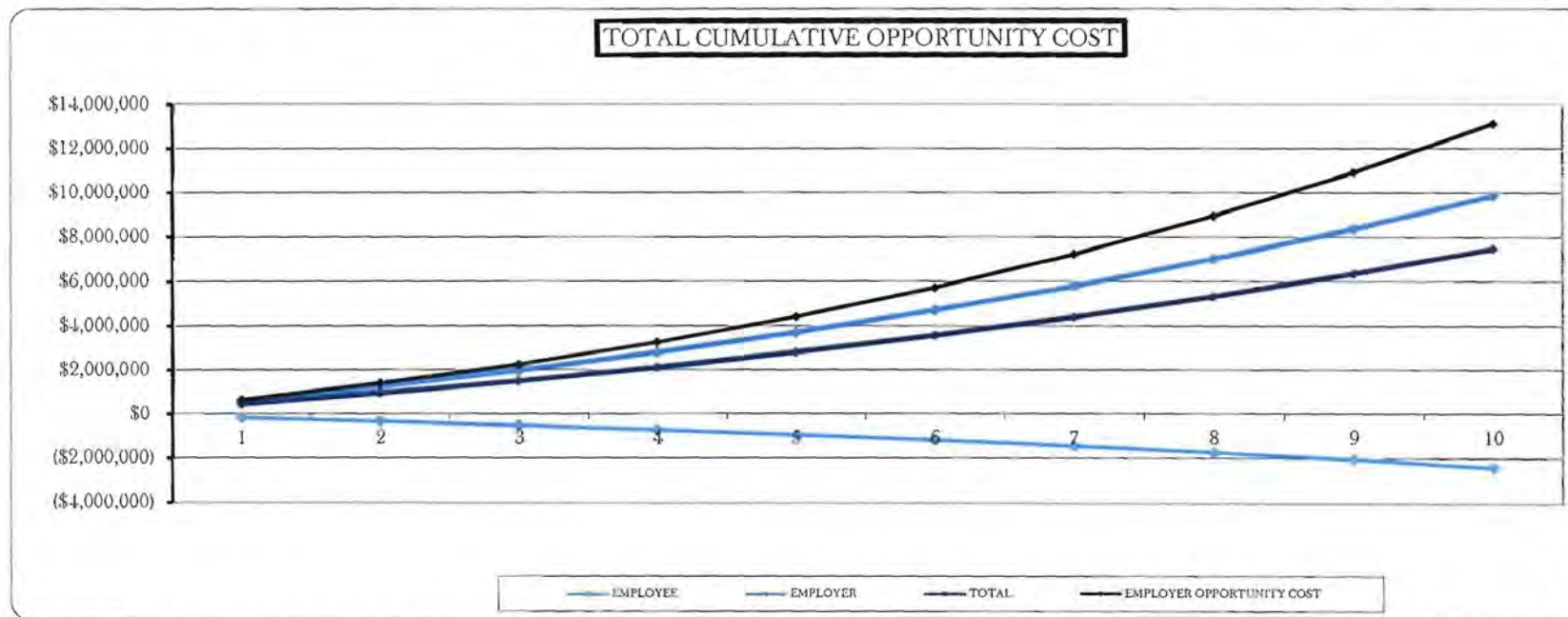


Medical Contributions

	CURRENT				ALIGNED				% Change				\$ Change			
	EE	EE+SP	EE+CH	F	EE	EE+SP	EE+CH	F	EE	EE+SP	EE+CH	F	EE	EE+SP	EE+CH	F
<b>Plan 1</b>																
Budget Rate	\$773.58	\$1,492.92	\$1,191.34	\$1,918.36	\$418.81	\$1,139.96	\$944.05	\$1,410.34	-46.4%	-25.0%	-19.9%	-26.5%	\$134.07	\$132.94	\$122.19	\$139.62
EE Contribution	\$303.53	\$1,072.92	\$771.21	\$1,498.36	\$26.32	\$571.93	\$418.23	\$1005.81	-92.6%	-46.7%	-45.8%	-30.5%	\$132.22	\$134.94	\$133.00	\$139.62
EE Contribution Percentage	45.7%	71.9%	64.7%	78.1%	6.3%	51.1%	43.8%	64.2%								
ER Contribution	\$420.00	\$420.00	\$420.00	\$420.00	\$388.40	\$518.04	\$535.82	\$504.53	-7.5%	30.5%	27.6%	20.1%	\$60.14	\$128.04	\$115.82	\$84.53
ER Contribution Percentage	54.3%	28.1%	35.3%	21.9%	93.7%	48.9%	56.2%	35.8%								
Enrollment	32	4	5	0	0	0	0	0								
Total EE Annual Contribution		\$233,530			\$0					-100.0%			\$133,424			
Total EE Annual Contribution Percentage		53.1%			0%											
Total ER Annual Contribution		\$206,640			\$0					-100.0%			\$128,624			
Total ER Annual Contribution Percentage		45.9%			0%											
Total Annual Cost		\$440,170			\$0					-100.0%			\$342,048			
<b>Plan 2</b>																
Budget Rate	\$592.15	\$1,149.91	\$911.88	\$1,468.49	\$369.18	\$996.28	\$840.11	\$1,333.26	-37.7%	-13.3%	-6.9%	-14.5%	\$202.93	\$192.13	\$186.77	\$213.23
EE Contribution	\$172.13	\$729.91	\$491.88	\$1,048.49	\$23.42	\$509.02	\$372.23	\$906.17	-80.4%	-30.3%	-24.3%	-23.1%	\$144.71	\$139.96	\$130.65	\$152.37
EE Contribution Percentage	29.1%	63.5%	53.9%	71.4%	6.3%	51.1%	43.8%	64.2%								
ER Contribution	\$420.00	\$420.00	\$420.00	\$420.00	\$345.75	\$487.76	\$476.88	\$449.03	-17.7%	16.1%	13.5%	6.9%	\$58.22	\$67.76	\$56.88	\$99.03
ER Contribution Percentage	70.9%	36.5%	46.1%	28.6%	93.7%	48.9%	56.2%	35.8%								
Enrollment	55	11	17	13	0	0	0	0								
Total EE Annual Contribution		\$473,802			\$0					-100.0%			\$144,880			
Total EE Annual Contribution Percentage		49.5%			0%											
Total ER Annual Contribution		\$493,840			\$0					-100.0%			\$292,744			
Total ER Annual Contribution Percentage		50.5%			0%											
Total Annual Cost		\$967,702			\$0					-100.0%			\$437,624			
<b>Plan 3</b>																
Budget Rate	\$406.93	\$834.20	\$756.89	\$1,176.03	\$348.44	\$990.79	\$901.80	\$1,311.24	-14.4%	12.8%	5.9%	0.7%	\$138.07	\$106.58	\$44.51	\$8.65
EE Contribution	\$1.00	\$414.20	\$336.89	\$756.03	\$22.11	\$490.42	\$351.32	\$760.83	2110.7%	16.0%	4.3%	0.6%	\$21.11	\$66.22	\$14.43	\$4.85
EE Contribution Percentage	0.2%	49.7%	44.5%	64.3%	6.3%	51.1%	43.8%	64.2%								
ER Contribution	\$405.93	\$420.00	\$420.00	\$420.00	\$326.33	\$499.36	\$549.09	\$423.80	-19.6%	9.6%	7.2%	0.9%	\$116.96	\$40.36	\$30.09	\$3.80
ER Contribution Percentage	99.8%	50.3%	55.5%	35.7%	93.7%	48.9%	56.2%	35.8%								
Enrollment	379	34	71	45	740	102	194	155								
Total EE Annual Contribution		\$868,828			\$3,017,452					247.3%			\$2,148,624			
Total EE Annual Contribution Percentage		25.0%			36.3%											
Total ER Annual Contribution		\$9,609,170			\$5,907,261					103.6%			\$2,695,193			
Total ER Annual Contribution Percentage		75.0%			63.7%											
Total Annual Cost		\$3,470,998			\$8,314,813					139.6%			\$4,843,818			
<b>Plan 4</b>																
Budget Rate	\$369.57	\$743.27	\$674.39	\$1,047.84	\$331.34	\$865.99	\$763.31	\$1,139.37	-8.5%	20.5%	13.2%	7.7%	\$107.17	\$152.71	\$88.85	\$80.43
EE Contribution	\$1.00	\$325.27	\$254.39	\$677.84	\$21.05	\$457.55	\$334.59	\$724.65	2005.4%	41.5%	31.5%	15.4%	\$90.05	\$134.28	\$80.20	\$96.81
EE Contribution Percentage	0.3%	43.5%	37.7%	59.9%	6.3%	51.1%	43.8%	64.2%								
ER Contribution	\$361.57	\$420.00	\$420.00	\$420.00	\$310.79	\$438.44	\$428.66	\$403.62	-14.0%	-4.4%	2.1%	-3.9%	\$169.29	\$18.44	\$8.66	\$13.62
ER Contribution Percentage	99.7%	56.5%	62.3%	40.1%	93.7%	48.9%	56.2%	35.8%								
Enrollment	384	72	133	129	124	10	22	16								
Total EE Annual Contribution		\$1,009,077			\$313,038					-80.5%			\$1,124,288			
Total EE Annual Contribution Percentage		32.7%			30.8%											
Total ER Annual Contribution		\$3,314,105			\$703,728					-78.7%			\$1,698,640			
Total ER Annual Contribution Percentage		67.3%			69.2%											
Total Annual Cost		\$4,923,272			\$1,016,766					-79.3%			\$2,822,928			
Total EE Annual Contribution		\$3,185,298			\$3,331,150					4.6%			\$145,853			
Total EE Annual Contribution Percentage		32.5%			35.7%											
Total ER Annual Contribution		\$6,600,644			\$6,003,692					-9.1%			\$596,952			
Total ER Annual Contribution Percentage		67.5%			64.3%											
Total Annual Cost		\$9,792,142			\$9,334,842					-4.7%			\$737,800			

Prospective Opportunity Cost Analysis

		Y E A R									
		1	2	3	4	5	6	7	8	9	10
MEDICAL COST	<b>EMPLOYEE</b>										
	Annual	(\$145,853)	(\$161,167)	(\$178,090)	(\$196,789)	(\$217,452)	(\$240,284)	(\$265,514)	(\$293,393)	(\$324,200)	(\$358,241)
	Cumulative	(\$145,853)	(\$307,020)	(\$485,110)	(\$681,899)	(\$899,351)	(\$1,139,635)	(\$1,405,150)	(\$1,698,543)	(\$2,022,743)	(\$2,380,983)
	<b>EMPLOYER</b>										
	Annual Cost	\$603,753	\$667,147	\$737,197	\$814,603	\$900,136	\$994,650	\$1,099,089	\$1,214,493	\$1,342,015	\$1,482,926
	Cumulative Cost	\$603,753	\$1,270,899	\$2,008,096	\$2,822,699	\$3,722,835	\$4,717,486	\$5,816,574	\$7,031,067	\$8,373,082	\$9,856,008
<b>TOTAL</b>											
Annual Cost	\$457,900	\$505,980	\$559,107	\$617,814	\$682,684	\$754,366	\$833,574	\$921,100	\$1,017,815	\$1,124,686	
Cumulative Cost	\$457,900	\$963,880	\$1,522,987	\$2,140,800	\$2,823,485	\$3,577,850	\$4,411,425	\$5,332,524	\$6,350,339	\$7,475,025	
OPPORTUNITY COST	<b>EMPLOYER</b>										
	Annual Cost	\$639,978	\$707,175	\$781,429	\$863,479	\$954,144	\$1,054,329	\$1,165,034	\$1,287,363	\$1,422,536	\$1,571,902
	Cumulative Cost	\$639,978	\$1,385,552	\$2,250,114	\$3,248,600	\$4,397,660	\$5,715,849	\$7,223,834	\$8,944,626	\$10,903,840	\$13,129,972



The Medical Cost analysis assumes 10.5% medical trend and no changes in network and/or plan design.  
 The Employer Opportunity Cost Analysis assumes an Internal Rate of Return of 6%.





# Employee Benefits Consulting Services

Risk Pool Management - Opportunity Analysis  
April 2014

Presented To:  
ABC Company LLC

**All. Together. Certain**



	Employee	Employee + Spouse	Employee + Child(ren)	Family
<b>Plan 1</b>				
Rate	\$773.53	\$1,492.92	\$1,191.24	\$1,918.36
Rate Tier Relationship	1.00	1.93	1.54	2.48
Rate Relative to Plan 1	1.00	1.00	1.00	1.00
Contribution	<b>\$353.53</b>	<b>\$1,072.92</b>	<b>\$771.24</b>	<b>\$1,498.36</b>
Contribution Tier Relationship	1.00	3.03	2.18	4.24
Contribution Relationship to Plan 1	1.00	1.00	1.00	1.00
Employee Value	<b>1.00</b>	<b>1.00</b>	<b>1.00</b>	<b>1.00</b>
<b>Plan 2</b>				
Rate	\$592.13	\$1,149.91	\$911.88	\$1,468.49
Rate Tier Relationship	1.00	1.94	1.54	2.48
Rate Relative to Plan 1	0.77	0.77	0.77	0.77
Richness Relative to Plan 1	<b>0.89</b>	<b>0.89</b>	<b>0.89</b>	<b>0.89</b>
Contribution	<b>\$172.13</b>	<b>\$729.91</b>	<b>\$491.88</b>	<b>\$1,048.49</b>
Contribution Tier Relationship	1.00	4.24	2.86	6.09
Contribution Relationship to Plan 1	0.49	0.68	0.64	0.70
Employee Value	<b>1.83</b>	<b>1.81</b>	<b>1.40</b>	<b>1.27</b>
<b>Plan 3</b>				
Rate	\$406.93	\$834.20	\$756.89	\$1,176.03
Rate Tier Relationship	1.00	2.05	1.86	2.89
Rate Relative to Plan 1	0.53	0.56	0.64	0.61
Richness Relative to Plan 1	<b>0.84</b>	<b>0.84</b>	<b>0.84</b>	<b>0.84</b>
Contribution	\$0.00	\$414.20	\$336.89	\$756.03
Representative Contribution <sup>11</sup>	<b>\$1.00</b>	<b>\$114.20</b>	<b>\$336.89</b>	<b>\$756.03</b>
Contribution Tier Relationship	1.00	414.20	336.89	756.03
Contribution Relationship to Plan 1	0.00	0.39	0.44	0.50
Employee Value	<b>296.97</b>	<b>2.18</b>	<b>1.92</b>	<b>1.66</b>
<b>Plan 4</b>				
Rate	\$362.57	\$743.27	\$674.39	\$1,047.84
Rate Tier Relationship	1.00	2.05	1.86	2.89
Rate Relative to Plan 1	0.47	0.50	0.57	0.55
Richness Relative to Plan 1	<b>0.80</b>	<b>0.80</b>	<b>0.80</b>	<b>0.80</b>
Contribution	\$0.00	\$323.27	\$254.39	\$627.84
Representative Contribution <sup>11</sup>	<b>\$1.00</b>	<b>\$323.27</b>	<b>\$254.39</b>	<b>\$627.84</b>
Contribution Tier Relationship	1.00	323.27	254.39	627.84
Contribution Relationship to Plan 1	0.00	0.30	0.33	0.42
Employee Value	<b>282.82</b>	<b>2.66</b>	<b>2.43</b>	<b>1.91</b>

<sup>11</sup> To avoid a negative contribution, this illustration uses a \$1.00 Employee Only representative employee contribution.

Sample Tiering Development

Illustrative Only

**EMPLOYEE**

Population	Average Age	Factor	Relative Relationship to Single Coverage
Employee	38.1	1.1141	1.0000 1.0

**EMPLOYEE + SPOUSE**

Population	Average Age	Factor	Relative Relationship to Single Coverage	Number per Contract	Relative Relationship to Single Coverage (Combined)
Employee	54.7	1.5193	1.3637	1.0000	1.3637
Spouse	54.4	1.5120	1.3571	1.0000	1.3571
					<b>2.7</b>

**EMPLOYEE + CHILD(REN)**

Population	Average Age	Factor	Relative Relationship to Single Coverage	Number per Contract	Relative Relationship to Single Coverage (Combined)
Employee	48.5	1.3680	1.2279	1.0000	1.2279
Children	13.2	0.5063	0.4544	2.2932	1.0421
					<b>2.3</b>

**FAMILY**

Population	Average Age	Factor	Relative Relationship to Single Coverage	Number per Contract	Relative Relationship to Single Coverage (Combined)
Employee	48.7	1.3729	1.2323	1.0000	1.2323
Spouse	48.2	1.3606	1.2213	1.0000	1.2213
Children	11.9	0.4745	0.4259	2.2480	0.9575
					<b>3.4</b>



Rate Alignment

Illustration

	EE	EE+SP	EE+CH	F
Total Annual Cost of All Plans Combined	<b>\$9,792,142</b>			
Total Monthly Cost of All Plans Combined	<b>\$816,012</b>			
<b>Plan 1</b>				
Enrollment	39	4	5	0
Rate Relationship to	1.00	2.70	2.30	3.40
Rate Relationship Coefficient	32.00	10.80	11.50	0.00
Total Unadjusted Coefficient	54.30			
Richness Relative to	100.0%			
Total Coefficient Relative to	54.30			
Current Rate	\$773.53	\$1,492.92	\$1,191.24	\$1,918.36
Budget Rate	<b>\$426.52</b>	<b>\$1,157.00</b>	<b>\$985.59</b>	<b>\$1,456.96</b>
Confirm Relationship to	1.00	2.70	2.30	3.40
Total Monthly Cost	<b>\$23,269</b>			
<b>Plan 2</b>				
Enrollment	55	11	17	13
Rate Relationship to	1.00	2.70	2.30	3.40
Rate Relationship Coefficient	55.00	29.70	39.10	44.20
Total Unadjusted Coefficient	168.00			
Richness Relative to	89.0%			
Total Coefficient Relative to	149.52			
Current Rate	\$592.13	\$1,149.91	\$911.88	\$1,468.49
Budget Rate	<b>\$381.38</b>	<b>\$1,029.73</b>	<b>\$877.15</b>	<b>\$1,296.70</b>
Confirm Relationship to	1.00	2.70	2.30	3.40
Total Monthly Cost	<b>\$64,072</b>			
<b>Plan 3</b>				
Enrollment	379	34	71	45
Rate Relationship to	1.00	2.70	2.30	3.40
Rate Relationship Coefficient	379.00	91.80	163.30	153.00
Total Unadjusted Coefficient	787.10			
Richness Relative to	84.0%			
Total Coefficient Relative to	661.16			
Current Rate	\$106.03	\$834.20	\$756.89	\$1,176.03
Budget Rate	<b>\$359.96</b>	<b>\$971.88</b>	<b>\$897.50</b>	<b>\$1,323.25</b>
Confirm Relationship to	1.00	2.70	2.30	3.40
Total Monthly Cost	<b>\$283,321</b>			
<b>Plan 4</b>				
Enrollment	384	72	133	122
Rate Relationship to	1.00	2.70	2.30	3.40
Rate Relationship Coefficient	384.00	194.40	305.90	414.80
Total Unadjusted Coefficient	1299.10			
Richness Relative to	80.0%			
Total Coefficient Relative to	1039.28			
Current Rate	\$369.57	\$743.27	\$674.39	\$1,047.84
Budget Rate	<b>\$342.81</b>	<b>\$935.60</b>	<b>\$798.47</b>	<b>\$1,165.97</b>
Confirm Relationship to	1.00	2.70	2.30	3.40
Total Monthly Cost	<b>\$445,350</b>			
Confirm Total Monthly Cost of All Plans Combined	<b>\$816,012</b>			
Confirm Total Annual Cost of All Plans Combined	<b>\$9,792,142</b>			



Medical Contributions

	CURRENT				ALIGNED				% Change				\$ Change			
	EE	EE+SP	EE+CH	F	EE	EE+SP	EE+CH	F	EE	EE+SP	EE+CH	F	EE	EE+SP	EE+CH	F
<b>Plan 1</b>																
Budget Rate	\$773.53	\$1,492.92	\$1,191.24	\$1,918.36	\$496.32	\$1,157.00	\$865.42	\$1,456.94	-44.6%	-22.5%	-17.3%	-24.1%	\$1,164.01	\$2,133.12	\$1,291,267	\$5401.88
EE Contribution	\$333.33	\$1,072.92	\$771.24	\$1,498.36	\$26.32	\$371.93	\$418.23	\$705.81	-92.6%	-46.7%	-45.8%	-39.5%	\$2706.71	\$3,644,982	\$2,313,912	\$1,992,348
EE Contribution Percentage	45.7%	71.9%	64.7%	78.1%	6.1%	49.4%	42.4%	62.2%								
ER Contribution	\$420.00	\$420.00	\$420.00	\$420.00	\$402.20	\$585.07	\$567.36	\$551.15	-4.2%	30.3%	35.1%	31.2%	\$171,908	\$165,07	\$147,36	\$131.15
ER Contribution Percentage	54.3%	28.1%	35.3%	21.9%	93.9%	50.6%	57.6%	37.8%								
Enrollment	32	↓	5	0	32	4	5	0								
Total EE Annual Contribution		\$233,530			\$62,653					73.2%				\$1,100,711		
Total EE Annual Contribution Percentage		53.1%			22.4%											
Total ER Annual Contribution		\$340,640			\$216,570					4.8%				\$9,930		
Total ER Annual Contribution Percentage		46.9%			77.6%											
Total Annual Cost		\$440,170			\$379,222					-36.6%				\$9,930		
<b>Plan 2</b>																
Budget Rate	\$592.13	\$1,149.91	\$911.88	\$1,468.49	\$381.39	\$1,093.75	\$777.18	\$1,286.79	-35.6%	-10.5%	-3.8%	-11.7%	\$2,219.28	\$3,229,88	\$1,241,48	\$1,147,38
EE Contribution	\$172.13	\$729.91	\$491.88	\$1,048.49	\$23.42	\$309.02	\$372.23	\$806.17	-86.4%	-30.3%	-24.3%	-23.1%	\$2,189.78	\$3,229,88	\$1,141,48	\$1,147,38
EE Contribution Percentage	29.1%	63.5%	53.9%	71.4%	6.1%	49.4%	42.4%	62.9%								
ER Contribution	\$420.00	\$420.00	\$420.00	\$420.00	\$357.96	\$520.71	\$504.95	\$480.62	-14.8%	24.0%	20.2%	16.8%	\$189,114	\$100,71	\$84,95	\$70.52
ER Contribution Percentage	70.9%	36.5%	46.1%	28.6%	93.9%	50.6%	57.6%	37.8%								
Enrollment	55	11	17	13	55	11	17	13								
Total EE Annual Contribution		\$473,862			\$281,347					-40.0%				\$1,899,141		
Total EE Annual Contribution Percentage		49.5%			37.0%											
Total ER Annual Contribution		\$483,840			\$483,817					0.1%				\$677		
Total ER Annual Contribution Percentage		50.5%			63.0%											
Total Annual Cost		\$957,702			\$765,165					-19.7%				\$1,900,818		
<b>Plan 3</b>																
Budget Rate	\$466.93	\$834.20	\$756.89	\$1,176.03	\$339.39	\$711.88	\$627.30	\$1,223.83	-11.5%	16.5%	9.4%	4.1%	\$5,361.73	\$137.68	\$71.01	\$47.82
EE Contribution	\$1.00	\$114.20	\$336.89	\$756.03	\$22.11	\$289.42	\$351.32	\$760.88	2110.7%	16.0%	4.3%	0.6%	\$21.11	\$66.22	\$14.43	\$4.85
EE Contribution Percentage	0.2%	49.7%	44.5%	64.3%	6.1%	49.4%	42.4%	62.2%								
ER Contribution	\$465.93	\$420.00	\$420.00	\$420.00	\$337.85	\$491.46	\$476.58	\$462.97	-16.8%	17.0%	13.5%	10.2%	\$188,493	\$71.46	\$56.58	\$42.97
ER Contribution Percentage	99.8%	50.3%	55.5%	35.7%	93.9%	50.6%	57.6%	37.8%								
Enrollment	379	34	71	45	379	34	71	45								
Total EE Annual Contribution		\$368,828			\$1,096,753					15.9%				\$137,925		
Total EE Annual Contribution Percentage		25.0%			29.6%											
Total ER Annual Contribution		\$2,609,170			\$2,293,067					-8.0%				\$1,884,025		
Total ER Annual Contribution Percentage		75.0%			70.4%											
Total Annual Cost		\$3,470,998			\$3,399,850					-2.0%				\$1,884,950		
<b>Plan 4</b>																
Budget Rate	\$362.57	\$743.27	\$674.39	\$1,047.84	\$342.81	\$725.60	\$768.47	\$1,165.57	-5.4%	21.5%	16.9%	11.2%	\$836.76	\$182.33	\$114.08	\$117.73
EE Contribution	\$1.00	\$323.27	\$254.39	\$627.84	\$21.05	\$457.25	\$334.59	\$724.65	2005.4%	41.5%	31.5%	15.4%	\$20.05	\$134.28	\$80.20	\$36.81
EE Contribution Percentage	0.3%	43.5%	37.7%	59.9%	6.1%	49.4%	42.4%	62.2%								
ER Contribution	\$361.57	\$420.00	\$420.00	\$420.00	\$321.76	\$468.05	\$433.89	\$440.92	-11.0%	11.4%	8.1%	5.0%	\$1,816.71	\$48.05	\$33.89	\$20.92
ER Contribution Percentage	99.7%	56.5%	62.3%	40.1%	93.9%	50.6%	57.6%	37.8%								
Enrollment	384	72	133	122	384	72	133	122								
Total EE Annual Contribution		\$1,609,077			\$2,087,925					29.7%				\$478,147		
Total EE Annual Contribution Percentage		32.7%			39.1%											
Total ER Annual Contribution		\$3,514,195			\$3,256,989					-1.7%				\$1,712,110		
Total ER Annual Contribution Percentage		67.3%			60.9%											
Total Annual Cost		\$4,923,272			\$5,344,915					8.5%				\$420,933		
Total EE Annual Contribution		\$3,185,298			\$3,440,978					8.0%				\$255,680		
Total EE Annual Contribution Percentage		32.5%			35.1%											
Total ER Annual Contribution		\$6,146,811			\$6,251,164					-3.9%				\$1,712,110		
Total ER Annual Contribution Percentage		67.5%			64.9%											
Total Annual Cost		\$9,792,142			\$9,792,142					0.0%				\$0		

\*\*\* In the current environment, the employer pays \$420 towards the total rate no matter the employee's election. The remainder is charged to the employee as a buy-up. In the aligned environment EE contributions reflect a weighted average of current contributions.

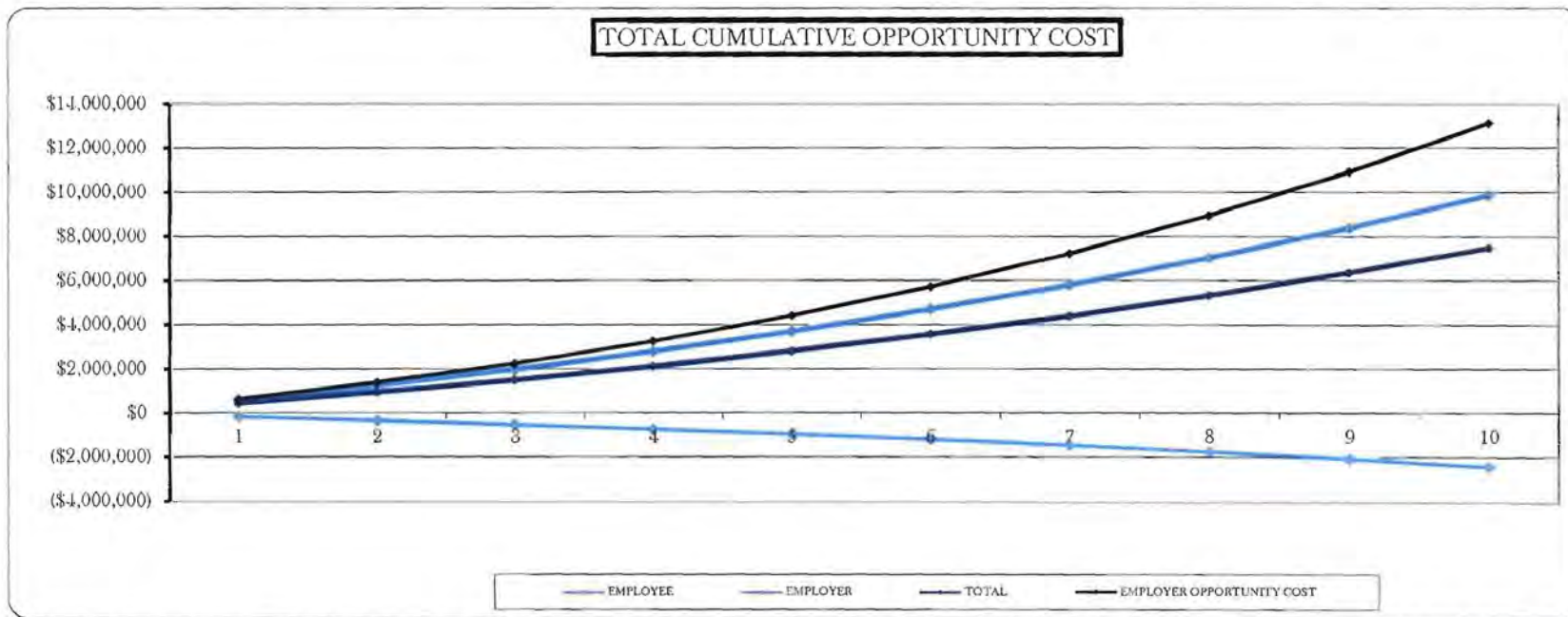


Medical Contributions

	CURRENT				ALIGNED				% Change				\$ Change			
	EE	EE-SP	EE-CH	F	EE	EE-SP	EE-CH	F	EE	EE-SP	EE-CH	F	EE	EE-SP	EE-CH	F
<b>Plan 1</b>																
Budget Rate	\$773.53	\$1,492.92	\$1,191.24	\$1,918.36	\$414.83	\$1,119.96	\$954.03	\$1,410.34	-46.4%	-25.0%	-19.9%	-26.5%	(\$238.73)	(\$277.96)	(\$291.11)	(\$289.02)
EE Contribution	\$353.33	\$1,072.92	\$771.24	\$1,498.36	\$26.32	\$571.93	\$418.23	\$905.81	-92.6%	-46.7%	-45.8%	-39.5%	(\$327.21)	(\$394.99)	(\$452.97)	(\$428.52)
EE Contribution Percentage	45.7%	71.9%	64.7%	78.1%	6.3%	51.1%	43.8%	64.2%								
ER Contribution	\$420.00	\$420.00	\$420.00	\$420.00	\$388.40	\$548.04	\$535.82	\$504.53	-7.5%	-30.5%	27.6%	20.1%	(\$31.17)	\$128.04	\$115.82	\$84.53
ER Contribution Percentage	54.3%	28.1%	35.3%	21.9%	93.7%	48.9%	56.2%	35.8%								
Enrollment	32	4	5	0	0	0	0	0								
Total EE Annual Contribution		\$233,330			\$0					-100.0%			(\$233,330)			
Total EE Annual Contribution Percentage		53.1%			0%											
Total ER Annual Contribution		\$206,640			\$0					-100.0%			(\$206,640)			
Total ER Annual Contribution Percentage		45.9%			0%											
Total Annual Cost		\$440,170			\$0					-100.0%			(\$440,170)			
<b>Plan 2</b>																
Budget Rate	\$392.13	\$1,149.91	\$911.88	\$1,468.49	\$360.18	\$596.78	\$488.11	\$1,233.20	-37.7%	-13.2%	-6.9%	-14.5%	(\$322.95)	(\$553.13)	(\$423.77)	(\$235.29)
EE Contribution	\$172.13	\$729.91	\$491.88	\$1,048.49	\$23.42	\$509.02	\$372.23	\$866.17	-86.4%	-30.3%	-24.3%	-23.1%	(\$271.71)	(\$470.89)	(\$341.61)	(\$189.12)
EE Contribution Percentage	29.1%	63.5%	53.9%	71.4%	6.3%	51.1%	43.8%	64.2%								
ER Contribution	\$420.00	\$420.00	\$420.00	\$420.00	\$336.75	\$487.76	\$476.88	\$449.03	-17.7%	16.1%	13.5%	6.9%	(\$83.25)	\$67.76	\$86.88	\$29.03
ER Contribution Percentage	70.9%	36.5%	46.1%	28.6%	93.7%	48.9%	56.2%	35.8%								
Enrollment	55	11	17	13	0	0	0	0								
Total EE Annual Contribution		\$473,862			\$0					-100.0%			(\$473,862)			
Total EE Annual Contribution Percentage		49.5%			0%											
Total ER Annual Contribution		\$683,840			\$0					-100.0%			(\$683,840)			
Total ER Annual Contribution Percentage		30.5%			0%											
Total Annual Cost		\$957,702			\$0					-100.0%			(\$957,702)			
<b>Plan 3</b>																
Budget Rate	\$466.93	\$834.20	\$756.89	\$1,176.03	\$348.44	\$460.78	\$401.46	\$1,184.08	-14.4%	12.8%	5.9%	0.7%	(\$118.49)	\$106.58	\$44.51	\$8.65
EE Contribution	\$1.00	\$414.20	\$336.89	\$756.03	\$22.11	\$480.42	\$351.32	\$760.88	210.7%	15.0%	4.3%	0.6%	(\$21.11)	\$66.22	\$14.43	\$4.85
EE Contribution Percentage	0.2%	49.7%	44.5%	64.3%	6.3%	51.1%	43.8%	64.2%								
ER Contribution	\$405.93	\$420.00	\$420.00	\$420.00	\$326.33	\$460.36	\$450.09	\$423.80	-19.6%	9.6%	7.2%	0.9%	(\$82.87)	\$40.36	\$30.09	\$3.80
ER Contribution Percentage	99.8%	50.3%	55.5%	35.7%	93.7%	48.9%	56.2%	35.8%								
Enrollment	379	34	71	45	740	102	194	155								
Total EE Annual Contribution		\$864,828			\$3,017,452					247.3%				\$2,148,624		
Total EE Annual Contribution Percentage		25.0%			36.3%											
Total ER Annual Contribution		\$2,699,170			\$5,287,263					103.6%				\$2,695,193		
Total ER Annual Contribution Percentage		75.0%			63.7%											
Total Annual Cost		\$3,470,998			\$8,314,815					139.6%				\$4,843,818		
<b>Plan 4</b>																
Budget Rate	\$369.57	\$743.27	\$674.39	\$1,047.84	\$591.84	\$806.58	\$763.24	\$1,199.27	-8.5%	20.5%	13.2%	7.7%	(\$187.73)	\$152.71	\$88.85	\$80.43
EE Contribution	\$1.00	\$323.27	\$254.39	\$627.84	\$21.05	\$457.55	\$334.59	\$724.65	2005.4%	41.5%	31.5%	15.4%	(\$20.05)	\$134.28	\$80.20	\$96.81
EE Contribution Percentage	0.3%	43.5%	37.7%	59.9%	6.3%	51.1%	43.8%	64.2%								
ER Contribution	\$361.57	\$420.00	\$420.00	\$420.00	\$310.79	\$438.44	\$428.66	\$403.62	-14.0%	4.4%	2.1%	-3.9%	(\$56.43)	\$18.44	\$8.66	(\$16.38)
ER Contribution Percentage	99.7%	56.5%	62.3%	40.1%	93.7%	48.9%	56.2%	35.8%								
Enrollment	384	72	133	122	124	10	22	16								
Total EE Annual Contribution		\$1,669,077			\$313,698					-80.5%				(\$1,355,379)		
Total EE Annual Contribution Percentage		32.7%			30.8%											
Total ER Annual Contribution		\$3,314,193			\$705,728					-78.7%				(\$2,608,465)		
Total ER Annual Contribution Percentage		67.3%			69.2%											
Total Annual Cost		\$4,983,272			\$1,019,426					-79.3%				(\$3,963,846)		
Total EE Annual Contribution		\$3,185,298			\$3,331,150					1.6%				\$145,853		
Total EE Annual Contribution Percentage		32.5%			35.7%											
Total ER Annual Contribution		\$6,606,844			\$6,068,092					-9.1%				(\$538,752)		
Total ER Annual Contribution Percentage		67.5%			64.3%											
Total Annual Cost		\$9,792,142			\$9,399,242					-4.7%				(\$392,900)		

Prospective Opportunity Cost Analysis

		YEAR									
		1	2	3	4	5	6	7	8	9	10
MEDICAL COST	<b>EMPLOYEE</b>										
	Annual	(\$145,853)	(\$161,167)	(\$178,090)	(\$196,789)	(\$217,452)	(\$240,284)	(\$265,514)	(\$293,393)	(\$324,200)	(\$358,241)
	Cumulative	(\$145,853)	(\$307,020)	(\$485,110)	(\$681,899)	(\$899,351)	(\$1,139,635)	(\$1,405,150)	(\$1,698,543)	(\$2,022,743)	(\$2,380,983)
	<b>EMPLOYER</b>										
	Annual Cost	\$603,753	\$667,147	\$737,197	\$814,603	\$900,136	\$994,650	\$1,099,089	\$1,214,493	\$1,342,015	\$1,482,926
	Cumulative Cost	\$603,753	\$1,270,899	\$2,008,096	\$2,822,699	\$3,722,835	\$4,717,486	\$5,816,574	\$7,031,067	\$8,373,082	\$9,856,008
<b>TOTAL</b>											
Annual Cost	\$457,900	\$505,980	\$559,107	\$617,814	\$682,684	\$754,366	\$833,574	\$921,100	\$1,017,815	\$1,124,686	
Cumulative Cost	\$457,900	\$963,880	\$1,522,987	\$2,140,800	\$2,823,485	\$3,577,850	\$4,411,425	\$5,332,524	\$6,350,339	\$7,475,025	
OPPORTUNITY COST	<b>EMPLOYER</b>										
	Annual Cost	\$639,978	\$707,175	\$781,429	\$863,479	\$954,144	\$1,054,329	\$1,165,034	\$1,287,363	\$1,422,536	\$1,571,902
Cumulative Cost	\$639,978	\$1,385,552	\$2,250,114	\$3,248,600	\$4,397,660	\$5,715,849	\$7,223,834	\$8,944,626	\$10,903,840	\$13,129,972	



The Medical Cost analysis assumes 10.5% medical trend and no changes in network and/or plan design.  
 The Employer Opportunity Cost Analysis assumes an Internal Rate of Return of 6%.



## Questions for Interview

Employee Benefits Broker Services 2016.016 for Adams County

- Please provide your fee without regard to any commissions.
- Re-clarify what specific services are included in your fee?
- Please bring to the interview the person(s) that would be our **day-to-day direct contacts**.
- Please be prepared to provide a demonstration of your data analytics tools and any other tools you use to aid your clients.
- Please be prepared to provide innovative ideas and opportunities you see for assisting the County in controlling health care costs other than plan design changes.
- What are your average client claim cost trends for Colorado?
- Public vs. Private, specifically what differences do you see in the benefit structures in Colorado?
- Your proposal states that you generate savings for your clients. What are they and how do you document them?
- Given your ideal timeline for renewals, if you were to be awarded the contract, how would you adjust your renewal process for our January 1 renewal?
- What expectation do you have in regard to resources the County would need to provide you, not only in the short-term but also on an ongoing basis?
- What makes you different from your competitors? Why should we select your company?
- What type of performance guarantees would be available?

# RENEWAL TIMELINE | THE HAYS DIFFERENCE



Transition to Hays for Health & Welfare Plans	Target Date
<b>Vendor Notification - Broker of Record Letters (BOR)</b>	
<ul style="list-style-type: none"> <li>Request contracts, rates, claims experience, and plan designs from vendors</li> </ul>	July 1, 2016
<b>Renewal Planning Meeting</b>	
<ul style="list-style-type: none"> <li>Meet stakeholders on each team</li> <li>Discuss and establish expectations</li> <li>Hays to provide initial renewal projection</li> </ul>	July 15, 2016
<b>Renewal Strategy Session</b>	
<ul style="list-style-type: none"> <li>Review HPI report and risk pool analysis</li> <li>Discuss potential 2017 changes</li> <li>Discuss 2017 budget</li> </ul>	August 5, 2016
<b>Vendor Selection and Renewal Decisions</b>	
<ul style="list-style-type: none"> <li>Finalize 2017 plan design</li> <li>Finalize 2017 budget</li> <li>Review employee contributions</li> <li>Begin employee communication strategy and development</li> </ul>	August 31, 2016
<b>Employee Communications</b>	
<ul style="list-style-type: none"> <li>Define target dates for open enrollment</li> <li>Schedule open enrollment meetings</li> </ul>	October 1, 2016
<b>Open Enrollment</b>	
<ul style="list-style-type: none"> <li>Conduct open enrollment meetings</li> </ul>	October 15 - November 15
<b>Future Strategy</b>	
<ul style="list-style-type: none"> <li>2017 &amp; 2018 Kickoff / Strategy Meeting</li> </ul>	December 15, 2016
<b>New Plan Year Begins</b>	
<ul style="list-style-type: none"> <li>Review and finalize vendor contracts</li> </ul>	January 1, 2017





# 2016 Service Calendar



Coverages In force:	Carrier/Vendor:	Renewal	Reporting Cycle	Reports Presented By
Medical/Rx	CIGNA & Kaiser	1-Jan	Monthly	Hays
Dental	Delta	1-Jan	Monthly	Hays
Vision	VSP	1-Jan	Annually	Hays
Life/AD&D/LTD	CIGNA	1-Jan	Annually	Hays
EAP	Empathia	1-Jan		
Flex	Discovery	1-Jan		
COBRA	Internal	1-Jan	Quarterly	Compass

February	March
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Year End Report Review SPDs	Monthly reporting  Hays Seminar # 1-Risk Pool Feb 11th, 8am ** (in Westminster) Hays Seminar # 2-Retention & Recruitment Feb 11th 1pm  Medicare Disclosure to CMS due by 02/28 SPDs finalized	Monthly reporting  Hays Seminar # 3-Pharmaceuticals, 3/10, 1pm
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April	May	June
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Quarterly Report  Hays/Client Meeting Hays Wellness Meeting & HPI Quarterly Clinic Review  Hays Seminar # 4-Data Analytics, Apr 21, 1pm	Monthly reporting	Monthly reporting
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July	August	September
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Quarterly Report  Hays/Client Meeting-Financials Hays/Client Wellness Meeting Quarterly Clinic Review Establish 2017 Budget  PCORI fees due 07/31	Monthly reporting  Begin implementation for new vendors (TBD) Develop employee communications Postcard preceding OE letter OE materials	Monthly reporting  Hays/Client Meeting Finalize Employee Communications Send 2017 postcard
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October	November	December
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Quarterly Report  Distribute Employee Communications Quarterly Clinic Review  Medicare Creditable Cov'g Notice due 10/14	Monthly reporting  Open Enrollment	Monthly reporting  Hays/Client Meeting Hays/Client Wellness Meeting  ACA Reinsurance fees mid-December
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THE TEAM



WHY HAYS



STRATEGIC  
PLANNING



ANALYTICS



 **Hays**

All. Together. Certain.

COMPLIANCE



HEALTH  
STRATEGIES



COMMUNICATIONS



SPECIALTY  
RESOURCES



All. Together. Certain.



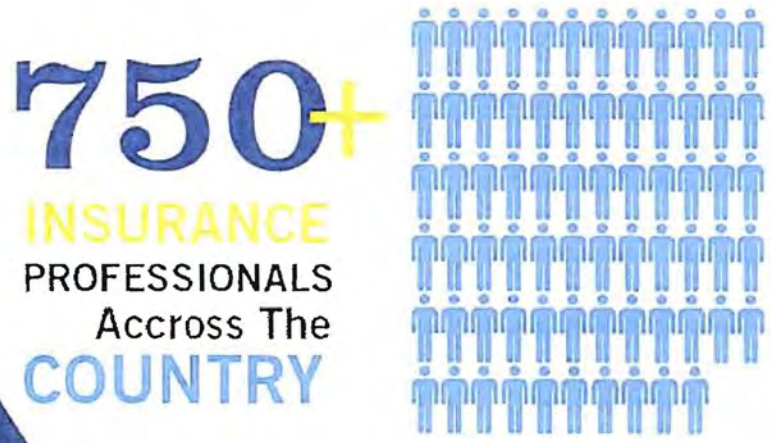
# HAYS

*All. Together. Certain.*





# About Hays Companies





# Hays Companies of Denver

## Hays Denver Office

110+ 

- Established in 2004
- 32 Insurance Professionals (20 Benefits Professionals)
- 98% Client Retention
- Benefit Clients in CO and NE and Wyoming

## Full-Service Insurance Brokerage Firm

- Employee Benefits Consulting
- Risk Management
- Property & Casualty
- Retirement Planning
- Specialty Programs



Agility  
 Air Methods  
 All Copy Products  
 AlloSource  
 Alpine Lumber Co  
 ANB Bank  
 Applewood Plumbing Heating and Electric  
 Arapahoe Library District  
 Armstrong Oil & Gas  
 Balfour Senior Living  
 BioScap  
 Black Creek Capital  
 Bonfils Blood Center  
 Boulder Scientific Company  
 Brush School District  
 Century Communities  
 Central Nebraska Public Power (NE)  
 Chase County Community Hospital (NE)  
 Chase County (NE)  
 Chuck Latham Associates  
 City of Durango  
 City of Fort Collins  
 City of Imperial (NE)  
 City of Lakewood  
 City of McCook (NE)  
 City of Montrose  
 City of Westminster  
 Colorado Mesa University  
 Colorado Mountain Medical  
 Cordillera Metro District  
 Cornerstone Programs Corporation  
 DCT Industrial  
 Denver Center for the Performing Arts  
 Denney Transport  
 Denver Museum of Nature & Science  
 Denver Rescue Mission



Developmental Disabilities Resource Centers (DDRC)  
 Discovery Natural Resources  
 District Attorney 18th Judicial District  
 Dry Systems Technologies  
 Eagle County  
 Eagle River Water & Sanitation District  
 EnCon United / Stresscon  
 Family Tree  
 Floyd's Truck Center, Inc. (WY)  
 Frontier Mechanical  
 Gallegos Corporation  
 Glenwood Hot Springs  
 Greenleaf Wholesale Florist  
 Group Publishing  
 Ground Engineering Consultants  
 Gunnison School District  
 Highstreet IT Solutions  
 Hospital Shared Services (HSS)  
 Holdrege Memorial Homes (NE)  
 Imagine!  
 Inspirato  
 Intermountain Rural Electric Association  
 Johnson Storage & Moving  
 Landmark Implement (NE)  
 La Plata Electric Association  
 Laramar Group  
 Lanier Associates  
 Mars Hospitality  
 Martin / Martin, Inc  
 Merritt Equipment  
 Middle Park Medical Center  
 Moffat County  
 Montrose County  
 Mount Carmel Homes



LARAMAR



Mountain Valley Developmental Services  
 Neenan Architecture  
 National Bank Holdings  
 Nebraska Salt & Grain Co. (NE)  
 Northern Colorado Water District  
 North Metro Community Services  
 Orthman Manufacturing  
 Paulsen, Inc  
 Pason  
 Perkins County Health Services (NE)  
 QC Data  
 Real Capital Solutions  
 Risas Dental and Braces  
 Resurrection Christian School  
 Rout County  
 Scott Lowery P.C.  
 South Rout School District RE-3  
 Steamboat Springs School District  
 Summit Automotive Partners  
 Tokyo Joe's  
 Town of Estes Park  
 Town of Vall  
 Town of Breckenridge  
 Trinidad Genham  
 Tri-County Health  
 UDR  
 US Space Foundation  
 Valmont Industries (NE)  
 Valley Hope Association (KS)  
 Via West  
 Vivage  
 Waterpark  
 Weathercraft Companies (NE)  
 Western Sugar Cooperative

# Public Sector Clients

Arapahoe Library District  
Brush School District  
Central Nebraska Public Power (NE)  
City of Durango  
City of Imperial (NE)  
City of Lakewood  
City of LoneTree  
City of McCook (NE)  
City of Montrose  
City of Westminster  
Colorado Mesa University  
Eagle County

Eagle River Water & Sanitation District  
Gunnison School District  
La Plata Electric Association  
Northern Colorado Water District  
Perkins County Health Services (NE)  
Routt County  
South Routt School District RE-3  
Steamboat Springs School District  
St. Vrain Valley Schools  
Town of Estes Park  
Town of Vail  
Town of Breckenridge



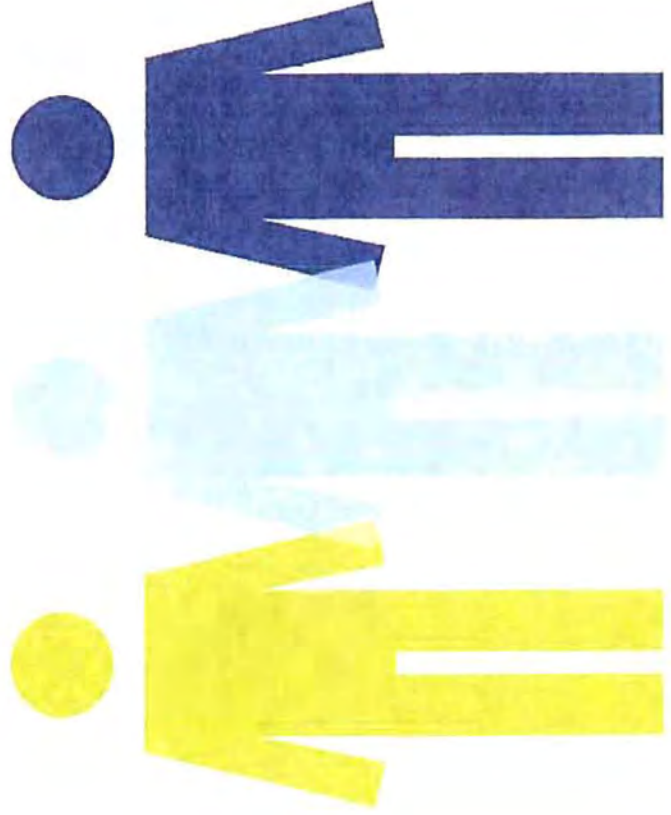


# Presentation Questions

- Please provide your fee without regard to any commissions.
- Re-clarify what specific services are included in your fee?
- Please bring to the interview the person(s) that would be our day-to-day direct contacts.
- Please be prepared to provide a demonstration of your data analytics tools and any other tools you use to aid your clients.
- Please be prepared to provide innovative ideas and opportunities you see for assisting the County in controlling health care costs other than plan design changes.
- What are your average client claim cost trends for Colorado?
- Public vs. Private, specifically what differences do you see in the benefit structures in Colorado?
- Your proposal states that you generate savings for your clients. What are they and how do you document them?
- Given your ideal timeline for renewals, if you were to be awarded the contract, how would you adjust your renewal process for our January 1 renewal?
- What expectation do you have in regard to resources the County would need to provide you, not only in the short-term but also on an ongoing basis?
- What makes you different from your competitors? Why should we select your company?
- What type of performance guarantees would be available?



# THE TEAM



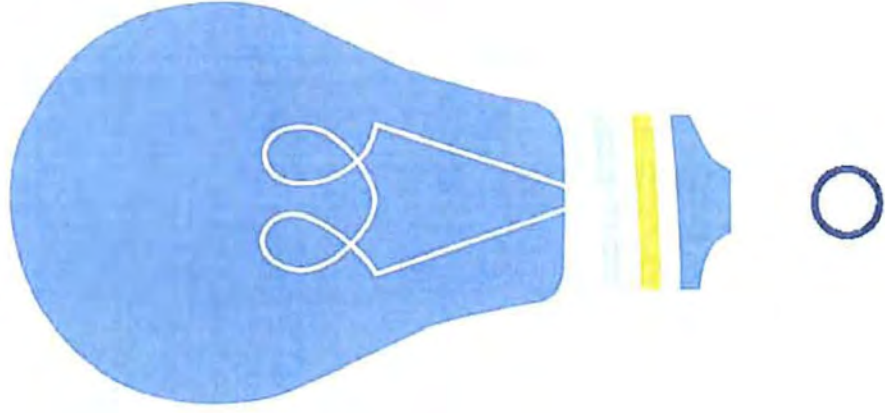
# Adams County Benefits Team



**ADAMS COUNTY**  
COLORADO



# WHY HAYS







Optimal Financial Outcome



Protect you from liabilities associated with compliance



Unlimited, All-Inclusive  
Specialty Resources



Independent Thinking

THE TEAM



WHY HAYS



STRATEGIC  
PLANNING



ANALYTICS



 **Hays**

All. Together. Certain.

COMPLIANCE



HEALTH  
STRATEGIES



COMMUNICATIONS



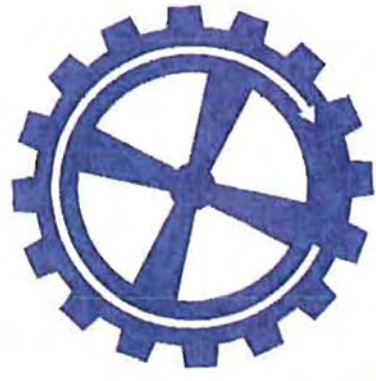
SPECIALTY  
RESOURCES



All. Together. Certain.



# STRATEGIC PLANNING





# Strategic Process



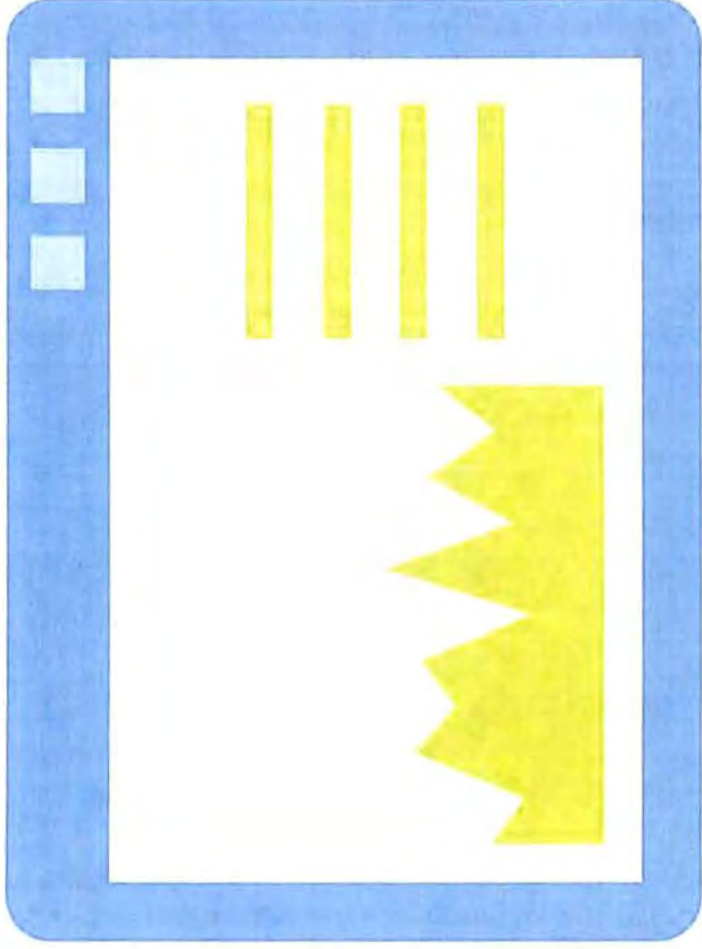


# Sample Renewal Timeline



Transition to Hays for Health & Welfare Plans	Target Date
<b>Vendor Notification - Broker of Record Letters (BOR)</b>	
<ul style="list-style-type: none"> <li>Request contracts, rates, claims experience, and plan designs from vendors</li> </ul>	July 1, 2016
<b>Renewal Planning Meeting</b>	
<ul style="list-style-type: none"> <li>Meet stakeholders on each team</li> <li>Discuss and establish expectations</li> <li>Hays to provide initial renewal projection</li> </ul>	July 15, 2016
<b>Renewal Strategy Session</b>	
<ul style="list-style-type: none"> <li>Review HPI report and risk pool analysis</li> <li>Discuss potential 2017 changes</li> <li>Discuss 2017 budget</li> </ul>	August 5, 2016
<b>Vendor Selection and Renewal Decisions</b>	
<ul style="list-style-type: none"> <li>Finalize 2017 plan design</li> <li>Finalize 2017 budget</li> <li>Review employee contributions</li> <li>Begin employee communication strategy and development</li> </ul>	August 31, 2016
<b>Employee Communications</b>	
<ul style="list-style-type: none"> <li>Define target dates for open enrollment</li> <li>Schedule open enrollment meetings</li> </ul>	October 1, 2016
<b>Open Enrollment</b>	
<ul style="list-style-type: none"> <li>Conduct open enrollment meetings</li> </ul>	October 15 - November 15
<b>Future Strategy</b>	
<ul style="list-style-type: none"> <li>2017 &amp; 2018 Kickoff / Strategy Meeting</li> </ul>	December 15, 2016
<b>New Plan Year Begins</b>	
<ul style="list-style-type: none"> <li>Review and finalize vendor contracts</li> </ul>	January 1, 2017

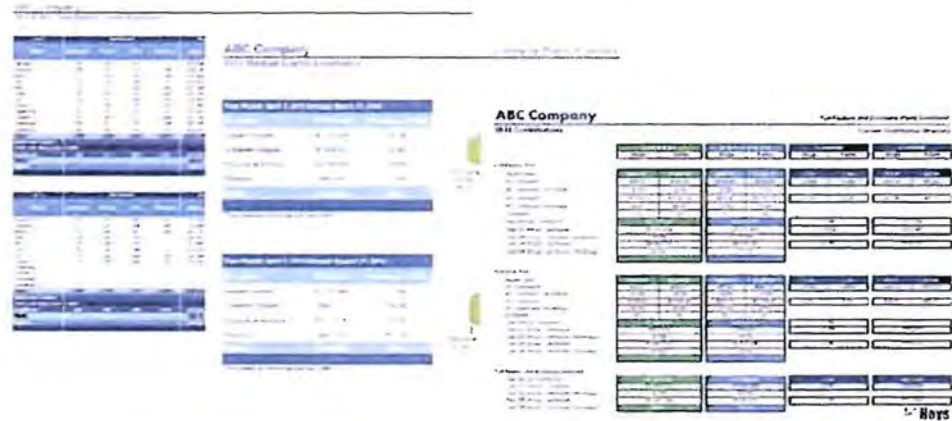
# ANALYTICS





# Financial Expertise

- › Monthly Financial Reporting
- › Medical & Rx Benefit Modeling
- › Risk Pool Opportunity Analysis
- › Member Burden Measurement
- › Actuarial Alignment Analysis



- › High Case Analysis Tool (HCAT)
- › PPO Network Efficiency Review
- › Pharmacy Plan Analysis
- › Self-Funded vs. Fully-Insured
- › Feasibility Analysis
- › Health Plan Intelligence (HPI)

# Medical Plan Inefficiencies

Incentivizing more employees to move to the lower cost plan will continue to result in:

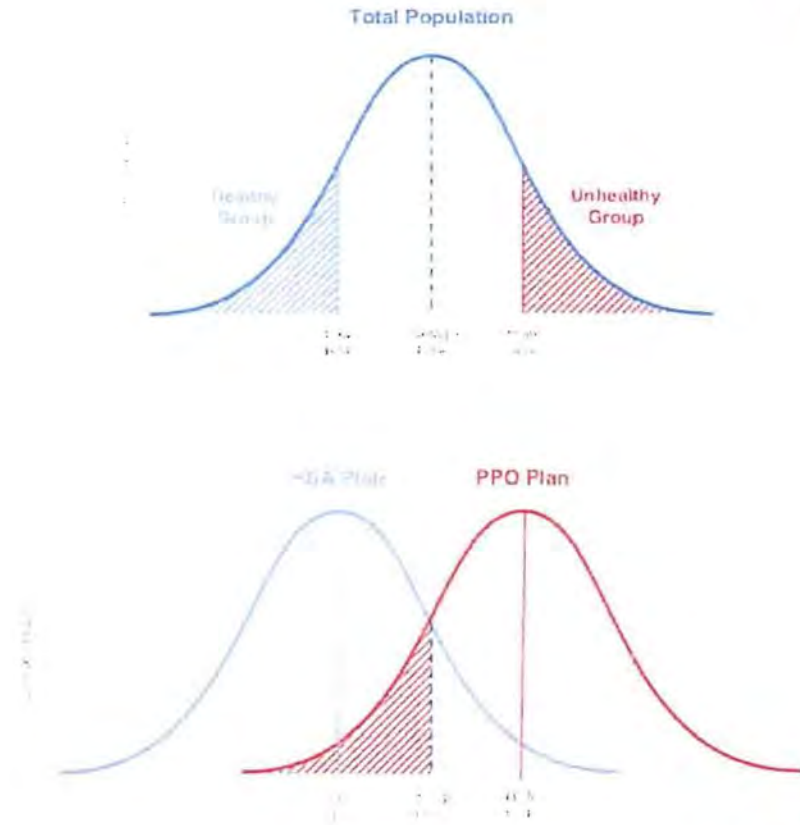
- More **unhealthy** members on the plan
- You receive less employee contribution and the plan is underfunded
- The overall cost of BOTH plans goes up by double digits

You the  
Employer

Small  
&  
Healthy  
Risk Pool

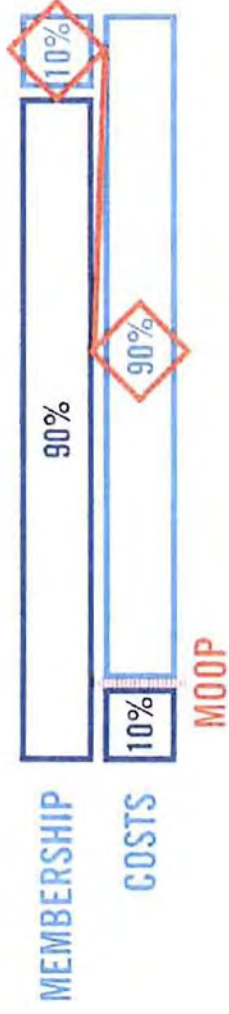
Your Insurance  
Carrier

Huge  
&  
Sick  
Risk Pool





# Risk Pool Management



EFFICIENT



INEFFICIENT





# Program Analysis



## HPI Database Statistics

- Clients - 1,400
- Members - 3.2 million
- Claims - \$5 billion

## HPI Dashboard

- Performance benchmarking of key healthcare utilization categories, plan efficiency, and impact of chronic diseases.
- Insight into which health strategies to pursue and steer communications.

## HPI Analytics

- Provides powerful views of underlying healthcare data through multi-dimensional filters to reveal hidden problem areas and potential opportunities.

## HPI BeneCalc

- Model the financial and member impact of changes in plan design, medical inflation, network performance, and employee contributions.

Better Data = More Informed Decisions = Cost Effective, Efficient Health Plan

THE TEAM



WHY HAYS



STRATEGIC  
PLANNING



ANALYTICS



All. Together. Certain.

COMPLIANCE



HEALTH  
STRATEGIES



COMMUNICATIONS



SPECIALTY  
RESOURCES



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# COMPLIANCE





**1**  
**Employee Benefit  
Plan Administration**

**2**  
**HR Risk Management  
& Personnel Training**

**PPACA**



## Compliance is Key

- Hays will perform a Full Compliance ACA audit
- Unlimited access to Hays' Full-service Research and Compliance
- Employer online access to Compliance and Research
- Provide access to local Attorneys
- Real-time updates on various topics
- Ongoing webinars on important benefits topics and employer requirements
- Practical "White Papers" on items that require action



# Hays CoreCompliance





# 24/7 Support



## **ThinkHR Live**

- A team of HR experts standing by to answer your questions and provide advice.



## **ThinkHR Learn**

- Training solutions that develop employees and ensure compliance.



## **ThinkHR Comply**

- An award-winning resource center for all of your workforce issues.

# HEALTH STRATEGIES

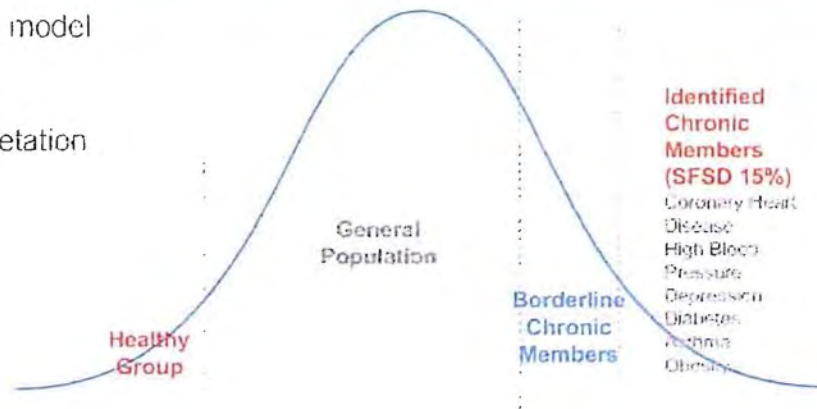






# Health & Wellness Strategies

- Strategic planning within the total benefits design model for health strategies
- Utilization and outcome data analysis and interpretation
- Wellness clinic data integration and analysis
- Evaluation of vendor activities, strategies, and outcomes
- Wellness branding campaigns



## Healthiest Employers of 2016

(Large Company Category)

(Medium Company Category)

1<sup>st</sup>



WESTMINSTER

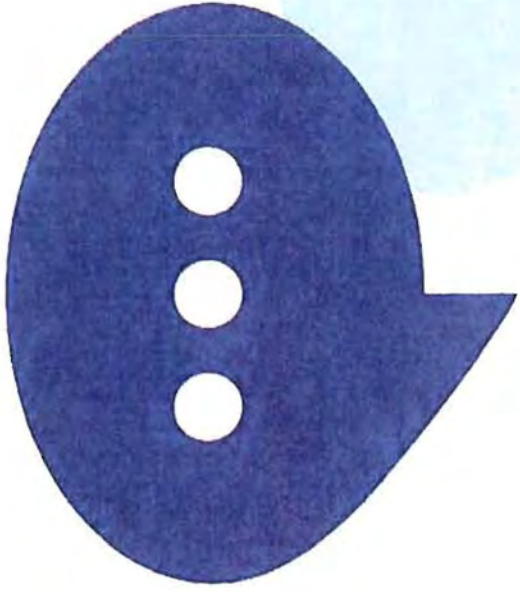
3<sup>rd</sup>



AlloSource  
DOING MORE  
WITH LIFE



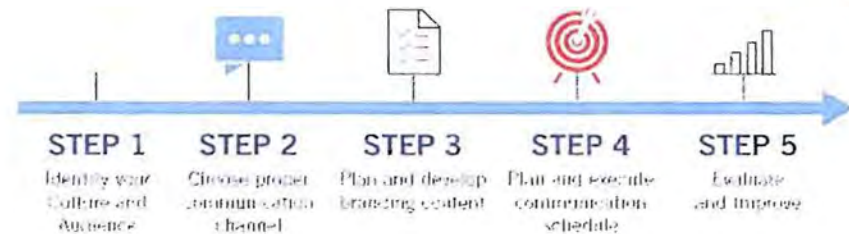
# COMMUNICATIONS



# Communication & Education

## Communication Strategy & Support

- Online communication
- Professional communication brochures, including all design and print services
- Open enrollment/educational meetings
- Focused information and articles for benefit newsletters
- Total Reward and other supplemental employee benefit communications
- Benefit fair support
- Webinars and webinar support
- Educational Seminars
- Client Resource Portal



Wellness & Safe Wheel of Wellness

2015 Men's Preventive Health Care

Employee Benefit Information

Supplemental and Medical Insurance - Dental

Wellness & Safe

For Employee Benefit Information

Employee Assistance Program

The Employee Portal



# Digitized Guidebooks

The screenshot shows a mobile application interface for "Open Enrollment 2014". The top navigation bar is dark purple with a hamburger menu icon on the left, a search icon, and a "CC" icon. Below the navigation bar is a video player with a play button in the center. The video content features the "unfi" logo (with the tagline "POWER BY NATURE") on the left, a stylized white figure of a person with arms raised, and the text "Open Enrollment 2014" on the right. There are also two circular icons: a red one with the word "happy" and a yellow one with the word "healthy". At the bottom of the video player, there is a progress bar showing "0:00" and a volume icon.

Open Enrollment 2014

unfi  
POWER BY NATURE

happy

healthy

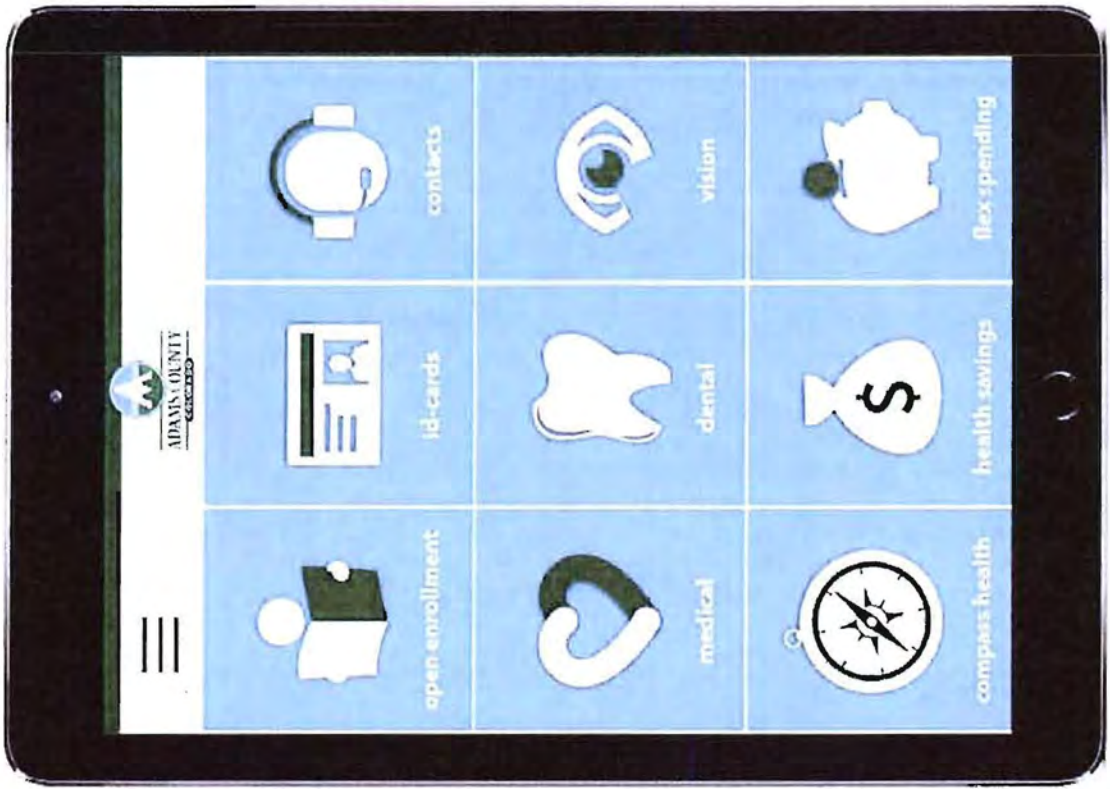
Open Enrollment 2014

0:00

Table of Contents:

- Welcome 00:23
- Introduction to Open Enrollment 00:31
- Open Enrollment Basics 01:30
- What Happens If...? 00:29
- Medical Plan Changes 00:34
- Body & Mind Medical Plan 00:34
- Health Care Reform 00:27
- Wellness 00:50
- Premiums 00:40
- Dental and Vision 00:14
- Flexible Spending Accounts 00:38
- Other Benefits 00:32
- 401(k) Retirement Savings 00:41
- Open Enrollment Reminders 01:36
- Resources & Conclusions 00:21





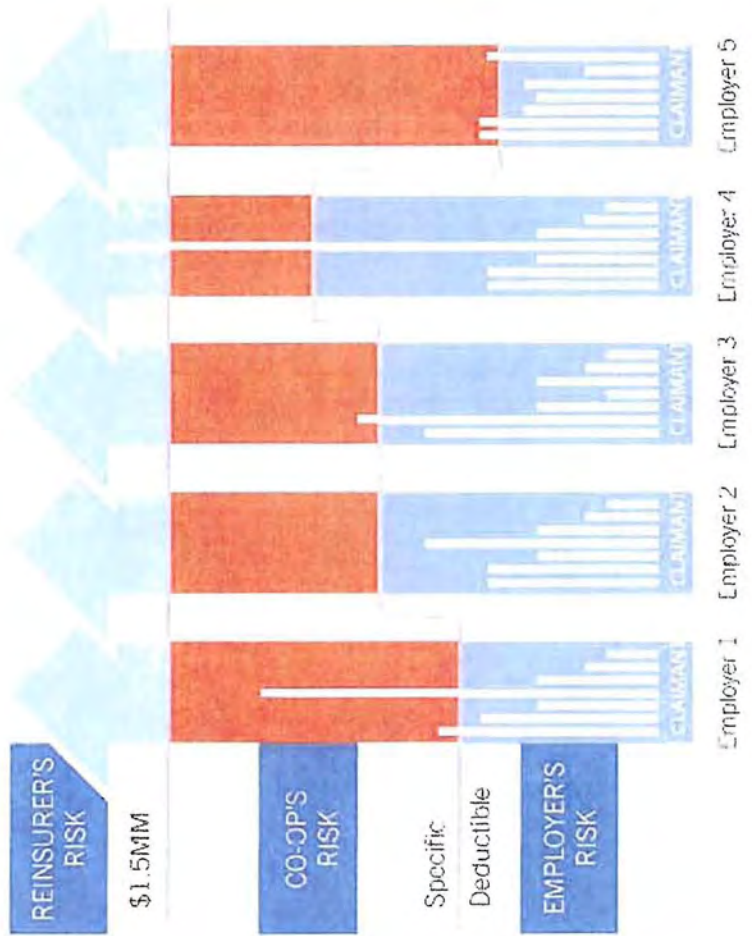
# SPECIALTY RESOURCES







# STOP LOSS COOPERATIVE





# PBM Consulting



Ongoing Pharmacy Program Consulting



PBM Procurement



Pharmacy Benefit Retrospective Audit



Actuarial Rx Diagnostic



# Enterprise Cost Containment

The **TRUECost™** analytics tool aggregates data from virtually any cost center, including, but not limited to:

## Health & Welfare

- Medical
- Pharmaceutical
- HRA
- Biometrics
- Disability
- Dental
- Vision

## Risk Control

- Workers' Compensation
- Safety
- Productivity
- Absenteeism
- Presenteeism
- Wages





THE TEAM



WHY HAYS



STRATEGIC  
PLANNING



ANALYTICS



 **Hays**

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COMPLIANCE



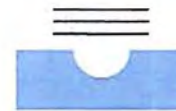
HEALTH  
STRATEGIES



COMMUNICATIONS



SPECIALTY  
RESOURCES



**All. Together. Certain.**



# Your Service Advocates

## A Dedicated Service Team Who Cares

**Hays Delivers a comprehensive suite of full-service solutions:**

- Claims Advocacy
- HR and Legal Support
- Educational Seminars and Continuing Education
- Research and Compliance Team
- Strategic Wellness Consultant
- Customized Communications



# Proposed Flat Fee

1

All Core Services Included

2

Full Legal and ACA Compliance

3

Health Strategies Consulting

4

HR Support and Training

5

Custom Mobile/Print Marketing

**\$115,000**



Experts      Innovative      Engaged  
Performance-Driven      Value      Credible



THE TEAM



WHY HAYS



STRATEGIC  
PLANNING



ANALYTICS



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COMPLIANCE



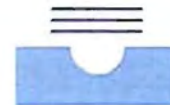
HEALTH  
STRATEGIES



COMMUNICATIONS



SPECIALTY  
RESOURCES

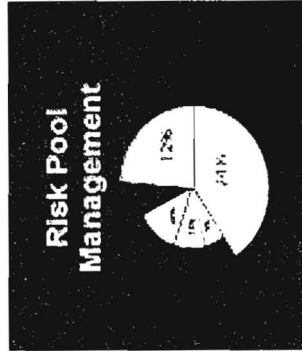
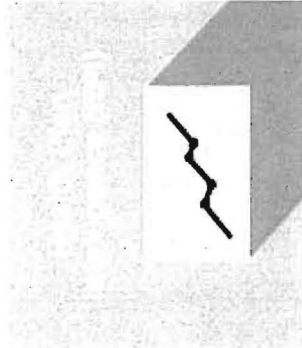
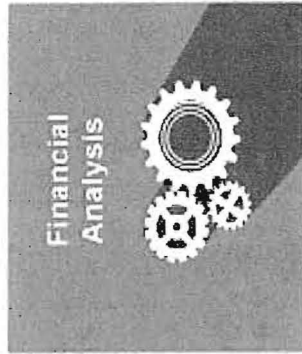


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# ABC

## FINANCIAL SUMMARY



**for plan year:**  
**January 1, 2015 - December 31, 2015**  
**December, 2015**

# 2015



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Hays Companies of Denver 1125 17th Street, Suite 400, Denver CO 80202

## COMPENSATION DISCLOSURE

Hays is a privately held corporation providing the managing employees a vested interest in the success of the organization. The company is owned by its managing employees, there is no outside ownership. This type of corporate structure ensures that those leading the organization remain focused on satisfying the customers' needs.

Hays Companies may receive compensation in the form of fees and/or commissions for the insurance brokerage services, risk management, consulting, employee benefits and financial services planning provided to clients. Hays Companies may also receive additional compensation from certain insurers, wholesalers and insurance markets with whom it places business and to whom it provides services. This additional compensation may be based on or computed according to a variety of factors, including but not limited to the overall volume of business placed, size of placements, growth, and/or profitability. Please contact Hays Companies for additional compensation information.

Hays Companies expects all employees to exercise the highest standards of honesty, integrity and fairness in business practice and the conduct of Hays Companies' affairs. It is important that we represent the interests of our clients in a sound, reliable and trustworthy fashion. In addition, all officers, directors and employees of Hays Companies must fully comply with all applicable laws and regulations, and also with the Hays Companies Ethics Policy.

## PRIVACY

At the Hays Companies, we value your trust and are committed to the responsible management, use and protection of business or personal information. When we refer to "you" we mean those individuals and firms who have provided us with business or personal information in conjunction with inquiring about, applying for, or obtaining a financial product or service from us. All financial service companies collect a certain amount of this information to help service customers and administer their business. This Notice describes our policy regarding the collection, disclosure, and protection of business or personal information.

"Information", as used in this Notice, means information that identifies an entity or individual personally and is not otherwise available to the public. It includes financial information such as credit history, income, financial benefits, policy or claim information. It also includes personal health information such as individual medical records or information about an illness, disability or injury.

Hays Companies collects business and personal information to help service your transactions with us and to support our business operations. This information may be obtained directly from the individuals themselves, from corporate clients duly authorized to release such information and from certain third parties, such as insurance companies. Depending on the type of product or service applied for or obtained through us, personal information may include names, addresses, income, and claim histories.

To serve you and to administer our business, we may share certain business and personal information, only as permitted by law, with affiliates, such as business associates and our employees. We may also share business and personal information, again only as permitted by law, with unaffiliated third parties, such as insurance companies, administrators, and service providers who help us serve you and administer our business.

Our employees have access to business or personal information in the course of doing their jobs, which includes underwriting policies, paying claims, developing new products or advising customers about products and services. All of our employees are required to sign a confidentiality agreement in which they agree to protect the information to which they may have access.

We use manual and electronic security procedures to maintain the confidentiality and integrity of information in our possession and to guard against its unauthorized access. Some techniques we employ to protect information include secured files, user authentication, encryption, firewall technology and the use of detection software.

We are responsible for identifying information that must be protected, providing an adequate level of protection for that data and granting access to protected data only to individuals who must use it in the performance of their job-related duties. Employees who violate our Privacy Policy will be subject to disciplinary action, which may include termination.

Disclosure of your information will only be done with your proper written authorizations or as otherwise permitted or required by law. We will not share your business or personal information with anyone for purposes unrelated to Hays Companies business operations.

This Notice describes the privacy policies of Hays Companies. The privacy policy applies to individuals and firms who obtain or apply for a financial product or service, or have done so in the past. We will continue to follow our privacy policy regarding information even when a business relationship no longer exists between us.



# ABC Company



## Financial Summary

Cigna PEPM Year over Year Total Plan Costs									
Year	Average Enrollment Med/Rx	Administration PEPM	Stop Loss PEPM	Net Medical/Rx Claims	Total Plan Cost PEPM	YTD Total Plan Cost	YTD CareHere Plan Cost	Total Plan Cost With CareHere PEPM	YTD Total Plan Cost With CareHere
2015	604	\$34.40	\$111.90	\$1,089.84	\$1,236.14	\$8,959,523	\$469,720	\$1,300.94	\$9,429,243
% Change	3%	3%	13%	23%	22%			20%	
2014	586	\$33.26	\$99.39	\$883.08	\$1,015.73	\$7,141,613	\$467,416	\$1,082.21	\$7,609,029
% Change	2%	4%	6%	-6%	-5%			-4%	
2013	572	\$32.09	\$94.05	\$937.72	\$1,063.86	\$7,303,432	\$473,329	\$1,132.81	\$7,776,762
% Change	5%	3%	7%	1%	2%				
2012	546	\$31.12	\$87.53	\$924.57	\$1,043.23	\$6,833,136			
% Change	0%	2%	14%	11%	11%				
2011	548	\$30.61	\$76.53	\$830.29	\$937.42	\$6,140,113			

Specific Stop Loss Contract			
Year	Specific Stop Loss Premium Pd	Reimbursements Paid	Loss Ratio
2015	\$811,053	\$2,547,784	314%
2014	\$698,827	\$1,405,552	201%
2013	\$645,683	\$391,209	61%
2012	\$573,324	\$441,604	77%
2011	\$501,267	\$206,677	41%

Paid Contract; \$150K specific deductible; Med/Rx Included

	2015 Plan Year																Total Plan Costs
	Enrollment				Fixed Costs			Claims						Total Net Paid Claims	Medical & Rx Total Plan Cost		
	Wellness	Non-Wellness	Retirees	Total Enrollment	Admin	Stop-Loss	Total Fixed Costs	Wellness Medical	Wellness Rx	Non-Wellness Medical	Non-Wellness Rx	Retiree Medical	Retiree Rx			Total Medical/Rx Claims	
Jan-15	484	95	24	603	\$20,596	\$66,989	\$87,585	\$1,697,538	\$100,432	\$45,746	\$3,783	\$20,596	\$7,782	\$1,875,876	\$1,170,850	\$705,026	\$792,611
Feb-15	485	94	24	603	\$20,712	\$67,347	\$88,059	\$378,991	\$114,272	\$180,585	\$17,862	\$54,143	\$4,933	\$750,786	\$57,252	\$693,534	\$781,593
Mar-15	484	93	25	602	\$20,660	\$67,158	\$87,818	\$365,076	\$84,161	\$103,696	\$46,369	\$85,779	\$6,754	\$691,835	\$43,413	\$648,422	\$736,240
Apr-15	489	91	24	604	\$20,727	\$67,372	\$88,100	\$652,570	\$106,876	\$171,788	\$84,605	\$42,956	\$6,137	\$1,084,931	\$231,830	\$853,101	\$921,201
May-15	489	90	24	603	\$20,782	\$67,577	\$88,359	\$395,564	\$88,362	\$153,460	\$26,437	\$36,071	\$5,378	\$705,272	\$180,073	\$525,199	\$613,558
Jun-15	490	90	23	603	\$20,761	\$67,520	\$88,280	\$525,499	\$70,369	\$410,283	\$48,271	\$16,451	\$5,702	\$1,076,575	\$414,909	\$661,666	\$749,946
Jul-15	488	88	24	600	\$20,712	\$67,384	\$88,096	\$531,712	\$118,762	\$48,039	\$49,164	\$24,016	\$7,446	\$779,139	\$125,065	\$654,074	\$742,170
Aug-15	492	87	24	603	\$20,715	\$67,428	\$88,144	\$306,971	\$107,746	\$90,160	\$58,555	\$108,817	\$6,088	\$678,338	\$61,842	\$616,496	\$704,639
Sep-15	494	88	25	607	\$20,845	\$67,809	\$88,655	\$402,057	\$132,274	\$72,854	\$37,194	-\$3,107	\$6,389	\$647,661	\$163,035	\$484,626	\$573,281
Oct-15	490	87	25	602	\$20,817	\$67,761	\$88,577	\$542,606	\$120,002	\$92,995	\$55,858	\$43,017	\$9,039	\$863,518	\$4,614	\$858,904	\$947,481
Nov-15	490	89	28	607	\$20,931	\$68,157	\$89,089	\$245,428	\$111,323	\$113,654	\$24,707	\$10,626	\$5,163	\$510,902	\$27,482	\$483,420	\$572,509
Dec-15	493	90	28	611	\$21,046	\$68,550	\$89,597	\$434,061	\$105,398	\$163,223	\$82,420	\$6,753	\$10,263	\$802,117	\$67,419	\$734,698	\$824,294
2015 Totals	5,866	1,082	298	7,246	\$249,305	\$811,053	\$1,060,358	\$6,478,072	\$1,259,976	\$1,646,485	\$535,224	\$446,118	\$81,073	\$10,446,949	\$2,547,784	\$7,899,165	\$8,959,623
AVG Month	489	90	25	604	\$20,775	\$67,588	\$88,363	\$539,839	\$104,998	\$137,207	\$44,602	\$37,176	\$6,756	\$870,579	\$212,315	\$658,264	\$746,627
AVG PEPM					\$34.40	\$111.90	\$146.30	\$893.77	\$173.84	\$227.16	\$73.84	\$61.55	\$11.19	\$1,441.36	\$351.52	\$1,089.84	\$1,236.14
% Change	2.6%	8.9%	-5.7%	3.1%	3.4%	12.6%	10.3%	19.9%	34.3%	140.9%	16.1%	54.1%	6.7%	33.1%	75.8%	23.4%	21.7%
2014 Totals	5,721	994	316	7,031	\$233,851	\$698,827	\$932,679	\$5,239,520	\$910,057	\$663,075	\$447,213	\$280,840	\$73,681	\$7,614,487	\$1,405,552	\$6,208,935	\$7,141,613
AVG Month	477	83	26	586	\$19,488	\$58,236	\$77,723	\$436,635	\$75,838	\$55,256	\$37,268	\$23,403	\$6,140	\$634,541	\$117,129	\$517,411	\$595,134
AVG PEPM					\$33.26	\$99.39	\$132.65	\$745.22	\$129.43	\$94.31	\$63.61	\$39.94	\$10.48	\$1,082.99	\$199.91	\$883.08	\$1,015.73
% Change	3.6%	-4.0%	2.9%	2.4%	3.6%	5.7%	5.2%	10.8%	-0.8%	-20.0%	45.4%	127.1%	-15.8%	8.9%	250.8%	-5.8%	-4.5%
2013 Totals	5,523	1,035	307	6,865	\$220,331	\$645,683	\$866,014	\$4,617,550	\$895,463	\$809,097	\$300,374	\$120,739	\$85,404	\$6,828,627	\$391,209	\$6,437,418	\$7,303,432
AVG Month	460	86	26	572	\$18,361	\$53,807	\$72,168	\$384,796	\$74,622	\$67,425	\$25,031	\$10,062	\$7,117	\$569,052	\$32,801	\$536,251	\$608,619
AVG PEPM					\$32.09	\$94.05	\$126.15	\$672.62	\$130.44	\$117.86	\$43.75	\$17.59	\$12.44	\$994.70	\$56.99	\$937.72	\$1,083.86
% Change	4.9%	-0.5%	24.8%	4.8%	3.1%	7.5%	6.3%	9.2%	-1.2%	17.4%	15.0%	-80.8%	-10.9%	0.3%	-15.5%	1.4%	2.0%
2012 Totals	5,264	1,040	246	6,550	\$203,848	\$573,324	\$777,172	\$4,034,389	\$864,732	\$657,610	\$249,209	\$600,197	\$91,432	\$6,497,568	\$441,604	\$6,055,964	\$6,833,136
AVG Month	439	87	21	546	\$16,987	\$47,777	\$64,764	\$336,199	\$72,061	\$54,801	\$20,767	\$50,016	\$7,619	\$541,464	\$36,800	\$504,664	\$569,428
AVG PEPM					\$31.12	\$87.53	\$118.65	\$615.84	\$132.02	\$100.40	\$38.05	\$91.63	\$13.96	\$992.00	\$67.42	\$924.57	\$1,043.23
% Change	1.3%	-12.5%	30.2%	-0.4%	1.7%	14.4%	10.8%	20.3%	25.2%	-47.4%	-28.6%			15.1%	113.7%	11.4%	11.3%
2011 Totals	5,196	1,189	189	6,574	\$200,467	\$501,267	\$701,734	\$3,354,937	\$690,853	\$1,249,993	\$349,273			\$5,645,056	\$206,677	\$5,438,379	\$6,140,113
AVG Month	433	99	16	548	\$16,706	\$41,772	\$58,478	\$279,578	\$57,571	\$104,166	\$29,106			\$470,421	\$17,223	\$453,198	\$511,676.11
AVG PEPM					\$30.61	\$76.53	\$107.13	\$512.20	\$105.47	\$190.84	\$53.32			\$861.84	\$31.55	\$830.29	\$937.42

2015 Plan Year					
Med/Rx Administration Fees:	SSL: \$150K Ded.; Paid; Med/Rx	2015 Budget Rates			
EE Only	\$16.40	EE Only	\$49.10	EE Only	\$595.60
EE + Spouse	\$34.38	EE + Spouse	\$118.65	EE + Spouse	\$1,292.42
EE + Child(ren)	\$37.65	EE + Child(ren)	\$106.76	EE + Child(ren)	\$1,258.14
Family	\$51.78	Family	\$176.32	Family	\$1,864.74

YTD 2015 - Plan Costs vs. Total Budget (EE & ER)		
	Total Budget	Total Plan Costs
Cigna		\$8,959,523
Kaiser		\$3,280,295
Dental		\$794,615
<b>Total</b>	<b>\$12,852,724</b>	<b>\$13,034,433</b>
Total Costs vs. Total Budget		101.4%

2015 YTD Budget with CareHere Clinic Costs		
CareHere Cost		\$469,720
<b>Total</b>	<b>\$12,852,724</b>	<b>\$13,504,153</b>
Total Costs vs. Total Budget		105.1%

# ABC Company



## Experience Summary - Wellness

2015 Plan Year						
	Enrollment	Claims				
	Wellness Enrollment	Wellness Medical	Wellness Rx	Total Wellness Med/Rx Claims	Claims > Specific Stop Loss	Total Wellness Net Paid Claims
Jan-15	484	\$1,697,538	\$100,432	\$1,797,970	\$1,170,850	\$627,120
Feb-15	485	\$378,991	\$114,272	\$493,263	\$57,252	\$436,011
Mar-15	484	\$365,076	\$84,161	\$449,237	\$656	\$448,581
Apr-15	489	\$652,570	\$106,876	\$759,446	\$184,718	\$574,728
May-15	489	\$395,564	\$88,362	\$483,926	\$57,248	\$426,678
Jun-15	490	\$525,499	\$70,369	\$595,868	\$57,382	\$538,486
Jul-15	488	\$531,712	\$118,762	\$650,474	\$113,003	\$537,471
Aug-15	492	\$306,971	\$107,746	\$414,717	\$33,040	\$381,677
Sep-15	494	\$402,057	\$132,274	\$534,331	\$96,044	\$438,287
Oct-15	490	\$542,606	\$120,002	\$662,608	\$3,427	\$659,181
Nov-15	490	\$245,428	\$111,323	\$356,751	\$18,546	\$338,205
Dec-15	493	\$434,061	\$105,398	\$539,458	\$61,681	\$477,777
2015 Totals	5,868	\$6,478,072	\$1,259,976	\$7,738,048	\$1,853,847	\$5,884,201
AVG Month	489	\$539,839	\$104,998	\$644,837	\$154,487	\$490,350
<b>AVG PEPM</b>		<b>\$1,103.97</b>	<b>\$214.72</b>	<b>\$1,318.69</b>	<b>\$315.92</b>	<b>\$1,002.76</b>
<b>% Change</b>	<b>2.6%</b>	<b>20.5%</b>	<b>35.0%</b>	<b>22.7%</b>		<b>20.9%</b>
2014 Totals	5,721	\$5,239,620	\$910,057	\$6,149,677	\$1,405,552	\$4,744,125
AVG Month	477	\$436,635	\$75,838	\$512,473	\$117,129	\$395,344
<b>AVG PEPM</b>		<b>\$915.86</b>	<b>\$159.07</b>	<b>\$1,074.93</b>	<b>\$245.68</b>	<b>\$829.25</b>
<b>% Change</b>	<b>3.6%</b>	<b>9.5%</b>	<b>-1.9%</b>	<b>7.7%</b>		<b>-10.6%</b>
2013 Totals	5,523	\$4,617,550	\$895,463	\$5,513,013	\$391,209	\$5,121,804
AVG Month	460	\$384,796	\$74,622	\$459,418	\$32,601	\$426,817
<b>AVG PEPM</b>		<b>\$836.06</b>	<b>\$162.13</b>	<b>\$998.19</b>	<b>\$70.83</b>	<b>\$927.36</b>



# ABC Company



## Experience Summary - Non-Wellness

2015 Plan Year						
	Enrollment	Claims				
	Non-Wellness Enrollment	Non-Wellness Medical	Non-Wellness Rx	Total Non-Wellness Med/Rx Claims	Claims > Specific Stop Loss	Total Non-Wellness Net Paid Claims
Jan-15	95	\$45,746	\$3,783	\$49,529	\$0	\$49,529
Feb-15	94	\$180,585	\$17,862	\$198,447	\$0	\$198,447
Mar-15	93	\$103,696	\$46,369	\$150,065	\$42,757	\$107,308
Apr-15	91	\$171,788	\$84,605	\$256,393	\$47,112	\$209,281
May-15	90	\$153,460	\$26,437	\$179,897	\$122,825	\$57,072
Jun-15	90	\$410,283	\$48,271	\$458,555	\$357,527	\$101,028
Jul-15	88	\$48,039	\$49,164	\$97,203	\$12,062	\$85,141
Aug-15	87	\$90,160	\$58,555	\$148,716	\$395	\$148,321
Sep-15	88	\$72,854	\$37,194	\$110,048	\$32,058	\$77,990
Oct-15	87	\$92,995	\$55,858	\$148,853	\$374	\$148,479
Nov-15	89	\$113,654	\$24,707	\$138,361	\$8,507	\$129,854
Dec-15	90	\$163,223	\$82,420	\$245,643	\$4,028	\$241,615
2015 Totals	1,082	\$1,646,485	\$535,224	\$2,181,709	\$627,645	\$1,554,064
AVG Month	90	\$137,207	\$44,602	\$181,809	\$52,304	\$129,505
<b>AVG PEPM</b>		<b>\$1,521.71</b>	<b>\$494.66</b>	<b>\$2,016.37</b>	<b>\$580.08</b>	<b>\$1,436.29</b>
<b>% Change</b>	<b>8.9%</b>	<b>128.1%</b>	<b>9.9%</b>	<b>80.5%</b>		<b>28.6%</b>
2014 Totals	994	\$663,075	\$447,213	\$1,110,288	\$0	\$1,110,288
AVG Month	83	\$55,256	\$37,268	\$92,524	\$0	\$92,524
<b>AVG PEPM</b>		<b>\$667.08</b>	<b>\$449.91</b>	<b>\$1,116.99</b>	<b>\$0.00</b>	<b>\$1,116.99</b>
<b>% Change</b>	<b>-4.0%</b>	<b>-14.7%</b>	<b>55.0%</b>	<b>4.2%</b>		<b>4.2%</b>
2013 Totals	1,035	\$809,097	\$300,374	\$1,109,471	\$0	\$1,109,471
AVG Month	86	\$67,425	\$25,031	\$92,456	\$0	\$92,456
<b>AVG PEPM</b>		<b>\$781.74</b>	<b>\$290.22</b>	<b>\$1,071.95</b>	<b>\$0.00</b>	<b>\$1,071.95</b>

\*Includes COBRA participants

# ABC Company



## Experience Summary - Kaiser Loss Ratio

2015 Plan Year						
	Enrollment	Premium	Claims			Loss Ratio**
			Medical	RX	Total	
Jan-15	284	\$282,109	\$171,835	\$32,023	\$203,858	72%
Feb-15	279	\$277,291	\$210,647	\$30,248	\$240,895	87%
Mar-15	278	\$276,316	\$166,468	\$28,896	\$195,364	71%
Apr-15	277	\$275,204	\$472,493	\$29,138	\$501,631	182%
May-15	275	\$273,701	\$195,998	\$28,008	\$224,006	82%
Jun-15	274	\$272,642	\$214,412	\$30,878	\$245,290	90%
Jul-15	274	\$271,001	\$213,686	\$27,588	\$241,274	89%
Aug-15	279	\$274,177	\$219,577	\$106,988	\$326,565	119%
Sep-15	280	\$274,124	\$230,730	\$27,386	\$258,116	94%
Oct-15	275	\$268,835	\$282,733	\$34,235	\$316,968	118%
Nov-15	275	\$267,448	\$180,081	\$27,563	\$207,643	78%
Dec-15	275	\$267,448	\$240,018	\$44,354	\$284,371	106%
2015 Totals	<b>3,325</b>	<b>\$3,280,295</b>	<b>\$2,798,677</b>	<b>\$447,304</b>	<b>\$3,245,981</b>	<b>99%</b>
AVG Month	<b>277</b>	<b>\$273,358</b>	<b>\$233,223</b>	<b>\$37,275</b>	<b>\$270,498</b>	
<b>AVG PEPM</b>		<b>\$986.55</b>	<b>\$841.71</b>	<b>\$134.53</b>	<b>\$976.24</b>	
<b>% Change</b>		<b>8.6%</b>	<b>11.6%</b>	<b>74.6%</b>	<b>17.5%</b>	
2014 Totals	<b>3,698</b>	<b>\$3,360,295</b>	<b>\$2,787,913</b>	<b>\$284,901</b>	<b>\$3,072,814</b>	<b>91%</b>
AVG Month	<b>308</b>	<b>\$280,025</b>	<b>\$232,326</b>	<b>\$23,742</b>	<b>\$256,068</b>	
<b>AVG PEPM</b>		<b>\$908.68</b>	<b>\$753.90</b>	<b>\$77.04</b>	<b>\$830.94</b>	
<b>% Change</b>		<b>-0.5%</b>	<b>4.4%</b>	<b>-1.4%</b>	<b>3.8%</b>	
2013 Totals	<b>3,698</b>	<b>\$3,359,449</b>	<b>\$2,583,464</b>	<b>\$274,063</b>	<b>\$2,857,527</b>	<b>85%</b>
AVG Month	<b>308</b>	<b>\$279,954</b>	<b>\$215,289</b>	<b>\$22,839</b>	<b>\$238,127</b>	
<b>AVG PEPM</b>		<b>\$908.45</b>	<b>\$698.61</b>	<b>\$74.11</b>	<b>\$772.72</b>	

2015 Premiums	
Employee Only	\$529.48
Employee + Spouse	\$1,085.39
Employee + Child(ren)	\$1,058.91
Family	\$1,530.21

# ABC Company



## Experience Summary - Retirees

2015 Plan Year						
	Enrollment	Claims				
	Retiree Enrollment	Retiree Medical	Retiree Rx	Total Retiree Med/Rx Claims	Claims > Specific Stop Loss	Total Retiree Net Paid Claims
Jan-15	24	\$20,596	\$7,782	\$28,378	\$0	\$28,378
Feb-15	24	\$54,143	\$4,933	\$59,076	\$0	\$59,076
Mar-15	25	\$85,779	\$6,754	\$92,533	\$0	\$92,533
Apr-15	24	\$42,956	\$6,137	\$49,092	\$0	\$49,092
May-15	24	\$36,071	\$5,378	\$41,449	\$0	\$41,449
Jun-15	23	\$16,451	\$5,702	\$22,153	\$0	\$22,153
Jul-15	24	\$24,016	\$7,446	\$31,462	\$0	\$31,462
Aug-15	24	\$108,817	\$6,088	\$114,905	\$28,407	\$86,498
Sep-15	25	-\$3,107	\$6,389	\$3,283	\$34,933	-\$31,650
Oct-15	25	\$43,017	\$9,039	\$52,056	\$813	\$51,243
Nov-15	28	\$10,626	\$5,163	\$15,789	\$429	\$15,360
Dec-15	28	\$6,753	\$10,263	\$17,016	\$1,710	\$15,306
2015 Totals	298	\$446,118	\$81,073	\$527,191	\$66,292	\$460,899
AVG Month	25	\$37,176	\$6,756	\$43,933	\$5,524	\$38,408
<b>AVG PEPM</b>		<b>\$1,497.04</b>	<b>\$272.06</b>	<b>\$1,769.10</b>	<b>\$222.46</b>	<b>\$1,546.64</b>
<b>% Change</b>	<b>-5.7%</b>	<b>68.4%</b>	<b>16.7%</b>	<b>57.7%</b>		<b>37.9%</b>
2014 Totals	316	\$280,840	\$73,681	\$354,522	\$0	\$354,522
AVG Month	26	\$23,403	\$6,140	\$29,543	\$0	\$29,543
<b>AVG PEPM</b>		<b>\$888.74</b>	<b>\$233.17</b>	<b>\$1,121.90</b>	<b>\$0.00</b>	<b>\$1,121.90</b>
<b>% Change</b>	<b>2.9%</b>	<b>126.0%</b>	<b>-16.2%</b>	<b>67.1%</b>		<b>67.1%</b>
2013 Totals	307	\$120,739	\$85,404	\$206,144	\$0	\$206,144
AVG Month	26	\$10,062	\$7,117	\$17,179	\$0	\$17,179
<b>AVG PEPM</b>		<b>\$393.29</b>	<b>\$278.19</b>	<b>\$671.48</b>	<b>\$0.00</b>	<b>\$671.48</b>



# ABC Company



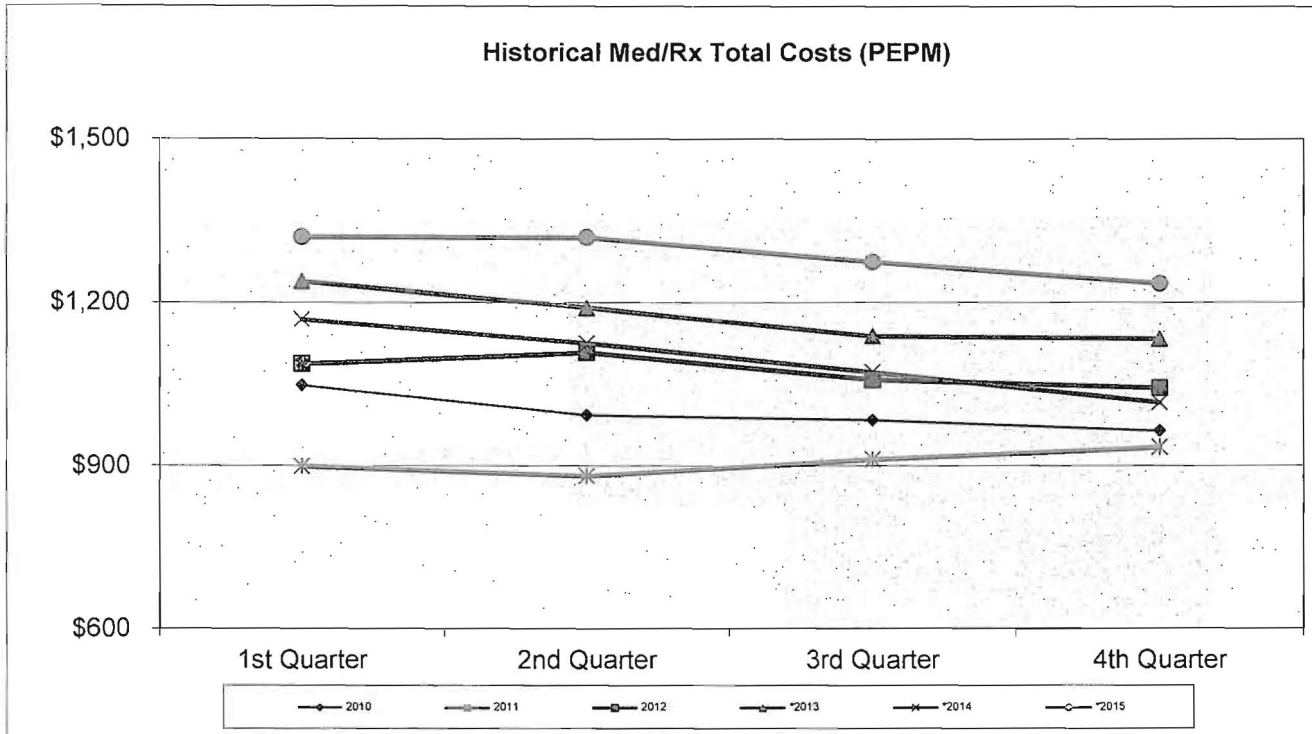
## Large Claim Analysis - Claims over \$75,000

Specific Level: \$150,000		2015 Plan Year		Change from Prior Month
Coverage Includes: Medical and Rx		Amount Paid	Over Specific	
Relationship	Condition			
EE - Wellness	Diseases of Lung / Acute Renal Failure / Heart Failure	\$1,379,798	\$1,229,798	\$0
CH - Non Wellness	Heart Transplant	\$777,645	\$627,645	\$4,028
CH - Wellness	Epilepsy / Parry Romberg Syndrome	\$646,052	\$496,052	\$61,432
EE - Retiree	Awaiting Diagnosis	\$216,292	\$66,292	\$1,710
EE - Wellness	Breast Cancer	\$193,817	\$43,817	\$50
SP - Wellness	Spinal Fusion / Heart Failure	\$193,046	\$43,046	\$0
CH - Wellness	Awaiting Diagnosis	\$191,134	\$41,134	\$199
EE - Non Wellness	Awaiting Diagnosis	\$136,866	\$0	\$136,866
EE - Non Wellness	Awaiting Diagnosis	\$132,803	\$0	\$31,468
EE - Wellness	Awaiting Diagnosis	\$130,514	\$0	\$24,918
EE - Non Wellness	Awaiting Diagnosis	\$124,159	\$0	\$20,456
CH - Wellness	Pregnancy Complication	\$105,982	\$0	\$0
EE - Retiree	Inpatient Psych Disorders	\$105,956	\$0	\$624
EE - Non Wellness	Awaiting Diagnosis	\$100,997	\$0	\$23,267
SP - Wellness	Awaiting Diagnosis	\$84,918	\$0	\$613
SP - Wellness	Awaiting Diagnosis	\$82,921	\$0	\$82,921
SP - Non Wellness	Awaiting Diagnosis	\$82,363	\$0	\$4,100
EE - Wellness	Awaiting Diagnosis	\$81,806	\$0	\$5,838
<b>Total Large Claims</b>		<b>\$4,767,070</b>	<b>\$2,547,785</b>	<b>\$398,489</b>
<b>Total Medical &amp; Rx Claims Paid</b>		<b>\$10,446,949</b>		
<b>Percentage of Medical &amp; Rx Claims Paid</b>		<b>46%</b>		

# ABC Company



## Historical Costs - Medical/Rx



Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Change
2010	\$ 1,048.00	\$ 992.75	\$ 983.44	\$ 963.80	
2011	\$ 899.70	\$ 882.19	\$ 912.06	\$ 934.00	-3.1%
2012	\$ 1,087.23	\$ 1,108.32	\$ 1,058.29	\$ 1,043.23	11.7%
*2013	\$ 1,239.13	\$ 1,191.79	\$ 1,138.00	\$ 1,132.81	8.6%
*2014	\$ 1,169.48	\$ 1,125.38	\$ 1,072.07	\$ 1,015.73	-10.3%
*2015	\$ 1,321.20	\$ 1,321.03	\$ 1,275.51	\$ 1,236.14	21.7%

- All yearly data illustrated on a Plan Year basis (1/1 - 12/31)
- Quarterly data is cumulative over the course of the year
- Includes Medical / Rx / Fixed Costs
- Accounts for any plan changes year to year

\* Includes CareHere Cost

Average Trend Per Year (2010-2014):	1.7%
Average Trend Per Year (2010-2015):	5.7%

# ABC Company



## Dental Financials

2015 Plan Year					
	Total Enrollment	Admin	Claims	Total Plan Cost	Dental Budget
Jan-15	863	\$3,728	\$73,716	\$77,444	\$71,761
Feb-15	858	\$3,707	\$62,876	\$66,583	\$71,644
Mar-15	855	\$3,694	\$67,296	\$70,990	\$71,394
Apr-15	857	\$3,702	\$64,970	\$68,672	\$71,577
May-15	849	\$3,668	\$60,911	\$64,579	\$71,187
Jun-15	853	\$3,685	\$53,503	\$57,188	\$71,480
Jul-15	850	\$3,672	\$58,986	\$62,658	\$71,169
Aug-15	858	\$3,707	\$68,795	\$72,501	\$71,503
Sep-15	862	\$3,724	\$62,464	\$66,188	\$71,767
Oct-15	851	\$3,676	\$62,465	\$66,141	\$71,091
Nov-15	854	\$3,689	\$42,507	\$46,196	\$71,131
Dec-15	858	\$3,707	\$71,769	\$75,476	\$66,148
2015 Totals	10268	\$44,358	\$750,257	\$794,615	\$851,852
AVG Month	856	\$3,696	\$62,521	\$66,218	\$70,988
<b>AVG PEPM</b>		<b>\$4.32</b>	<b>\$73.07</b>	<b>\$77.39</b>	<b>\$82.96</b>
<b>% Change</b>	0.1%	0.0%	0.4%	0.3%	
2014 Totals	10,258	\$44,315	\$746,888	\$791,203	\$840,495
AVG Month	855	\$3,693	\$62,241	\$65,934	\$70,041
<b>AVG PEPM</b>		<b>\$4.32</b>	<b>\$72.81</b>	<b>\$77.13</b>	<b>\$81.94</b>
<b>% Change</b>	-4.1%	2.6%	6.9%	6.7%	
2013 Totals	10,700	\$45,062	\$728,747	\$773,809	
AVG Month	892	\$3,755	\$60,729	\$64,484	
<b>AVG PEPM</b>		<b>\$4.21</b>	<b>\$68.11</b>	<b>\$72.32</b>	

<b>2015 ASO Fees</b>	\$4.32
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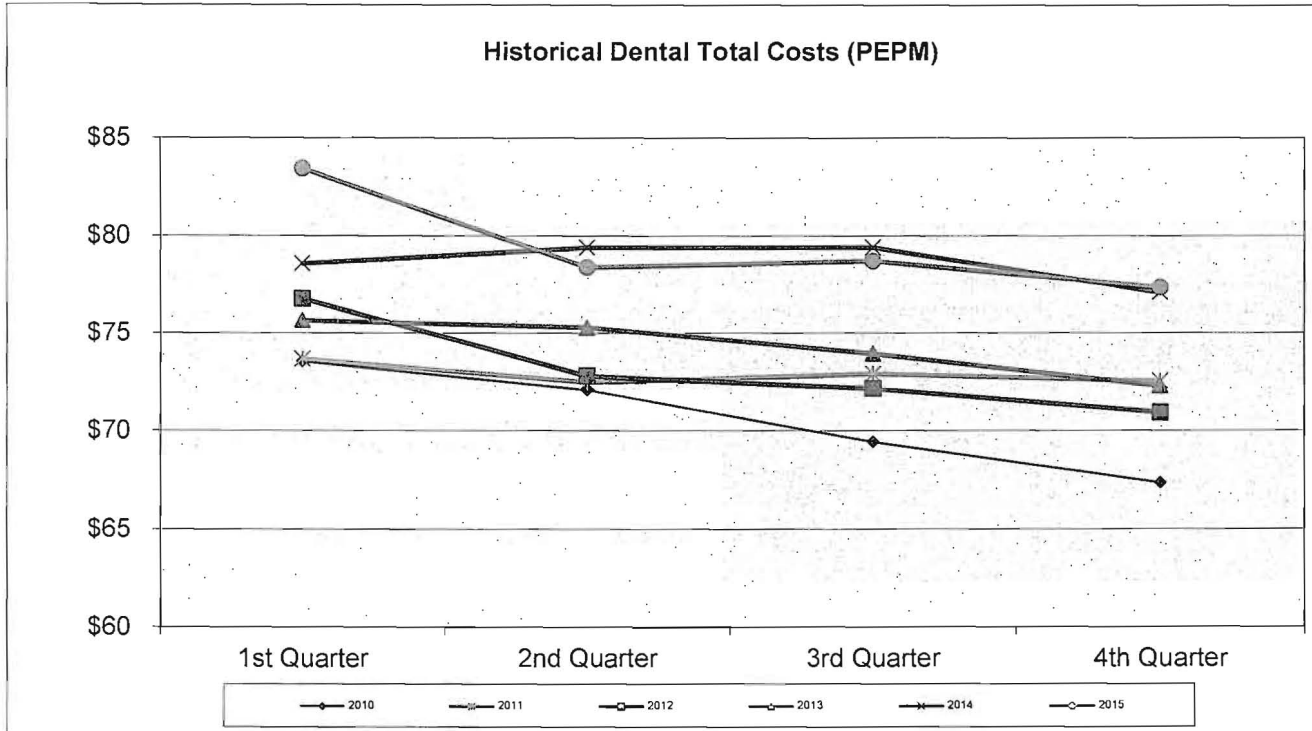
2015 Budget Rates	
	Dental
EE Only	\$42.69
EE + Spouse	\$81.54
EE + Child(ren)	\$89.22
Family	\$126.37

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Data presented is gathered from various sources and is unaudited. Data is for comparison and plan cost estimation purposes only.



## Historical Costs - Dental



Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Change
2010	\$ 73.56	\$ 72.11	\$ 69.45	\$ 67.37	
2011	\$ 73.69	\$ 72.52	\$ 72.94	\$ 72.55	7.7%
2012	\$ 76.81	\$ 72.84	\$ 72.18	\$ 70.96	-2.2%
2013	\$ 75.70	\$ 75.33	\$ 73.97	\$ 72.32	1.9%
2014	\$ 78.61	\$ 79.44	\$ 79.43	\$ 77.13	6.7%
2015	\$ 83.47	\$ 78.43	\$ 78.75	\$ 77.39	0.3%

- All yearly data illustrated on a Plan Year basis (1/1 - 12/31)
- Quarterly data is cumulative over the course of the year
- Includes Dental Claims/Fixed Costs
- Accounts for any plan changes year to year

Average Trend Per Year (2010-2014):	3.5%
Average Trend Per Year (2010-2015):	2.9%

# ABC Company



## 2015 Medical & Rx Cost Projection

Projection Period - to December 31, 2015

CIGNA ONLY

Experience Period  
 Medical & Rx Claims  
 Stop-Loss Claim Adjustment  
 Medical Claims Less Stop-Loss Claims  
 Benefit Adjustment  
 Network Discount Adjustment  
 Adjusted Medical Claims  
 Membership  
 Projected PEPM Claim Cost  
 7.0% Annual Trend  
**Projected Medical & Rx PEPM**

MEDICAL & PHARMACY	
PEPM Projection	PEPM Projection
January 2014 - December 2014	January 2015 - December 2015
\$7,614,487	\$10,446,949
(\$1,405,552)	(\$2,547,784)
\$6,208,935	\$7,899,165
1,000	1,000
1,000	1,000
\$6,208,935	\$7,899,165
7,007	7,204
\$886.10	\$1,096.50
1.0700	1.0000
<b>\$948.13</b>	<b>\$1,096.50</b>

Period Weighting  
 Adjusted Membership  
 Member-Adjusted Period Weighting  
**2015 Total PEPM Claims Projection**  
**2015 Total PEPM Fixed Costs** (Not Including CareHere)

PERIOD WEIGHTING	
30%	70%
2,102	5,043
29.4%	70.6%
	\$1,052.85
	\$146.30

Average Current Plan Year Membership  
 2015 Projected Blended Medical/Rx Claims  
 2015 Projected Total Fixed Costs  
 2015 Projected Total Costs (Claims + Fixed)  
**2015 Total PEPM Cost Projection**

	604
	\$7,631,032
	\$1,060,358
	\$8,691,390
	<b>\$1,199.14</b>

2015 YTD Med/Rx Total Cost  
 Projected Change in Total Cost

	<b>\$1,236.14</b>
	<b>-3.0%</b>

# ABC Company



## 2016 Medical & Rx Cost Projection

Projection Period - to December 31, 2016

CIGNA ONLY

Experience Period

Medical & Rx Claims

Stop-Loss Claim Adjustment

Medical Claims Less Stop-Loss Claims

Benefit Adjustment

Network Discount Adjustment

Adjusted Medical Claims

Membership

Projected PEPM Claim Cost

7% Annual Trend

**Projected Medical & Rx PEPM**

MEDICAL & PHARMACY	
PEPM Projection	PEPM Projection
January 2014 - December 2014	January 2015 - December 2015
\$7,614,487	\$10,446,949
(\$1,405,552)	(\$2,547,784)
\$6,208,935	\$7,899,165
1,000	1,000
1,000	1,000
\$6,208,935	\$7,899,165
7,007	7,204
\$886.10	\$1,096.50
1.1449	1.0700
<b>\$1,014.50</b>	<b>\$1,173.25</b>

Period Weighting

Adjusted Membership

Member-Adjusted Period Weighting

**2016 Total PEPM Claims Projection**

**2016 Total PEPM Fixed Costs +34.5% Stoploss, 2% Admin**

Does NOT include CareHere

Average Current Plan Year Membership

2016 Projected Blended Medical/Rx Claims

2016 Projected Total Fixed Costs

2016 Projected Total Costs (Claims + Fixed)

**2016 Total PEPM Cost Projection**

PERIOD WEIGHTING	
30%	70%
2,102	5,043
29.4%	70.6%
	\$1,126.55
	\$185.59

	604
	\$8,165,204
	\$1,345,158
	\$9,510,362
	<b>\$1,312.14</b>

2015 YTD Med/Rx Total Cost

Projected Change in Total Cost

	\$1,236.14
	<b>6.1%</b>



# ABC Company



## 2015 Dental Cost Projection

Projection Period - to December 31, 2015

Experience Period  
 Dental Claims  
 Benefit Adjustment  
 Network Discount Adjustment  
 Adjusted Medical Claims  
 Membership  
 Projected PEPM Claim Cost  
 3.2% Annual Trend  
**Projected Dental Claims PEPM**

Dental	
PEPM Projection	PEPM Projection
January 2014 - December 2014	January 2015 - December 2015
\$746,888	\$750,257
1,000	1,000
1,000	1,000
\$746,888	\$750,257
10,330	10,265
\$72.30	\$73.09
1.0320	1.0000
<b>\$74.62</b>	<b>\$73.09</b>

Period Weighting  
 Adjusted Membership  
 Member-Adjusted Period Weighting  
**2015 Total PEPM Claims Projection**  
**2015 Total PEPM Fixed Costs**

PERIOD WEIGHTING	
30%	70%
3,099	7,186
30.1%	69.9%
	\$73.55
	\$4.32

Average Current Plan Year Membership  
 2015 Projected Blended Dental Claims  
 2015 Projected Total Fixed Costs  
 2015 Projected Total Costs (Claims + Fixed)  
**2015 Total PEPM Cost Projection**

	856
	\$755,203
	\$44,358
	\$799,561
	<b>\$77.87</b>

2015 YTD Med/Rx Total Cost  
 Projected Change in Total Cost

	<b>\$77.39</b>
	<b>0.6%</b>

2015 Budget  
 Projected Change to 2015 Budget

	<b>\$82.96</b>
	<b>-6.1%</b>

# ABC Company



## 2016 Dental Cost Projection

Projection Period - to December 31, 2016

Experience Period  
 Dental Claims  
 Benefit Adjustment  
 Network Discount Adjustment  
 Adjusted Medical Claims  
 Membership  
 Projected PEPM Claim Cost  
 3.2% Annual Trend  
**Projected Dental Claims PEPM**

Dental	
PEPM Projection	PEPM Projection
January 2014 - December 2014	January 2015 - December 2015
\$746,888	\$750,257
1,000	1,000
1,000	1,000
\$746,888	\$750,257
10,330	10,265
\$72.30	\$73.09
1.0650	1.0320
<b>\$77.00</b>	<b>\$75.43</b>

Period Weighting  
 Adjusted Membership  
 Member-Adjusted Period Weighting  
**2016 Total PEPM Claims Projection**  
**2016 Total PEPM Fixed Costs**

PERIOD WEIGHTING	
30%	70%
3,099	7,186
30.1%	69.9%
\$75.90	
\$4.32	

Average Current Plan Year Membership  
 2016 Projected Blended Dental Claims  
 2016 Projected Total Fixed Costs  
 2016 Projected Total Costs (Claims + Fixed)  
**2016 Total PEPM Cost Projection**

856
\$779,370
\$44,358
\$823,727
<b>\$80.22</b>

2015 YTD Med/Rx Total Cost  
 Projected Change in Total Cost

<b>\$77.39</b>
<b>3.7%</b>

2015 Budget  
 Projected Change to 2015 Budget

<b>\$82.96</b>
<b>-3.3%</b>

CareHere Invoicing  
2015

	EE Utilization		Staffing Costs / Medtax PreEmployment	Office Supplies/Expenses	Medical Supplies / Other	Rx Charges	Lab Charges	Comcast	Security	Janitorial Services	Monthly Rent	Grand Total
	Count	Amount										
Jan-15	597	\$11,940.00	\$17,209.36	\$294.12	\$260.43	\$5,732.22	\$1,080.84	\$223.93	\$40.00	\$425.92	\$1,666.67	\$38,873.49
Feb-15	602	\$12,040.00	\$16,383.73	\$73.61	\$781.82	\$2,446.88	\$2,318.90	\$223.93	\$40.00	\$425.92	\$1,666.67	\$36,401.46
Mar-15	598	\$11,960.00	\$16,105.91	-\$246.56	\$285.40	\$2,296.64	\$3,229.96	\$223.93	\$40.00	\$425.92	\$1,666.67	\$35,987.87
Apr-15	601	\$12,020.00	\$16,558.75	\$28.99	\$444.94	\$4,337.23	\$1,647.15	\$223.93	\$40.00	\$504.70	\$1,666.67	\$37,472.36
May-15	600	\$12,000.00	\$15,959.61	\$166.30	\$395.99	\$3,326.34	\$2,576.32	\$223.93	\$40.00	\$504.70	\$1,666.67	\$36,859.86
Jun-15	600	\$12,000.00	\$16,119.22	\$393.67	\$36.00	\$5,481.18	\$1,868.91	\$223.93	\$40.00	\$504.70	\$1,666.67	\$38,334.28
Jul-15	600	\$12,000.00	\$18,313.03	\$85.99	\$835.22	\$5,143.85	\$2,896.35	\$223.93	\$40.00	\$504.70	\$1,666.67	\$41,709.74
Aug-15	598	\$11,960.00	\$20,234.46	\$212.90	\$1,294.52	\$3,791.34	\$2,688.50	\$223.93	\$40.00	\$504.70	\$1,666.67	\$42,617.02
Sep-15	605	\$12,100.00	\$15,706.24	\$279.47	\$132.62	\$5,050.75	\$2,161.93	\$223.93	\$40.00	\$504.70	\$1,666.67	\$37,866.31
Oct-15	600	\$12,000.00	\$21,732.27	\$66.59	\$1,685.33	\$4,048.01	\$2,765.80	\$223.93	\$40.00	\$504.70	\$1,666.67	\$44,733.30
Nov-15	601	\$12,020.00	\$19,099.52	\$373.67	\$376.96	\$1,759.16	\$4,891.67	\$223.93	\$40.00	\$504.70	\$1,666.67	\$40,956.28
Dec-15	630	\$12,600.00	\$16,392.37	\$616.04	\$389.69	\$3,509.85	\$1,964.74	\$223.93	\$40.00	\$504.70	\$1,666.67	\$37,907.99
<b>Totals</b>	<b>7232</b>	<b>\$144,640.00</b>	<b>\$209,814.47</b>	<b>\$2,344.79</b>	<b>\$6,918.92</b>	<b>\$46,923.45</b>	<b>\$30,091.07</b>	<b>\$2,687.16</b>	<b>\$480.00</b>	<b>\$5,820.06</b>	<b>\$20,000.04</b>	<b>\$469,719.96</b>

Staffing Costs →	Includes Staffing Costs and All Medical
Office Supplies/Exp →	Includes A-Z, DSI, UnityFax, CLIA, and misc CareHere
Medical Supplies →	PSS
Rx Charges →	Pedigree
Lab Charges →	LabCorp

Grand Total \$469,719.96

All included in one monthly invoice + Waxie Sanitary Supply (Office Supplies)

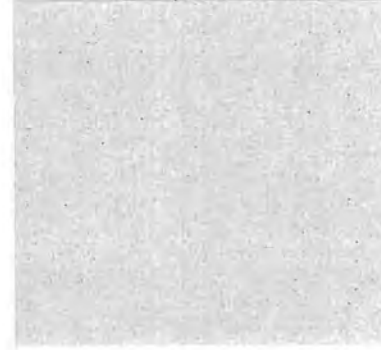
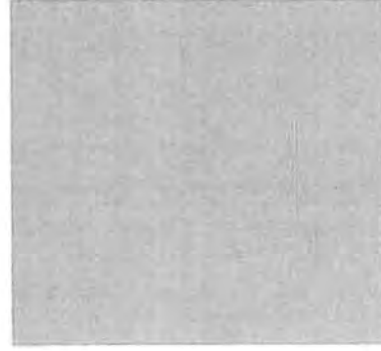
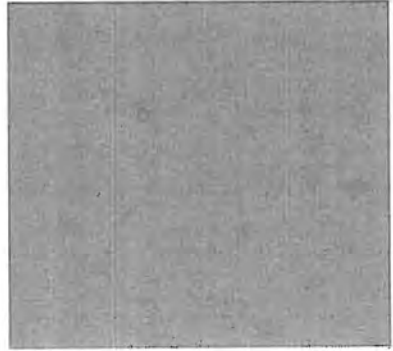
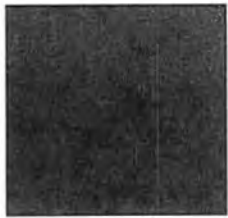


# ABC Company

## 2015 Enrollment

2015 Plan Year Wellness PPO Plan Enrollment						2015 Plan Year Non-Wellness PPO Plan Enrollment						2015 Plan Year Retiree Enrollment						2015 Plan Year Kaiser					
	EE	EE + Sp	EE + Ch	EE + Fam	TOTAL		EE	EE + Sp	EE + Ch	EE + Fam	TOTAL		EE	EE + Sp	EE + Ch	EE + Fam	TOTAL		EE	EE + Sp	EE + Ch	EE + Fam	TOTAL
Jan-15	167	79	75	163	484	Jan-15	33	17	12	33	95	Jan-15	14	9	0	1	24	Jan-15	108	50	47	79	284
Feb-15	164	79	76	166	485	Feb-15	32	16	14	32	94	Feb-15	14	9	0	1	24	Feb-15	107	48	45	79	279
Mar-15	164	78	76	166	484	Mar-15	32	15	14	32	93	Mar-15	15	9	0	1	25	Mar-15	106	49	45	78	278
Apr-15	165	77	79	168	489	Apr-15	33	15	11	32	91	Apr-15	15	8	0	1	24	Apr-15	106	47	46	78	277
May-15	163	78	78	170	489	May-15	32	14	12	32	90	May-15	15	8	0	1	24	May-15	104	48	46	77	275
Jun-15	165	78	77	170	490	Jun-15	31	15	12	32	90	Jun-15	15	7	0	1	23	Jun-15	104	48	45	77	274
Jul-15	162	80	76	170	488	Jul-15	30	15	12	31	88	Jul-15	15	7	1	1	24	Jul-15	107	46	44	77	274
Aug-15	166	81	74	171	492	Aug-15	30	15	12	30	87	Aug-15	16	7	0	1	24	Aug-15	111	46	45	77	279
Sep-15	165	83	76	170	494	Sep-15	31	15	12	30	88	Sep-15	16	7	1	1	25	Sep-15	113	44	46	77	280
Oct-15	158	85	76	171	490	Oct-15	31	14	12	30	87	Oct-15	16	7	1	1	25	Oct-15	112	42	45	76	275
Nov-15	159	87	75	169	490	Nov-15	32	14	12	31	89	Nov-15	17	8	1	2	28	Nov-15	112	43	47	73	275
Dec-15	162	87	74	170	493	Dec-15	32	14	12	32	90	Dec-15	17	8	1	2	28	Dec-15	112	43	47	73	275
TOTALS	1,960	972	912	2,024	5,868	TOTALS	379	179	147	377	1,082	TOTALS	185	94	5	14	298	TOTALS	1,302	554	548	921	3,325
AVG Month	163	81	76	169	489	AVG Month	32	15	12	31	90	AVG Month	15	8	0	1	25	AVG Month	109	46	46	77	277
% Change	-2.9%	18.2%	-0.3%	3.0%		% Change	32.1%	-12.7%	3.5%	4.7%		% Change	-10.2%	13.3%	#DIV/0!	-48.1%		% Change	-2.3%	-10.6%	-5.4%	-9.5%	
Budget	\$595.60	\$1,292.42	\$1,258.14	\$1,864.74		Budget	\$595.60	\$1,292.42	\$1,258.14	\$1,864.74		Budget	\$595.60	\$1,292.42	\$1,258.14	\$1,864.74		Budget	\$595.60	\$1,292.42	\$1,258.14	\$1,864.74	
Total				\$7,345,265.68		Total				\$1,345,029.14		Total				\$264,070.54		Total				\$3,898,358.14	
																		Estimated Annual Total				\$22,033,240.29	

\* Retiree Enrollment to include CO, TX, WA, and OH



Hays Companies of Denver  
1125 17th Street, Suite 400  
Denver, CO 80202  
720-279-3400

All. Together. Certain.