

ORIGINAL

**Response to Request for Proposal for
Consulting Services for Employee Benefits Plan - Contract #CY-COM-0023-21 for the**

County of Somerset

Presented by:

Joseph DiBella

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Conner Strong & Buckelew Companies, LLC

National Headquarters
TRIAD 1828 CENTRE
2 Cooper Street
Camden, NJ 08102

Wednesday, January 20, 2021 at 3:00 PM

As you are aware, information relating to our service platform, model and compensation/cost is proprietary and the release of that information to competitors of Conner Strong & Buckelew may result in those competitors gaining an unfair advantage. Therefore, we are providing the information marked "CONFIDENTIAL" and request that it be limited to your review only without disclosure to our competitors or outside parties.



INSURANCE | RISK MANAGEMENT | EMPLOYEE BENEFITS

JOSEPH M. DIBELLA

Managing Director

Executive Vice President

Employee Benefits - Producers

P 856-552-4618

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National Headquarters

TRIAD1828 CENTRE

2 Cooper Street | Camden, NJ 08102

Mailing Address

PO Box 99106 | Camden, NJ 08101

connerstrong.com

January 19, 2021

Melissa A. Kosensky, Purchasing Agent
County of Somerset
County Administration Building, 3rd Floor
20 Grove Street
Somerville, NJ 08876

Dear Ms. Kosensky:

Re: **RFP Response for Consulting Services for Employee Benefits Plan - Contract # CY-COM-0023-21**

On behalf of the firm, we are pleased to submit our proposal in response to the County of Somerset's RFP for the employee benefits advisory and consulting services. Our proposal complies with and includes all of the information requested of us. We appreciate the opportunity to compete for your business and believe that we have prepared a thorough set of responses that comply with the guidelines and parameters you have established. We are confirming that all elements of the RFP have been read and understood and that we take no exceptions to the materials provided.

As one of the largest insurance consultancy and brokerage firms in the country, we uniquely understand the challenges facing employers today; especially Somerset County that have very unique challenges. As a privately-held firm, we have substantial resources without the additional burdens and bureaucracy that many of our competitors have to contend with. Additionally, unlike other firms we combine strategic consulting services with creative administrative delivery which provides for continuous, comprehensive, and vertically-integrated benefits and insurance support. From initial plan design development to program implementation, to collective bargaining assistance, Conner Strong & Buckelew provides services that are cost-effective and maximize the array of talent and resources we have to offer.

In reviewing the selection and evaluation criteria outlined in your RFP, we feel we are perfectly positioned to work with Somerset County. We have an extensive public entity practice and manage several large governmental and higher educational accounts across the region. We are experts in the nuisances facing public entities and authorities like budgeting constraints, collective bargaining and other special disciplines affiliated with employee benefits for organizations like Somerset County.

We look forward to the next steps in the selection process and hope to have the opportunity to meet with you to review our capabilities and value proposition in further detail. If you need any additional information, please contact us personally. Thank you.

Sincerely,

Joseph M. DiBella

Joseph M. DiBella
Executive Vice President | Managing Director

Diane DiFrancesco

Diane DiFrancesco
Business Development Executive

Enclosures



INSURANCE | RISK MANAGEMENT | EMPLOYEE BENEFITS



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I. Scope of Work – Consultant Requirements

Somerset County is a member of the Southern Skyland Regional Health Insurance Fund (FUND). The selected firm must have a demonstrated record of serving as a consultant to New Jersey governmental entities on insurance coverage issues and strategies, including the use of health insurance funds, self-funded insurance plans and fully-funded insurance plans; knowledge of federal laws and statutes, including New Jersey law as it affects procurement and management of such plans; healthcare cost containment strategies in a unionized environment, Medicare Retiree Drug Subsidy applications, Medicare Advantage and EGWP products and actuarial assessments.

Conner Strong & Buckelew Companies, LLC is pleased to submit the following response to the RFP for the County of Somerset. We believe we are uniquely qualified to deliver all of the strategic, implementation, administration and communication requirements identified in your RFP document.

Conner Strong & Buckelew is among the largest benefits and consultancy firms in the region and nationally. Our size reflects our overall experience and success, and the extensive professional resources and infrastructure we have to support our book of business. It also gives us tremendous working relationships and negotiating leverage with major carriers, which we will exercise on behalf of Somerset County. We combine the highest level of consulting expertise with an approach to account management that is hands-on, proactive, and customer centric. No one in the industry can match the knowledge, experience, and breadth of support we provide. Plus, note the following additional features that differentiate Conner Strong & Buckelew:

- Within our client base of hundreds of large employers, we specialize in serving customers whose size and health insurance challenges are similar to those of Somerset County. This includes a significant portfolio of clients in the public sector.
- Many of our benefits clients include organizations similar to Somerset County. This gives Conner Strong & Buckelew the added advantage of having extensive knowledge of your industry and the challenges and opportunities you contend with in benefits.
- While a national firm, Conner Strong & Buckelew knows this region well: we are experts in the markets where Somerset County operates and also have depth and experience with the regional and national markets as well.

Other important highlights of our service offerings include the following:

- **Financial Expertise** – One of our key services is financial management. A Data Analytics Associate is assigned to each client and included with this service. Their expertise is used to address many of the key issues in the benefits marketing and negotiation process, such as evaluating all financial proposals from an underwriting perspective, helping confirm accuracy and consistency with industry standards, providing critical support in carrier negotiations and consultation on alternative funding arrangements and plan designs.





- **Analytical Tools** – We are committed to stabilizing and, where practical, reducing the cost of health care through a rigorous, proven program of claims analysis and management. This initiative is critical for the County. For a group of your size, claims experience will continue to drive costs, regardless of the program's funding status. In managing the plan, we will also use proprietary tools that shall help better examine and evaluate results and assist in making data driven decisions. These tools may include BeneView, our claims data warehouse and BeneFuture, our benefit modeling software.
- **Health and Wellness Advisory** – An important part of our claims management program is the implementation of Health and Wellness strategies within your population using our unique and proprietary BeneFITSM tools and resources. These strategies can improve attendance, job performance and quality of life, even as they lower the frequency and severity of claims. We will work to create comprehensive programs designed to drive more productive and health conscious behaviors within the population, with an eye towards more efficiently managing chronic condition states.
- **Best-in-Class Member Services** – We offer our unique high-touch Member Advocacy program that will provide Somerset County and its participants and their dependents with personalized, one-on-one assistance to help resolve elevated and complex benefit issues.
- **Web-Based Tools and Services** – Aside from traditional enrollment-based platforms, we build a custom benefits website for all key clients, BenePortalSM, that serves as an online hub for all health and benefit plan information for your participants and their dependents. Customized per individual client, BenePortalSM is an interactive resource that can be synchronized with existing web tools or operate on a stand-alone basis as "home base" for automated benefits delivery.
- **Compliance, Audit, and Regulatory Services** – Our attorney consultant and compliance team provide proactive consultation and support services on everything from the Affordable Care Act, to day-to-day support with regulatory filings and inquiries.

Conner Strong & Buckelew is pleased to have an opportunity to participate in this selection process and compete for your business. If selected to represent the County, we shall apply the best, most recent and innovative techniques in the industry to meet and exceed all of your expectations for effective plan management. We will make a difference that can be measured not only financially, but also in terms of member satisfaction for Somerset County, its participants and their family members.

Benefits Consultant shall:

- a. Be licensed as an agent in the State of New Jersey and provide proof of license with the proposal.

Confirmed. Please see Exhibits Section for copy of license.

- b. Have a minimum of fifteen (15) years of experience providing insurance brokerage and consulting services for government agencies





Confirmed.

- c. Be licensed by the State of New Jersey for all lines of coverage required in the area of employee benefits and shall maintain such licenses for the entire term of the Contract and provide proof of license with the proposal

Confirmed.

- d. Have fifteen (15) years of experience working with self-insured health insurance plans

Confirmed.

- e. Have fifteen (15) years of experience providing services as described in this RFP

Confirmed.

- f. Maintain sufficient insurance to protect to protect the County against all liability claims arising from the services provided pursuant to this RFP. The insurance coverage will be subject to approval for adequacy of protection and certificates of such insurance shall be provided upon demand.

Confirmed. Conner Strong & Buckelew will provide a Certificate Insurance upon request if selected.





II. Scope of Work – Consultant Requirements

Benefits Consultant shall:

- a. Assist with procuring service providers, third party administrators and/or insurers for benefits outside of the FUND; which could include, dental insurance, vision care discount plans, employee assistance program s (currently a separate RFP conducted by the owner), flexible spending accounts, supplemental personal insurance programs, and other health or welfare benefit programs upon request.

Confirmed.

- b. Review the County's current cost of benefit plans against potential alternative plans by modeling historical claim experience. Compare these costs to market trends and make recommendations for future cost containment, whether services should be added or altered, while maintaining existing level of benefits, and other suggestions on how to provide incentives to covered persons to more efficiently utilize available benefits.

Confirmed.

- c. Review of the entity's assessments and assist in preparing the entity's health insurance budget.

Confirmed.

- d. Explanation of coverage that is provided by the FUND and assistance to the entity in selecting proper coverage.

Confirmed.

- e. Provide technical support and guidance in relation to Retiree Drug Subsidy (RDS) applications and ancillary services.

Confirmed.

- f. Provide technical support and guidance in relation to GASB 45 and other post-employment benefit (OPEB) assessments.

Confirmed.

- g. Provide technical support and guidance in relation to the Patient Protection and Affordable Care Act (PPACA) to ensure compliance with current and future requirements.

Confirmed.





- h. Serve as a liaison between the owner, the FUND and benefit vendors and intervene, where necessary, for the owner's best interests.

Confirmed.

- i. Assistance to the entity in resolving and settling claims.

Confirmed.

- j. Provision of assistance in negotiating and communicating plan design changes for bargaining units and employees.

Confirmed.

- k. Assist the owner by consulting on the formation of the Scope of Work and related documentation for the procurement of necessary insurance coverage in accordance with the New Jersey Statutes pertaining to same; all activities subject to final approval by the owner.

Confirmed.

- l. Provide on-site benefits administration services to the owner's Human Resources Division for program/plan implementation, open enrollment coordination, coordination of voluntary benefit programs, issuance of retiree medical notices, account management duties for RDS and related assignments.

Confirmed.

- m. Available for consultation on an as-needed basis as required by the Human Resources Director, Chief Financial Officer or the County Administrator.

Confirmed.

- n. Serve as an active member of the owner's Wellness Committee and work to provide incentives to covered persons to more efficiently utilize available benefits.

Confirmed.

- o. Attendance at employee meetings as directed by the owner.

Confirmed.

- p. Attendance at FUND meetings monthly or as scheduled.





Confirmed.

- q. **Presentation of annual report to the owner on the FUND's performance and service.**

Confirmed.

- r. **Cooperation with the FUND, its executive director in furthering the efficiency and effectiveness of the FUND in the best interest of the County.**

Confirmed.





III. Proposal Requirements – Qualification Statement

A statement is to be provided by the respondent who will serve as the primary contractor. The statement shall set forth brief details of the firm's principal activities, the number of personnel in the firm and the firm's location. Please provide a list of three (3) clients for whom similar services have been provided.

Firm Name

Conner Strong & Buckelew

Address

Conner Strong & Buckelew

TRIAD 1828 CENTRE
2 Cooper Street, 18th Floor
PO Box 99106
Camden, NJ 08101
P: 856-552-4500

Contacts for this RFP

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Diane DiFrancesco
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ddifrancesco@connerstrong.com

Company history, organization and locations

Originally founded in 1959, Conner Strong & Buckelew is headquartered in Camden, New Jersey, with regional offices in New York, New Jersey, Pennsylvania, Delaware, Massachusetts, Georgia, and Florida. From 1996 through 2008 we were owned by Commerce Bancorp and operated under the trade name "Commerce Insurance Services." After Commerce Bancorp was acquired by TD Banknorth of Canada, our firm separated from that organization and again became a privately held company under our existing management team. Our name was officially changed to Conner Strong Companies, Inc. in July 2008. With the addition of our Chairman's name, we became Conner Strong & Buckelew Companies, Inc. in 2011. As of February 4, 2016, the official name of





our company changed from Conner Strong & Buckelew Companies, Inc. to Conner Strong & Buckelew Companies, LLC. The change from "Inc." to "LLC" was made as part of a corporate tax restructuring strategy and has no impact on our operations.

The firm specializes in all types of employee benefit consulting and brokerage functions including:

- Strategic Consulting (across all program areas)
- Medical Programs (design, consultation and management)
- Traditional Health and Consumer Driven Programs
- Health & Wellness Management
- Disease Management
- Dental Programs
- Pharmacy Plans
- Life Insurance
- Disability Plans
- Vision Plans
- Long-Term Care
- Cafeteria (Section 125) Plans
- Voluntary Benefits
- Lifestyle/Work and Family Related Coverages
- Executive Benefits
- Specialty Support Services, including:
 - Communications
 - Legal updates, plan review, and material preparation
 - Underwriting analysis
 - Audit services
 - Actuarial services
 - Data warehousing and analytics

In addition, through best-in-class partnerships, we have the ability to provide back office administrative services, which may include:

- Web-based eligibility
- Member and employer portal services
- COBRA administration
- Eligibility and record-keeping services

Our comprehensive service approach is hands-on, proactive, and customer centric, focusing on and integrating these five key areas:

- Strategic and Fiscal Advisory
- Plan Design and Data Analysis
- Employee Engagement and Communications
- Compliance and Audit
- Health and Wellness





The firm sits on nearly every national carrier's advisory board and is ranked among the top 35 firms size-wise in the nation.

Of the 400+ employees at Conner Strong & Buckelew, approximately 115 employees are dedicated to servicing our health insurance clients. Approximately 90% of our Employee Benefits Practice holds a current Life, Accident and Health license in their state of residence. In addition to other various state licenses, members of the firm also hold many of the designations listed below:

- CLU (Chartered Life Underwriter)
- RHU (Registered Health Underwriter)
- CPC (Certified Professional Coder)
- CBP (Certified Benefits Professional)
- FLMI (Fellow, Life Management Institute)
- MBA (Masters of Business Administration)
- LUTCF (Life Underwriting Training Council Fellow)
- CHC (Complimentary Health Care)
- CISRR (Certified Insurance Service Representative)
- S.P.H.R. (Senior Professional in Human Resources)
- MHA (Master of Health Administration)
- CEBS (Certified Employee Benefits Specialist)
- GBA (Group Benefits Associate)

Our subsidiary public entity management services company, PERMA manages both JIFs and HIFs. The HIF offers public entities access to high quality, pooled insurance programs with total customization and flexibility with the benefit of the economies of scale. However, we are agnostic to what solution is best for our clients. We showcase clients all available options, including the private markets, the state plans and HIFs. We are completely objective with our analysis and are not paid any additional compensation when a client uses the HIF over any other model.

Please provide a list of three (3) clients for whom similar services have been provided. Include the following in your response:

1. Name of government agency
2. Contact person's name, position, and current telephone number
3. Dates, cost and scope of service
4. Status and comments





Client	County of Burlington/Burlington County Insurance Commission
Contact Name	Edward Troy
Title	Treasurer
E-Mail	etroy@co.burlington.nj.us
Phone Number	609-265-5404
Scope of Service	Complete benefit advisory services
Client	Mercer County Special Services School District
Contact Name	Deborah Donnelly
Title	Business Administrator
E-Mail	ddonnelly@mcsssd.us
Phone Number	609-631-2103
Scope of Service	Complete benefit advisory services
Client	County of Camden
Contact Name	James Rhodes
Title	Deputy County Administrator
E-Mail	jrhodes@camdencounty.com
Phone Number	856-225-2130
Scope of Service	Complete benefit advisory services





IV. Proposal Requirements – Key Personnel Information

The respondent shall provide the identity and the professional credentials of the principals and other key personnel either working for the contractor and the areas of responsibilities.

As previously stated, the County of Somerset account will be serviced out of our Corporate Headquarters in Camden, New Jersey. Conner Strong & Buckelew suggests the following account team continue to service Somerset County's account. The professional profiles and credentials of the proposed team are included in the Exhibits section of the response:

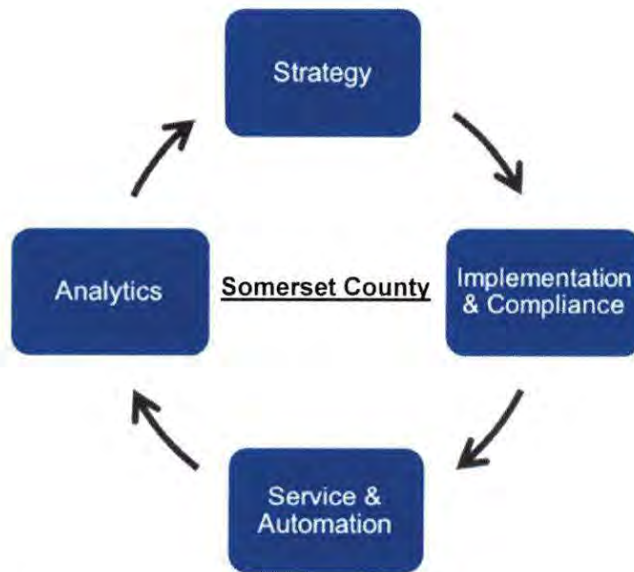
Name	Account Role	Industry Experience
Joseph DiBella	Managing Director/Executive Vice President Employee Benefits Practice	30 years
Diane DiFrancesco	Business Development Executive	37 years
Scott Davenport	Managing Director/Public Entity & HIF Practice Leader	31 years
Diane Peterson	Senior Vice President, Senior Consultant HIF Program Advisor	30 years
Phyllis Saraceni	Managing Director Practice Leader – Compliance & Audit	31 years
Nicole Foresta	Benefits Communications Manager	19 years
Kathryn Karalis	Wellness & Population Health Specialist	8 years
Member Advocacy Team	Client Service Associates/ Member Advocacy Team	Over 100 years combined



Our comprehensive service approach is hands-on, proactive, and customer centric, focusing on and integrating these five key areas:

- Strategic and Fiscal Advisory
- Data Analytics
- Communications and Employee Engagement
- Compliance and Audit
- Health and Wellness

To assure delivery of these services at the highest level of expertise, timeliness, and professionalism, Conner Strong & Buckelew uses a consultative team approach that addresses the complete “life cycle” of effective benefits management.



Our service team has four core components:

- **Executive Management:** Senior executives from Operations work with the Practice Leader and the Consultant to develop the strategic direction for the account - what we call our business plan approach. Our executive managers are also actively involved in annual reviews, quality oversight, and problem escalation and resolution, if needed.
- **Core Account Management:** Responsible for implementation of the business plan and day-to-day account management and client contact, this group consists of the following:



- **Practice Leader - Consultant:** Responsible for the strategic oversight of your benefits program, working as a business advisor, collaborating with you to understand your business goals and how your benefit program integrates with and achieves these goals. They will lead the performance of a detailed analysis of all current program design and recommend alternatives to help better manage costs and maintain a competitive benefits program.
- **Associate Consultant:** Together with the Consultant, this professional will provide technical and management support in such areas as implementation, plan administration, and compliance, in addition to supporting all of the renewal and marketing processes managed by Conner Strong & Buckelew.
- **Employee Benefit Specialist:** Provides support in implementing and executing all aspects of the services we provide and is also responsible for meeting the day-to-day service needs of clients. Managing the Member Advocacy function, he/she will resolve employee issues with eligibility, billing, claims processing, the coordination of benefits and other service related matters.
- **Data Analytics Associate:** Tracks and profiles the underwriting practices of carriers and evaluates all aspects of their financial proposals. Ensures that all financially related items and issues are accurate and consistent with industry standards.

The day-to-day consulting team is supported by other in-house health and welfare resources and expertise that round out the totality of the services and support we provide to clients. Our clients also benefit from the following additional practice groups:

- **Compliance and Audit:** This practice provides complete day-to-day audit and compliance services to the internal consulting teams and for our clients. This includes providing regulatory and compliance updates and support, legislative updates and analysis, ongoing client training, plan material development and legal support and guidance in benefits delivery. The group is led by our dedicated attorney consultant and a team of compliance associates.
- **Communications and Employee Engagement:** This practice provides complete communications support services for clients and their employees. This includes support with new employee benefit materials, open enrollment materials, on-going benefit communications, member web portal services for online benefit support and health and wellness tools and services.
- **Health, Wellness and Productivity:** We utilize a dynamic and robust platform of health, wellness and chronic condition management services that give clients access to an entire spectrum of services. We custom tailor a plan that best suits our client's culture, plan design and budget and utilize best-in-breed services that include one-on-one coaching, web services, on-site clinical tools and other leading edge techniques designed to extract the best outcomes in cost and quality.





- **Data Analytics Team**: The account team accesses this unit of professionals for assistance with underwriting, actuarial and financial expertise in examining client claims and program data in order to assist in negotiations, benefit cost modeling, rate and reserve setting, budget preparation and other financially-oriented services.
- **Benefit Operations**: This range of internal resources and business partners are engaged to support the client and fulfill the benefits business plan. Included are such professional functions as vendor and project managing in the area of automated benefits administration and eligibility. This also includes administering the oversight of related administrative functions like COBRA, retiree billing, FSA, DCA, Transit and other related services and functions





V. Proposal Requirements – Subcontractors

Respondents may engage the services of subcontractors for completion of this project. If their proposal involves any subcontractors, full details on the nature of the work to be performed by them and the location in which the work is to be performed must be provided. The respondent understands that if selected, the owner prior to initiating any subcontracted work, must approve the use of subcontractors in writing. (Refer to Section 2.11 and Item 2.11.1 for more details.)

There are no subcontractors proposed.



VI. Proposal Requirements – Proposal Forms

- A. RFP Document Checklist
- B. Ownership Disclosure
- C. Non-Collusion Affidavit
- D. EEO/Affirmative Action Regulations Questionnaire & State Certificate of Employee Information Report
- E. Proposal Cost/Signature Form
- F. Acknowledgement of Receipt of Addenda
- G. Disclosure of Investment Activities in Iran
- H. Fee Schedule (included in RFP Response – Section V. Proposal Requirements – Fee Schedule)
- I. Business Registration Certificate
- J. New Jersey Business Insurance License
- K. Certificate of Insurance



**COUNTY OF SOMERSET
RFP DOCUMENT CHECKLIST**

Read,
Acknowledged,
Signed & Submitted
Respondent's
Initial

A. FAILURE TO SUBMIT ANY OF THESE ITEMS IS MANDATORY CAUSE FOR REJECTION OF RFP

- | | | |
|-------------------------------------|--|----|
| ☒ | Ownership Disclosure Form | SD |
| ☒ | Non-Collusion Affidavit | SD |
| ☒ | EEO/Affirmative Action Compliance Notice – Submit Copy of State Certificate of Employee Information Report | SD |
| ☒ | Proposal Cost Form/Signature Page | SD |
| ☒ | Acknowledgement of Receipt of Addenda (To be Completed if Addenda are Issued) | SD |
| ☒ | Disclosure of Activities in Iran | SD |
| ☐ | Other: | |

B. REQUIRED NO LATER THAN TIME PERIOD INDICATED

B.1 SUBMIT DOCUMENTS AT TIME OF RFP RESPONSE DUE DATE

- | | | |
|-------------------------------------|---|----|
| ☒ | Qualification Statement | SD |
| ☒ | Key Personnel Information | SD |
| ☒ | Three (3) references for similar projects | SD |
| ☐ | Projected project plan and timeline (Gantt Chart) | |
| ☒ | Authorization for Background Check | SD |
| ☒ | License(s) or Certification(s) Required by the Specifications | SD |

**B.2 MUST POSSESS CERTIFICATE BY CONTRACT AWARD DATE
"SUBMISSION OF CERTIFICATE WITH RESPONSE PREFERRED"**

- | | | |
|-------------------------------------|---|----|
| ☒ | New Jersey Business Registration Certificate | SD |
| ☒ | New Jersey Business Registration Certificate – Named /Listed Subcontractor(s) | SD |

B.3 MUST SUBMIT BY CONTRACT AWARD DATE

- | | | |
|-------------------------------------|---|----|
| ☒ | Certificates of the Required Insurance naming County Additionally Insured | SD |
| ☒ | Evidence of Medical Malpractice or Professional Liability Insurance supply certificate prior to processing a purchase order | SD |

C. READ ONLY

Americans With Disability Act of 1990 Language

This checklist is provided for respondent's use in assuring compliance with required documentation; however, it does not necessarily include all specifications requirements and does not relieve the respondent of the need to read and comply with the specifications.

Name of Respondent: Conner Stong & Buckelew Date: January 19, 2021

By Authorized Representative:

Signature:

Scott Davenport

Print Name & Title:

Scott Davenport

Managing Director/Practice Leader



County of Somerset New Jersey

PO Box 3000 - 20 Grove Street
COUNTY ADMINISTRATION BUILDING
Somerville, NJ 08876-1262
PHONE: (908) 231-7043 FAX: (908) 575-3917



OWNERSHIP DISCLOSURE FORM

BID SOLICITATION #: CY-COM-0023-21

VENDOR {BIDDER}: Conner Strong & Buckelewe

PART 1

PLEASE COMPLETE THE QUESTIONS BELOW BY CHECKING EITHER THE "YES" OR THE "NO" BOX.
ALL PARTIES ENTERING INTO A CONTRACT WITH THE STATE ARE REQUIRED TO
COMPLETE THIS FORM PURSUANT TO N.J.S.A. 52:25-24.2

PLEASE NOTE THAT IF THE VENDOR/BIDDER IS A NON-PROFIT ENTITY, THIS FORM IS NOT REQUIRED.

- | | YES | NO |
|---|-------------------------------------|-------------------------------------|
| 1. Are there any individuals, corporations, partnerships, or limited liability companies owning a 10% or greater interest in the Vendor {Bidder}? | ☒ | ☐ |
| IF THE ANSWER TO QUESTION 1 IS "NO", PLEASE SIGN AND DATE THE FORM.
IF THE ANSWER TO QUESTION 1 IS "YES", PLEASE ANSWER QUESTION 2-4 BELOW. | | |
| 2. Of those parties owning a 10% or greater interest in the Vendor {Bidder}, are any of those parties individuals? | ☐ | ☒ |
| 3. Of those parties owning a 10% or greater interest in the Vendor {Bidder}, are any of those parties corporations, partnerships, or limited liability companies ? | ☒ | ☐ |
| 4. If you answer to Question 3 is "YES", are there any parties owning a 10% or greater interest in the corporation, partnership, or limited liability company referenced in Question 3? | ☒ | ☐ |
| IF ANY OF THE ANSWERS TO QUESTION 2-4 ARE "YES", PLEASE PROVIDE THE REQUESTED INFORMATION IN PART 2 BELOW. | | |

PART 2

PLEASE PROVIDE FURTHER INFORMATION RELATED TO QUESTIONS 2-4 ANSWERED AS "YES".

If you answered "YES" for questions 2, 3, or 4, you must disclose identifying information related to the individuals, corporations, partnerships, and/or limited liability companies owning a 10% or greater interest in the Vendor {Bidder}. Further, if one or more of these entities is itself a corporation, partnership, or limited liability company, you must also disclose all parties that own a 10% or greater interest in that corporation, partnership, or limited liability company. This information is required by statute.

INDIVIDUALS

NAME	<i>See attached</i>		
ADDRESS 1			
ADDRESS 2			
CITY	STATE	ZIP	

NAME			
ADDRESS 1			
ADDRESS 2			
CITY	STATE	ZIP	

NAME			
ADDRESS 1			
ADDRESS 2			
CITY	STATE	ZIP	

NAME			
ADDRESS 1			
ADDRESS 2			
CITY	STATE	ZIP	

Attach Additional Sheets If Necessary

PART 2 continued
PARTNERSHIPS / CORPORATIONS / LIMITED LIABILITY COMPANIES

ENTITY NAME	See attached		
PARTNER NAME			
ADDRESS 1			
ADDRESS 2			
CITY	STATE	ZIP	

ENTITY NAME			
PARTNER NAME			
ADDRESS 1			
ADDRESS 2			
CITY	STATE	ZIP	

ENTITY NAME			
PARTNER NAME			
ADDRESS 1			
ADDRESS 2			
CITY	STATE	ZIP	

Attach Additional Sheets If Necessary

In the alternative, to comply with the ownership disclosure requirement, a Vendor {Bidder} with any direct or indirect parent entity which is publicly traded may submit the name and address of each publicly traded entity and the name and address of each person that holds a 10 percent or greater beneficial interest in the publicly traded entity as of the last annual filing with the federal Securities and Exchange Commission or the foreign equivalent, and, if there is any person that holds a 10 percent or greater beneficial interest, also shall submit links to the websites containing the last annual filings with the federal Securities and Exchange Commission or the foreign equivalent and the relevant page numbers of the filings that contain the information on each person that holds a 10 percent or greater beneficial interest. N.J.S.A. 52:25-24.2.

PART 3
PUBLICLY TRADED PARENT COMPANY DISCLOSURE

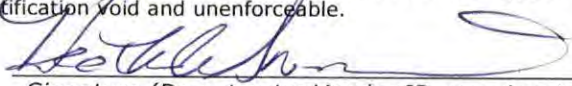
Ownership disclosure (name and address) can be met by submitting the last annual filing of an SEC or similar foreign regulator document or providing the website link to such documents, and include relevant page numbers. See N.J.S.A 52:25-24.2.

<u>TITLE OF ATTACHED DOCUMENTS OR WEBLINK</u>	<u>PAGE #</u>

Attach Additional Sheets if Necessary

CERTIFICATION

I, the undersigned, certify that I am authorized to execute this certification on behalf of the Vendor {Bidder}, that the foregoing information and any attachments hereto, to the best of my knowledge are true and complete. I acknowledge that the County of Somerset, NJ is relying on the information contained herein, and that the Vendor {Bidder} is under a continuing obligation from the date of this certification through the completion of any contract(s) with the County to notify the County in writing of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification. If I do so, I will be subject to criminal prosecution under the law, and it will constitute a material breach of my agreement(s) with the County, permitting the County to declare any contract(s) resulting from this certification void and unenforceable.



Signature (Do not enter Vendor ID as a signature)

1/13/2021

Date

Heather A. Steinmiller, Managing Director and General Counsel

Print Name and Title

FEIN/SSN

Owner Disclosure Supplemental Sheet

Conner Strong & Buckelew Companies, LLC is a wholly owned subsidiary of CS&B Intermediate Holdings, LLC.

CS&B Intermediate Holdings, LLC is a wholly owned subsidiary of CS&B Parent Holdings, LLC.

CS&B Parent Holdings, LLC is owned by Keystone American II, LLC. Keystone American II, LLC is the only owner holding a 10% or greater interest in CS&B Parent Holdings, LLC.

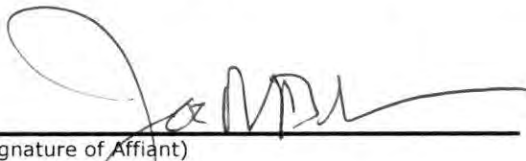
Keystone American II, LLC is owned by General American Holdings, Inc. The only owners of a 10% or greater interest in General American Holdings, Inc. are estate planning trusts for the benefit of the Norcross family and Tiagwad family, c/o CS&B, TRIAD1828, 2 Cooper Street, Camden, NJ 08102.

**COUNTY OF SOMERSET, NEW JERSEY
NON-COLLUSION AFFIDAVIT
(N.J.S.A. 52:34-15)**

State of New Jersey
County of Camden

I, Joseph M. DiBella residing in Camden
(Name of Affiant) (Name of Municipality)
in the County of Camden and State of New Jersey of full age,
being duly sworn according to law on my oath depose and say that:

I am Managing Director/Exec. Vice President of the Company of Conner Strong & Buckelew
(Title or Position) (Name of Firm/Company)
the Bidder/Respondent making this Proposal for the Bid/RFP numbered CY-COM-0023-21,
(Contract #)
and that I executed the said Proposal with full authority to do so; that said Bidder/Respondent has not,
directly or indirectly entered into any agreement, participated in any collusion, or otherwise taken any
action in restraint of free, competitive bidding in connection with the above numbered project; and that
all statements contained in said Proposal and in this affidavit are true and correct, and made with full
knowledge that the County of Somerset relies upon the truth of the statements contained in said Proposal
and in the statements contained in this affidavit in awarding the contract. I further warrant that no person
or selling agency has been employed or retained to solicit or secure such contract upon an agreement
or understanding for a commission, percentage, brokerage, or contingent fee, except bona fide employees
or bona fide established commercial or selling agencies maintained by Conner Strong & Buckelew.
(Name of Firm/Company)


(Signature of Affiant)

Joseph M. DiBella
(Type of Print Name of Affiant)

COUNTY OF SOMERSET, NEW JERSEY
EEO/AFFIRMATIVE ACTION COMPLIANCE NOTICE
N.J.S.A. 10:5-31 and N.J.A.C. 17:27
GOODS, PROFESSIONAL SERVICE AND GENERAL SERVICE CONTRACTS

All successful bidders are required to submit evidence of appropriate affirmative action compliance to the County and Division of Public Contracts Equal Employment Opportunity Compliance. During a review, Division representatives will review the County files to determine whether the affirmative action evidence has been submitted by the vendor/contractor. Specifically, each vendor/contractor shall submit to the County, prior to execution of the contract, one of the following documents:

Goods and General Service Vendors

1. Letter of Federal Approval indicating that the vendor is under an existing Federally approved or sanctioned affirmative action program. A copy of the approval letter is to be provided by the vendor to the County and the Division. This approval letter is valid for one year from the date of issuance.

Do you have a federally-approved or sanctioned EEO/AA program?
If yes, please submit a photostatic copy of such approval.

Yes ☐ No ☒

2. A Certificate of Employee Information Report (hereafter "Certificate"), issued in accordance with N.J.A.C. 17:27-1.1 et seq. The vendor must provide a copy of the Certificate to the County as evidence of its compliance with the regulations. The Certificate represents the review and approval of the vendor's Employee Information Report, Form AA-302 by the Division. The period of validity of the Certificate is indicated on its face. Certificates must be renewed prior to their expiration date in order to remain valid.

Do you have a State Certificate of Employee Information Report Approval?
If yes, please submit a photostatic copy of such approval.

Yes ☒ No ☐

3. The successful vendor shall complete an Initial Employee Report, Form AA-302 and submit it to the Division with \$150.00 Fee and forward a copy of the Form to the County. Upon submission and review by the Division, this report shall constitute evidence of compliance with the regulations. Prior to execution of the contract, the EEO/AA evidence must be submitted.

The successful vendor may obtain the Affirmative Action Employee Information Report (AA302) on the Division website www.state.nj.us/treasury/contract_compliance.

The successful vendor(s) must submit the AA302 Report to the Division of Public Contracts Equal Employment Opportunity Compliance, with a copy to Public Agency.

The undersigned vendor certifies that he/she is aware of the commitment to comply with the requirements of N.J.S.A. 10:5-31 and N.J.A.C. 17:27 and agrees to furnish the required forms of evidence.

The undersigned vendor further understands that his/her bid shall be rejected as non-responsive if said contractor fails to comply with the requirements of N.J.S.A. 10:5-31 and N.J.A.C. 17:27.

COMPANY: Conner Strong & Buckelew

SIGNATURE: Alexis Wolfson

PRINT NAME: Alexis Wolfson

TITLE: SVP, Chief HR Officer

DATE: 1/7/21

COUNTY OF SOMERSET, NEW JERSEY
EXHIBIT A
MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE
N.J.S.A. 10:5-31 et seq. (P.L. 1975, C. 127)
N.J.A.C. 17:27
GOODS, PROFESSIONAL SERVICE AND GENERAL SERVICE CONTRACTS

During the performance of this contract, the contractor agrees as follows:

The contractor or subcontractor, where applicable, will not discriminate against any employee or applicant for employment because of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Except with respect to affectional or sexual orientation and gender identity or expression, the contractor will ensure that equal employment opportunity is afforded to such applicants in recruitment and employment, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Such equal employment opportunity shall include, but not be limited to the following: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Public Agency Compliance Officer setting forth provisions of this nondiscrimination clause.

The contractor or subcontractor, where applicable will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex.

The contractor or subcontractor will send to each labor union, with which it has a collective bargaining agreement, a notice, to be provided by the agency contracting officer, advising the labor union of the contractor's commitments under this chapter and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

The contractor or subcontractor, where applicable, agrees to comply with any regulations promulgated by the Treasurer pursuant to N.J.S.A. 10:5-31 et seq., as amended and supplemented from time to time and the Americans with Disabilities Act.

The contractor or subcontractor agrees to make good faith efforts to meet targeted county employment goals established in accordance with N.J.A.C. 17:27-5.2.

The contractor or subcontractor agrees to inform in writing its appropriate recruitment agencies including, but not limited to, employment agencies, placement bureaus, colleges, universities, and labor unions, that it does not discriminate on the basis of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, and that it will discontinue the use of any recruitment agency which engages in direct or indirect discriminatory practices.

The contractor or subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personnel testing conforms with the principles of job-related testing, as established by the statutes and court decisions of the State of New Jersey and as established by applicable Federal law and applicable Federal court decisions.

In conforming with the targeted employment goals, the contractor or subcontractor agrees to review all procedures relating to transfer, upgrading, downgrading and layoff to ensure that all such actions are taken without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, consistent with the statutes and court decisions of the State of New Jersey, and applicable Federal law and applicable Federal court decisions.

The contractor shall submit to the public agency, after notification of award but prior to execution of a goods and services contract, one of the following three documents:

Letter of Federal Affirmative Action Plan Approval

Certificate of Employee Information Report

Employee Information Report Form AA302 (electronically provided by the Division and distributed to the public agency through the Division's website at www.state.nj.us/treasury/contract_compliance)

The contractor and its subcontractors shall furnish such reports or other documents to the Division of Purchase & Property, CCAU, EEO Monitoring Program as may be requested by the office from time to time in order to carry out the purposes of these regulations, and public agencies shall furnish such information as may be requested by the Division of Purchase & Property, CCAU, EEO Monitoring Program for conducting a compliance investigation pursuant to **Subchapter 10 of the Administrative Code at N.J.A.C. 17:27.**

**COUNTY OF SOMERSET, NEW JERSEY
AMERICANS WITH DISABILITIES ACT OF 1990
Equal Opportunity for Individuals with Disability**

The Contractor and the Owner, do hereby agree that the provisions of Title II of the Americans With Disabilities Act of 1990 (the "Act") (42 U.S.C. § 12101 et seq.), which prohibits discrimination on the basis of disability by public entities in all services, programs, and activities provided or made available by public entities, and the rules and regulations promulgated pursuant thereto, are made a part of this contract. In providing any aid, benefit, or service on behalf of the owner pursuant to this contract, the contractor agrees that the performance shall be in strict compliance with the Act. In the event that the contractor, its agents, servants, employees, or subcontractors violate or are alleged to have violated the Act during the performance of this contract, the contractor shall defend the owner in any action or administrative proceeding commenced pursuant to this Act. The contractor shall indemnify, protect, and save harmless the owner, its agents, servants, and employees from and against any and all suits, claims, losses, demands, or damages, of whatever kind or nature arising out of or claimed to arise out of the alleged violation. The contractor shall, at its own expense, appear, defend, and pay any and all charges for legal services and any and all costs and other expenses arising from such action or administrative proceeding or incurred in connection therewith. In any and all complaints brought pursuant to the owner's grievance procedure, the contractor agrees to abide by any decision of the owner which is rendered pursuant to said grievance procedure. If any action or administrative proceeding results in an award of damages against the owner, or if the owner incurs any expense to cure a violation of the ADA which has been brought pursuant to its grievance procedure, the contractor shall satisfy and discharge the same at its own expense.

The owner shall, as soon as practicable after a claim has been made against it, give written notice thereof to the contractor along with full and complete particulars of the claim. If any action or administrative proceeding is brought against the owner or any of its agents, servants, and employees, the owner shall expeditiously forward or have forwarded to the contractor every demand, complaint, notice, summons, pleading, or other process received by the owner or its representatives.

It is expressly agreed and understood that any approval by the owner of the services provided by the contractor pursuant to this contract will not relieve the contractor of the obligation to comply with the Act and to defend, indemnify, protect, and save harmless the owner pursuant to this paragraph.

It is further agreed and understood that the owner assumes no obligation to indemnify or save harmless the contractor, its agents, servants, employees and subcontractors for any claim which may arise out of their performance of this Agreement. Furthermore, the contractor expressly understands and agrees that the provisions of this indemnification clause shall in no way limit the contractor's obligations assumed in this Agreement, nor shall they be construed to relieve the contractor from any liability, nor preclude the owner from taking any other actions available to it under any other provisions of the Agreement or otherwise at law.

Name of Firm: Conner Strong & Buckelew Co., LLC

Authorized Representative: Alexis Wolfson

Title: SVP/Chief Human Resources Officer

Signature/Date:

Alexis Wolfson 1/7/21

CERTIFICATE OF EMPLOYEE INFORMATION REPORT

RENEWAL

This is to certify that the contractor listed below has submitted an Employee Information Report pursuant to N.J.A.C. 17:27-1.1 et. seq. and the State Treasurer has approved said report. This approval will remain in effect for the period of **15-OCT-2019** to **15-OCT-2022**

CONNER STRONG & BUCKELEW COMPANIES, LLC
P.O. BOX 99106
CAMDEN

NJ 08101



Elizabeth Maher Muoio

ELIZABETH MAHER MUOIO
State Treasurer

PROPOSAL COST FORM/SIGNATURE PAGE

TO THE COUNTY OF SOMERSET BOARD OF CHOSEN FREEHOLDERS:

The undersigned declares that he/she has read the Notice, Instructions, Affidavits and Scope of Services attached, that he/she has determined the conditions affecting the proposal and agrees, if this proposal is accepted, to furnish and deliver services per the attached schedule of fees for the following:

**Consulting Services for Somerset County Employee Benefits Plan
CONTRACT #: CY-COM-0023-21**

LUMP SUM PER YEAR NOT TO EXCEED \$150,000.00

Description	2021	2022	2023	2024 (optional)	2025 (optional)
Consulting Services	\$ 75,000	\$ 75,000	\$ 75,000	\$ 75,000	\$ 75,000

* Schedule of Fees and hourly rates for additional consulting services attached: ☐ Yes ☐ No

*See also Section 5.6

X
(Corporation)

The undersigned is a (Partnership) under the laws of the State of New Jersey having its
(Individual)

Principal office at TRIAD1828, 2 Cooper Street, Camden, NJ 08101

Conner Strong & Buckelew
Company

[REDACTED]
Federal I.D. # or Social Security #

TRIAD1828, 2 Cooper Street, PO Box 99106, Camden, NJ 08101

Address

Scott Davenport
Signature of Authorized Agent

Managing Director/Practice Leader

Scott Davenport

Type or Print Name

1/19/21

Date

856-552-4926

Telephone Number

N/A

sdavenport@connerstrong.com

Email Address

Fax Number

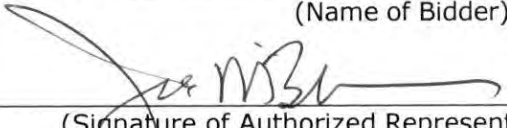
COUNTY OF SOMERSET, NEW JERSEY

ACKNOWLEDGMENT OF RECEIPT OF ADDENDA

The undersigned Respondent hereby acknowledges receipt of the following Addenda:

ADDENDUM NUMBER	DATE	ACKNOWLEDGE RECEIPT (Initial)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Acknowledged for: Conner Strong & Buckelew
(Name of Bidder)

By: 
(Signature of Authorized Representative)

Name: Joseph M. DiBella
(Print or Type)

Title: Managing Director/Executive Vice President

Date: January 19, 2021

FORM NOT REQUIRED IF NO ADDENDA ISSUED

**County of Somerset, New Jersey
Disclosure of Investment Activities in Iran**

Bidder Name:	Conner Strong & Buckelew
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Part 1: Certification

*BIDDERS ARE TO COMPLETE PART 1 BY CHECKING **EITHER BOX.***

Pursuant to Public Law 2012, c.25, any person or entity that submits a bid or proposal or otherwise proposes to enter into or renew a contract must complete the certification below to attest, under penalty of perjury, that neither the person or entity, nor any of its parents, subsidiaries, or affiliates, is identified on the Department of Treasury's Chapter 25 list as a person or entity engaging in investment activities in Iran. The Chapter 25 list is found on the Division's website www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf. Bidders must review this list prior to completing the below certification. Failure to complete the certification may render a bidder's proposal non-responsive. If the Director finds a person or entity to be in violation of law, s/he shall take action as may be appropriate and provided by law, rule or contract, including but not limited to, imposing sanctions, seeking compliance, recovering damages, declaring the party in default and seeking debarment or suspension of the party.

Check the Appropriate Box

☒ I certify, pursuant to Public Law 2012, c. 25, that neither the bidder listed above nor any of the bidder's parents, subsidiaries, or affiliates is listed on the N.J. Department of the Treasury's list of entities determined to be engaged in prohibited activities in Iran pursuant to P.L. 2012, c. 25 ("Chapter 25 List"). I further certify that I am the person listed above, or I am an officer or representative of the entity listed above and am authorized to make this certification on its behalf. I will skip Part 2 and sign and complete the Certification below.

OR

☐ I am unable to certify as above because the bidder and/or one or more of its parents, subsidiaries, or affiliates is listed on the Department's Chapter 25 list. I will provide a detailed, accurate and precise description of the activities in Part 2 below and sign and complete the Certification below. Failure to provide such will result in the proposal being rendered as nonresponsive and appropriate penalties, fines and/or sanctions will be assessed as provided by law.

Part 2 – Additional Information

PLEASE PROVIDE FURTHER INFORMATION RELATED TO INVESTMENT ACTIVITIES IN IRAN. You must provide a detailed, accurate and precise description of the activities of the bidding person/entity, or one of its parents, subsidiaries or affiliates, engaging in the investment activities in Iran on additional sheets provided by you.

Part 3: Certification

I, being duly sworn upon my oath, hereby represent and state that the foregoing information and any attachments there to the best of my knowledge are true and complete. I attest that I am authorized to execute this certification on behalf of the above-referenced person or entity. I acknowledge that the County of Somerset is relying on the information contained herein and thereby acknowledge that I am under a continuing obligation from the date of this certification through the completion of any contracts with the County of Somerset to notify the County of Somerset in writing of any changes to the answers of information contained herein. I acknowledge that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I recognize that I am subject to criminal prosecution under the law and that it will also constitute a material breach of my agreement(s) with the County of Somerset and that the County of Somerset at its option may declare any contract(s) resulting from this certification void and unenforceable.

Full Name (Print):	<i>Heather A. Steinmiller</i>	Title:	<i>MD - General Counsel</i>
Signature:	<i>[Signature]</i>	Date:	<i>1/13/2021</i>



E. Proposal Cost/Signature Form – Fee Schedule

Compensation Outline

Conner Strong & Buckelew proposes providing complete employee benefit health consulting services consistent with what has been requested in the Scope of Services included in the RFP. In the Exhibits section of this response, we have included our "Statement of Services" contemplated herein. Recognizing the significance of securing the best benefits consultancy and brokerage relationship, we understand that employers will place a significantly greater emphasis on which firm can and will do the best and most effective job versus the one that simply has proposed the lowest fee.

While we feel that we have been aggressive with our pricing, recent experiences have demonstrated that in the current economic environment, some firms have proposed unrealistically low fees simply to "win the business" with no real capacity to provide the depth and scope of the required services. In virtually all cases where the low bid has been selected, the relationships have been short-term and unfavorable for the customer. While price is a crucial part of any selection process, it is merely one of many disciplines we know that Somerset County will consider. In the case of Conner Strong & Buckelew, we professionally market our services based on the totality of our value proposition and the overall experience we deliver for the customer. In consideration for the services to be provided by Conner Strong & Buckelew, the following compensation terms are proposed:

We propose a transparent annualized consulting fee to cover all of the services requested and as noted throughout the proposal. The terms and details are as follows:

- A completely transparent Annual Consulting Fee of \$75,000 per year, applicable for three years (3 successive twelve month periods). The Annual Consulting Fee shall be in place of any core commissions. In the event commissions may not be extracted from any core coverages, the commissions paid shall be credited against the Annual Consulting Fee so that in no instance shall the total annual compensation exceed the proposed \$75,000 per year; plus,
- Commissions related to voluntary benefits, if applicable (employee paid coverages).

Proposal Assumptions

Our proposal assumes:

- That Conner Strong & Buckelew shall be named benefits consultant and broker of record for all of the lines of business included in the RFP.
- Conner Strong & Buckelew shall provide all of the services required in the scope. Additional differentiating services include access to:
 - Member benefits portal
 - High-touch advocacy call center
 - Data Analytics and actuarial services
 - Wellness consulting





- Communication services
- Compliance services
- Our performing all of the noted services reflected in our Statement of Services for health and benefit plan management
- That any services not specifically named herein or disclosed as required by Somerset County may be provided on a mutually agreed-upon cost basis outside the fees noted in the proposal
- That the services listed elsewhere in this section as "Exclusions" are separately and independently available for an additional, mutually agreed-upon fee
- In the event there is a material change to the services being provided, Conner Strong & Buckelew reserves the right to charge a separate fee for said services outside the compensation contemplated herein, subject to the mutual consent of the County of Somerset
- In the event there is a change in the number of enrolled lives in the primary benefit plans or 25% or more, Conner Strong & Buckelew reserves the right to propose modifications to the compensation structure in line with changes in the services to be delivered
- The services separately provided by PERMA/CSB for executive director and program manager services are outside what is described herein.

Items Outside of Standard Compensation

There are additional services that are optionally available, outside the compensation terms noted above. This includes:

- Printing and postage costs related to benefit communication materials
- Claims Audits
- Dependent Enrollment and Eligibility Audits
- Compliance Audits
- Wellness services, screening and coaching (Wellness consultation and advisory is included)
- Web-based benefits enrollment and administration
- Flexible Spending Account Administration
- Transit Account Administration
- Dependent Care Account Administration
- COBRA administration
- Health Reimbursement and Health Savings Account Administration
- The development of a new Plan Document(s) and/or Summary Plan Description(s) or substantial modifications to these documents
- Any review of Summary Plan Descriptions that required a compliance check





- ACA Employee Tracking and Reporting
- Communication services outside of an employee enrollment benefits guide(s), new hire benefits guide(s) and wellness material(s)
- Translation services for communication materials other than English to Spanish (i.e., translate benefit guide from English to French, etc.)
- Manual key entry of enrollment applications; including new applications, changes and/or deletions
- Other unique items or projects not specifically noted as covered services



State of New Jersey

License No: 8038864

NPN: 1636885

Department of Banking and Insurance

CONNER STRONG & BUCKELEW COMPANIES LLC

2 COOPER STREET
CAMDEN NJ 08102

IS DULY LICENSED WITH THE FOLLOWING LICENSE TYPE(S) AND AUTHORITIES

This insurance license is valid and shall remain in effect unless revoked or suspended provided that the fee set forth in N.J.A.C. 11:17-2.12 is paid and renewal requirements set forth in N.J.A.C. 11:17-2.5, including continuing education requirements for resident individuals, are met by the license expiration date. A renewal notice will be mailed to the licensee mailing address approximately 30 days prior to the license expiration date.

LICENSE TYPE	LINES OF AUTHORITY	EFFECTIVE DATE	EXPIRATION DATE
Insurance Producer	Accident & Health or Sickness, Casualty, Life, Personal Lines, Pet, Property, Surplus Lines	06/01/2020	05/31/2022



The department maintains an informative website at www.dobi.nj.gov. Please visit this web page for valuable information and forms necessary to maintain compliance with licensing requirements.

Department Contact Information

web site: www.dobi.nj.gov
phone: (609) 292-4337
fax: (609) 984-5263

The request for any change of license information must be sent to the Department within 30 days of the change.
Make any checks and/or money orders payable to: **STATE OF NEW JERSEY, GENERAL TREASURY**

Mailing Address: Department of Banking and Insurance
20 West State Street
P.O. Box 327
Trenton, NJ 08625-0327

CONNER STRONG & BUCKELEW COMPANIES LLC
PO BOX 99106
CAMDEN NJ 08101



STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE

Taxpayer Name: CONNER STRONG & BUCKELEW COMPANIES, LLC

Trade Name:

Address: 2 COOPER STREET
CAMDEN, NJ 08102

Certificate Number: 2031377

Effective Date: March 29, 2016

Date of Issuance: August 21, 2019

For Office Use Only:

20190821160158792

ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

1/19/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Conner Strong & Buckelew Companies, LLC PO Box 99106 Camden, NJ 08101	CONTACT NAME:	
	PHONE (A/C, No, Ext): 877 861-3220	FAX (A/C, No):
INSURED Conner Strong & Buckelew Companies, LLC P.O. Box 99106 Camden, NJ 08101	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Sentinel Insurance Co. Ltd.	NAIC #: 11000
	INSURER B: Hartford Casualty Insurance Company	29424
	INSURER C: Great American Excess & Surplus Ins Co	37532
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PRO-JECT ☐ LOC ☐ OTHER		13UUNVE6390	12/10/2020	12/10/2021	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
A	AUTOMOBILE LIABILITY ☒ ANY AUTO OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY		13UUNVE6390	12/10/2020	12/10/2021	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	☒ UMBRELLA LIAB ☒ OCCUR ☐ EXCESS LIAB ☐ CLAIMS-MADE ☐ DED ☒ RETENTION \$10,000		13XHUV4889	12/10/2020	12/10/2021	EACH OCCURRENCE \$1,000,000 AGGREGATE \$ \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? ☒ Y/N ☒ N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	13WBBJ2982	12/10/2020	12/10/2021	☒ PER STATUTE ☐ OTH-ER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE - EA EMPLOYEE \$1,000,000 E.L. DISEASE - POLICY LIMIT \$1,000,000
C	Errors & Omission		TER2861088	12/10/2020	12/10/2021	\$15,000,000 Aggregate/ Claim w/\$200,000 SIR

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Workers Compensation Insurance Carriers Vary by State.

Named Insured:

Conner Strong & Buckelew Companies, LLC
JA Montgomery Risk Control Services, LLC
(See Attached Descriptions)

CERTIFICATE HOLDER

CANCELLATION

County of Somerset New Jersey
PO Box 3000
County Administration Building
20 Grove Street
Somerville, NJ 08876

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

W. Michael Trapp

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DESCRIPTIONS (Continued from Page 1)

The Certificate Holder, its employees, officers, and agents are Additional Insureds on the above-referenced General Liability policy where required by written contract.



VII. Proposal Requirements – Location of Servicing Office

The proposal must list the location and address of the present, active office that will service and manage this contract.

Somerset County would be serviced out of our National Headquarters located at TRIAD1828, 2 Cooper Street, Camden, NJ 08101. We have other offices in Parsippany and Toms River in New Jersey as well as offices in Pennsylvania, Delaware, Massachusetts, Georgia, New York and Florida.



VIII. Exhibits

- A. Account Team Bios and Licenses
- B. Performance Report Card
- C. Sample BeneView Report
- D. Sample Springbuk Report
- E. BenePortal Flyer
- F. Sample Member Advocacy Card and Client Activity Report
- G. Sample Rx Flyer
- H. Sample Wellness Flyer
- I. Sample Legal Update
- J. Statement of Services

Joseph M. DiBella

Managing Director

Executive Vice President

Employee Benefits Consulting

NJ Offices:	Camden	856-552-4618
	Parsippany	973-659-6534
	Toms River	732-660-5043
Fax:	856-206-5388	
Email:	jdibella@connerstrong.com	



Responsibilities

Joseph DiBella is responsible for leading all aspects of the Employee Benefits Practice at Conner Strong & Buckelew. This includes overseeing the day-to-day consulting and brokerage services the firm provides for its benefit clients, the development of new strategic services and leading new business development. DiBella also plays an active benefits consulting role with key clients and is engaged in program design, financial evaluation, health and wellness, compliance, communications and other key client-facing areas.

Background

DiBella joined Conner Strong & Buckelew in 2005 with many years of senior leadership experience in the group benefits industry. Prior to joining Conner Strong & Buckelew, DiBella led National and Large Account business for Horizon Blue Cross Blue Shield of New Jersey.

DiBella has significant experience in data analytics, underwriting, labor negotiations, health and wellness design, benefits administration, compliance, communications and strategic planning. He has been fully engaged in health and benefits advisory with some of the nation's largest companies. DiBella has been a frequent guest speaker for the *Philadelphia Business Journal* on issues related to employee benefits and is quoted regularly in publications such as *U.S. News & World Report* and various *AIS Services* publications. He has authored several articles on controlling health care costs and the use of effective strategies in benefits management. He regularly speaks on issues dealing with benefits and health insurance reform and has been a panelist and speaker on healthcare issues for the Self Insurance Institute of America, the Pennsylvania Bar Association and the NJ League of Municipalities.

Education

Seton Hall University - Bachelors of the Arts

Community Involvement

DiBella has served as an elected Township Councilman and Board of Education member. From 2005 through 2008 he served as Mayor of Howell Township, New Jersey, one of the state's largest municipalities. He served as a member of the Board of Directors at Kimball Community Medical Center in Lakewood, New Jersey. DiBella also serves as a Board Member Emeritus of Paradigm Holdings, LLC, a national captive organization that provides stop loss coverage for middle market companies.

State of New Jersey

License No: 9580766

NPN: 5720582

Department of Banking and Insurance

JOSEPH M DIBELLA

2 COOPER PLZ

CAMDEN NJ 08103-1461

IS DULY LICENSED WITH THE FOLLOWING LICENSE TYPE(S) AND AUTHORITIES

This insurance license is valid and shall remain in effect unless revoked or suspended provided that the fee set forth in N.J.A.C. 11:17-2.12 is paid and renewal requirements set forth in N.J.A.C. 11:17-2.5, including continuing education requirements for resident individuals, are met by the license expiration date. A renewal notice will be mailed to the licensee mailing address approximately 30 days prior to the license expiration date.

LICENSE TYPE	LINES OF AUTHORITY	EFFECTIVE DATE	EXPIRATION DATE
Insurance Producer	Accident & Health or Sickness; Life; Pet	09/01/2020	08/31/2022



The department maintains an informative website at www.dobi.nj.gov. Please visit this web page for valuable information and forms necessary to maintain compliance with licensing requirements.

Department Contact Information

web site: www.dobi.nj.gov

phone: (609) 292-4337

fax: (609) 984-5263

The request for any change of license information must be sent to the Department within 30 days of the change.

Make any checks and/or money orders payable to: **STATE OF NEW JERSEY, GENERAL TREASURY**

Mailing Address: Department of Banking and Insurance

20 West State Street

P.O. Box 327

Trenton, NJ 08625-0327

JOSEPH M DIBELLA

CONNER STRONG & BUCKELEW COMPANIES, INC.

PO BOX 989

MARLTON NJ 08053-0989

Diane DiFrancesco

Business Development Executive

NJ Offices: Marlton 856-552-4620
 Parsippany 973-659-6535
 Toms River 732-660-5044
Fax: 856-552-4621
Email: ddifrancesco@connerstrong.com



Responsibilities

Diane DiFrancesco concentrates on sales for Conner Strong & Buckelew in the Public Sector and the North Jersey marketplace.

Background

DiFrancesco began her career at John Hancock in 1966 as a Group Health Claims Representative. After leaving John Hancock, she went to work for American Mutual as a Workers' Compensation Claims Adjuster. In 1987, she went to work for Amalgamated General Agencies where her responsibilities included Claims Representative, Personal Lines Customer Service Representative and eventually moving to a sales position. DiFrancesco joined Conner Strong & Buckelew in 1997 working in the Public Entity and Employee Benefits Divisions.

Education

Pennsylvania State University – Bachelor of the Arts in Spanish

Community Involvement

DiFrancesco is currently a member of the Board of Trustees of Freedom House. She has served on the fundraising committee of New Jersey Network and is a former Board Member of the Emmanuel Cancer Fund. She has been involved with the College Women's Club and the Scotch Plains PTA. She is also a former Trustee of the Scotch Plains Library and Union County College.

This document may serve in lieu of a Letter of Certification.

Licensee Demographics

Name: DIFRANCESCO, DIANE **NPN:** 5714799 **Resident?:** Yes
Domicile State: New Jersey **Domicile Country:** United States
Business Address:
TOMS RIVER, NJ 08753-7437

License Quick View

License Class	License Status	Status Date	Effective Date	Expiration Date
Insurance Producer	Active	09/14/2020	11/01/2020	10/31/2022

Phone, Email, Website

Phone	Email	Website
Type	Type	
Business Primary Phone	Business Email	No results found.
(800) 428-1324	blinsurance@cscglobal.com	

License Information

License Type: Insurance Producer **Status Date:** 09/14/2020
License Number: 9023239 **License Status:** Active **Expiration Date:** 10/31/2022
First Active Date: 05/09/1990 **Effective Date:** 11/01/2020
Legacy License ID:

Scott Davenport, REBC, CEBS

Managing Director

Public Entity & HIF Practice Leader

Employee Benefits Consulting

NJ Offices:	Camden	856-552-4926
	Toms River	732-736-5285
	Parsippany	973-659-6569
Fax:	856-291-5240	
Email:	sdavenport@connerstrong.com	



Responsibilities

Scott Davenport is a Managing Director and Public Entity & HIF Practice Leader with Conner Strong & Buckelew and has 30 years of senior consulting and brokering experience. As a Managing Director for Employee Benefits, his responsibilities include the design, communication and implementation of all phases of both qualified and non-qualified benefit plans for hospitals, school districts, not-for-profit organizations, governmental, and industrial entities.

Background

Davenport is a 30 year veteran of the benefits business and among the top public entity benefit consultants in the region. Prior to joining Conner Strong & Buckelew in 1990, Davenport was involved in commercial real estate and mergers and acquisitions of privately held companies.

Education

Glassboro State College – Bachelor of Science

Professional Designations

Registered Health Underwriter (RHU)

Registered Employee Benefits Consultant (REBC)

Group Benefits Associate (GBA)

Certified Employee Benefits Specialist (CEBS)

Community Involvement

Davenport is an active fund-raiser for the American Cancer Society as well as the Multiple Sclerosis Association. He is also a member of the Pennsville Eagles Parents Athletic Association.

State of New Jersey

License No: 8701125

NPN: 1979985

Department of Banking and Insurance

SCOTT J DAVENPORT

CONNER STRONG & BUCKELEW COMPANIES, INC.

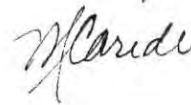
401 ROUTE 73 N FL 3

MARLTON NJ 08053-3425

IS DULY LICENSED WITH THE FOLLOWING LICENSE TYPE(S) AND AUTHORITIES

This insurance license is valid and shall remain in effect unless revoked or suspended provided that the fee set forth in N.J.A.C. 11:17-2.12 is paid and renewal requirements set forth in N.J.A.C. 11:17-2.5, including continuing education requirements for resident individuals, are met by the license expiration date. A renewal notice will be mailed to the licensee mailing address approximately 30 days prior to the license expiration date.

LICENSE TYPE	LINES OF AUTHORITY	EFFECTIVE DATE	EXPIRATION DATE
Insurance Producer	Accident & Health or Sickness; Casualty; Life; Personal Lines; Property	08/01/2020	07/31/2022



The department maintains an informative website at www.dobi.nj.gov. Please visit this web page for valuable information and forms necessary to maintain compliance with licensing requirements.

Department Contact Information

web site: www.dobi.nj.gov

phone: (609) 292-4337

fax: (609) 984-5263

The request for any change of license information must be sent to the Department within 30 days of the change.

Make any checks and/or money orders payable to: **STATE OF NEW JERSEY, GENERAL TREASURY**

Mailing Address: Department of Banking and Insurance

20 West State Street

P.O. Box 327

Trenton, NJ 08625-0327

SCOTT J DAVENPORT



Diane Peterson

Vice President

Senior Consultant HIF Program Advisor

Employee Benefits Consulting

Office: 732-736-5255
Email: dpeterson@connerstrong.com



Responsibilities

Diane Peterson is a Senior Consultant for the Employee Benefits Division of Conner Strong & Buckelew. She is responsible for advising clients on all aspects of their employee benefit plans, acting as both account manager and strategic business planner. Peterson is also responsible for analyzing and designing complex health and welfare plans using cost containment strategies as well as disease management and wellness strategies. In addition, she handles the presentation of renewals, regulatory requirements, alternative funding projections, and financial analysis for clients.

Background

Peterson has nearly 25 years of experience in employee benefits. Prior to joining Conner Strong & Buckelew, she managed the daily health insurance fund operations throughout the state of New Jersey for 20 years. Before she became engaged in the employee benefits field, Peterson served in bank operations specializing in systems and production efficiencies.

Education

Susquehanna University – Organizational Psychology

State of New Jersey

License No: 9363367

NPN: 5718701

Department of Banking and Insurance

DIANE PETERSON

CONNER STRONG & BUCKELEW COMPANIES, INC.

401 ROUTE 73 N FL 3

MARLTON NJ 08053-3425

IS DULY LICENSED WITH THE FOLLOWING LICENSE TYPE(S) AND AUTHORITIES

This insurance license is valid and shall remain in effect unless revoked or suspended provided that the fee set forth in N.J.A.C. 11:17-2.12 is paid and renewal requirements set forth in N.J.A.C. 11:17-2.5, including continuing education requirements for resident individuals, are met by the license expiration date. A renewal notice will be mailed to the licensee mailing address approximately 30 days prior to the license expiration date.

LICENSE TYPE	LINES OF AUTHORITY	EFFECTIVE DATE	EXPIRATION DATE
Insurance Producer	Accident & Health or Sickness; Life	10/01/2019	09/30/2021



The department maintains an informative website at www.dobi.nj.gov. Please visit this web page for valuable information and forms necessary to maintain compliance with licensing requirements.

Department Contact Information

web site: www.dobi.nj.gov

phone: (609) 292-4337

fax: (609) 984-5263

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Make any checks and/or money orders payable to: **STATE OF NEW JERSEY, GENERAL TREASURY**

Mailing Address: Department of Banking and Insurance

20 West State Street

P.O. Box 327

Trenton, NJ. 08625-0327



INSURANCE | RISK MANAGEMENT | EMPLOYEE BENEFITS

Phyllis M. Saraceni

Managing Director

Compliance & Audit Practice Leader

Employee Benefits Consulting

Office: 856-552-4916
Email: psaraceni@connerstrong.com



Responsibilities

Phyllis Saraceni is a Managing Director and Compliance & Audit Practice Leader for the Employee Benefits division of Conner Strong & Buckelew. She is responsible for supporting customers and the firm's benefit consulting staff on a day to day basis, preparing legal and regulatory updates and communication, interpreting emerging laws and regulations related to benefits and managing the firm's benefits audit function.

Background

Saraceni brings more than 30 years of professional experience to the firm. Prior to joining Conner Strong & Buckelew, she was a Principal for Mercer Health and Benefits for nearly 12 years where she supported clients and internal staff in various functions related to health and welfare compliance and legal matters. Previous to Mercer, Saraceni held positions at various law firms specializing in ERISA and benefits law.

Education

Temple University School of Law – Juris Doctorate

West Chester University – Bachelor of Science in Marketing

Nicole Foresta

Communications Manager

Employee Benefits Consulting

Office: 856-552-4940
Email: nforesta@connerstrong.com



Responsibilities

Nicole Foresta serves as Communications Manager for the Employee Benefits Consulting division of Conner Strong & Buckelew. In this role, she specializes in the creation of strategic communications, designed to engage employees and create awareness of employee benefits programs. She and her team create customized communications, such as open enrollment guides, new hire guides, payroll stuffers and flyers that are tailored to assist employees in understanding their benefits programs.

Background

Foresta has more than 10 years experience in the employee benefits industry, with a concentration in visual arts, employee benefits education and campaign development. Prior to joining Conner Strong & Buckelew, Foresta was Marketing Communications Manager at Corporate Synergies Group, where she led all of their marketing communications efforts and developed custom employee benefits communications.



INSURANCE | RISK MANAGEMENT | EMPLOYEE BENEFITS

Kathryn Karalis, CWWS

Wellness & Population Health Coordinator



Office: 856-446-9242
Email: kkaralis@connerstrong.com

Responsibilities

Kathryn Karalis works in our Employee Benefits Consulting division and helps plan, evaluate and implement corporate wellness services and health promotion programs for clients across all industries. She also assists with company-wide wellness initiatives to better harness a culture of well-being at Conner Strong & Buckelew. With this first-hand experience, she is well positioned to serve our clients' wellness and population needs and ultimately contribute to improving their bottom line. Karalis supports the Wellness & Population Health Manager who oversees all of the resources the firm provides in the area of health and wellness, while working directly with clients in the design and implementation of wellness strategies and programs.

Background

Before joining Conner Strong & Buckelew, Karalis developed a strong background in wellness as a customer care associate with Health Advocate in 2009, which gradually evolved into a wellness coaching position. As a coach, Karalis helped provide health education and coaching services to a diverse group of clients while promoting various wellness incentives.

Education

University of Pittsburgh, B.A. in English Writing

Professional Designations

Freedom from Smoking Facilitator with American Lung Association (2019)
Worksite Wellness Specialist (CWWS)



PERFORMANCE REPORT CARD

Introduction

We utilize our "Performance Report Card" as an independent tool to help our clients objectively evaluate the performance of the Conner Strong & Buckelew account team against established service metrics. The PRC reflects a set of template disciplines (outlined below) that capture the primary elements of account management. In addition, the Performance Report Card may be customized on a client-by-client basis to incorporate any unique tasks or projects we have been charged to fulfill.

The Performance Report Card is designed in a "question and answer" format. Each topic is evaluated on a 1-5 scale, with 1 being unsatisfactory and 5 being most satisfactory. It also allows for additional free-form comments and feedback. (In compiling the overall grade, some topics may be weighted more heavily than others, based on that client's particular interests.)

The core template disciplines include:

Account Management

Our effectiveness in this area is measured against some of the following criteria:

- Timeliness in completing projects and tasks
- Knowledge of marketplace and industry changes and dynamics
- Availability of client team for routine meetings and consultative sessions
- The accuracy of the work product
- Access to the appropriate subject matter experts depending on the project in question
- Ability to provide creative recommended program alternatives
- Effective handling of member and executive level service inquiries
- Satisfaction with the handling of financial and contractual matters with the administrators

Communications & Compliance

Our effectiveness in this area is measured against some of the following criteria:

- Routine dissemination of regulatory updates and bulletins
- Timely development of agreed upon communication projects, such as open enrollment
- Effectiveness and quality of content
- Satisfaction with timing and delivery of the work product
- Adherence against regulatory requirements and compliance
- Satisfaction with creativity and design work



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Project Delivery

This area will encompass specific project deliverables that each customer asks us to fulfill. We look to measure our effectiveness against some of the following criteria:

- Satisfaction with work product
- Timeliness
- Accuracy and effectiveness of services performed
- Project management

The Performance Report Card is released annually for the client to complete. The tool is sent to all engaged client participants. The results are generally sent back to the Executive Vice President of the Benefits Division to ensure the client can provide the most candid and direct commentary.

Attached is a model Performance Report Card, which can be tailored or altered as necessary.





MODEL CONNER STRONG & BUCKELEW PERFORMANCE REPORT CARD

Please complete this annual Conner Strong & Buckelew Performance Report Card, based on your interaction and level of satisfaction with the account management team supporting your business for the most recent calendar year. Most questions in the survey are based on a "1 – 5" scale with "5" being most satisfied and "1" being least satisfied. (An average score of "4" will constitute a "satisfied" result.)

For some questions, you may be asked to gauge satisfaction while for others you will be asked to gauge knowledge on a particular topic. Please answer ALL questions, choosing "N/A" for any question that may not be applicable based on your interaction with the account management team.

The survey is divided into the following sections:

- About You
- Service
- Knowledge of Health Plan Information/Your Specific Program
- Financial and Contractual Matters
- General

After completing the enclosed, please return it using the enclosed self-addressed envelope, or mail to:

Mr. Joseph DiBella
Executive Vice President
Conner Strong & Buckelew Companies, Inc.
PO Box 99106
Camden, NJ 08101

We ask that you complete and return the survey by _____. If you have indicated that you do **not** want your individual results shared with your Consultant/Account Manager(s), those results will not be disclosed to them. In that case, only your organization's aggregate rating will be communicated.

Thank you for taking the time to complete this survey. We appreciate your valuable input and feedback. We will use your responses in an effort to continually improve our account management capabilities.



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About You

Your organization's name: _____

Your name: _____

Your title: _____

Number of years in benefits: _____

Number of years dealing with your Conner Strong & Buckelew Consultant/Account Manager(s): _____

Do you want your individual responses shared with your Consultant/Account Manager(s):

☐ Yes ☐ No

Service

1 – 5 scale with "5" being most satisfied and "1" being least satisfied:

1. The timeliness of handling important service issues:

1 2 3 4 5 N/A

2. Consultant(s) understands the issue without having to provide an extended explanation:

1 2 3 4 5 N/A

3. Consultant(s) communicates in a clear and concise manner:

1 2 3 4 5 N/A

4. Consultant(s) available for meetings and conference calls or other important events in accordance with your needs:

1 2 3 4 5 N/A

5. Consultant(s) "follows up" and closes matters to our satisfaction:

1 2 3 4 5 N/A



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6. Consultant(s) understands our service expectations and strives to meet these objectives:

1 2 3 4 5 N/A

7. Consultant(s) communicates service performance results timely and clearly:

1 2 3 4 5 N/A

8. Consultant(s) meets deadlines for projects or assignments:

1 2 3 4 5 N/A

9. Consultant(s) is professional in all aspects of dealing with our organization, senior management and our employees:

1 2 3 4 5 N/A

10. Consultant(s) is willing to become involved in employee issues and handles them effectively?

1 2 3 4 5 N/A

11. Consultant(s) is "hands-on" in all aspects of service delivery?

1 2 3 4 5 N/A

12. Consultant(s) understands the vision of our organization, the position of the organization and its direction:

1 2 3 4 5 N/A

13. Consultant(s) does not "over sell" or "over commit" to things that cannot be delivered:

1 2 3 4 5 N/A

14. Overall, the Consultant(s) provides the level of service we expect:

1 2 3 4 5 N/A

Any additional comments or feedback regarding the Consultant/Account Manager(s) related to service?



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Knowledge of Health Plan Information/Your Specific Program

1 – 5 scale with “5” being most satisfied and “1” being least satisfied:

1. Consultant(s) is well versed with the specifics of our benefit program?
1 2 3 4 5 N/A
2. Consultant(s) suggests or provides alternative benefit design information as may be appropriate
1 2 3 4 5 N/A
3. Consultant(s) is well versed with information about a variety of different programs and services available in the marketplace.
1 2 3 4 5 N/A
4. Consultant(s) is technologically savvy, uses and promotes technology in all aspects of their work:
1 2 3 4 5 N/A
5. Consultant(s) is knowledgeable with health care related legislation, both locally and nationally?
1 2 3 4 5 N/A
6. Consultant(s) understands the health care business and is knowledgeable about the industry.
1 2 3 4 5 N/A
7. Consultant(s) shares information regarding the health care business.
1 2 3 4 5 N/A
8. Consultant(s) offers solutions and creative approaches towards benefit decision making.
1 2 3 4 5 N/A
9. Consultant(s) is knowledgeable about the marketplace, displaying an understanding of carrier product and vendor service capabilities.
1 2 3 4 5 N/A



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10. Consultant(s) understands the medical management capabilities of the incumbent administrator and their competition.
- | | | | | | |
|---|---|---|---|---|-----|
| 1 | 2 | 3 | 4 | 5 | N/A |
|---|---|---|---|---|-----|
11. Consultant(s) shares information routinely about other products available.
- | | | | | | |
|---|---|---|---|---|-----|
| 1 | 2 | 3 | 4 | 5 | N/A |
|---|---|---|---|---|-----|
12. Consultant(s) understands the dynamics of our business and how that relates to our benefit strategy:
- | | | | | | |
|---|---|---|---|---|-----|
| 1 | 2 | 3 | 4 | 5 | N/A |
|---|---|---|---|---|-----|

Any additional comments or feedback regarding the Consultant/Account Manager(s) related to their knowledge of health plan information and your specific program:

Financial and Contractual Matters

1 – 5 scale with "5" being most satisfied and "1" being least satisfied:

1. The Consultant(s) is well versed with the financial aspects of our business:
- | | | | | | |
|---|---|---|---|---|-----|
| 1 | 2 | 3 | 4 | 5 | N/A |
|---|---|---|---|---|-----|
2. The Consultant(s) is sensitive to cost issues and looks for ways to assist in reducing expenses and costs:
- | | | | | | |
|---|---|---|---|---|-----|
| 1 | 2 | 3 | 4 | 5 | N/A |
|---|---|---|---|---|-----|
3. The Consultant(s) has a strong understanding of underwriting principals and can speak freely regarding related matters:
- | | | | | | |
|---|---|---|---|---|-----|
| 1 | 2 | 3 | 4 | 5 | N/A |
|---|---|---|---|---|-----|



PROPRIETARY & CONFIDENTIAL

4. The Consultant(s) clearly explains financial exhibits and illustrations and effectively communicates financial information:
- | | | | | | |
|---|---|---|---|---|-----|
| 1 | 2 | 3 | 4 | 5 | N/A |
|---|---|---|---|---|-----|
5. The Consultant(s) provides competitive/industry related information to explain or highlight financial matters:
- | | | | | | |
|---|---|---|---|---|-----|
| 1 | 2 | 3 | 4 | 5 | N/A |
|---|---|---|---|---|-----|
6. The Consultant(s) presents renewal/settlement information timely and in accordance with our expectations:
- | | | | | | |
|---|---|---|---|---|-----|
| 1 | 2 | 3 | 4 | 5 | N/A |
|---|---|---|---|---|-----|
7. The Consultant(s) is an effective negotiator:
- | | | | | | |
|---|---|---|---|---|-----|
| 1 | 2 | 3 | 4 | 5 | N/A |
|---|---|---|---|---|-----|
8. The Consultant(s) is well versed with our contract and contractual matters:
- | | | | | | |
|---|---|---|---|---|-----|
| 1 | 2 | 3 | 4 | 5 | N/A |
|---|---|---|---|---|-----|
9. The Consultant(s) is well versed in health care related compliance and can provide direction on such matters:
- | | | | | | |
|---|---|---|---|---|-----|
| 1 | 2 | 3 | 4 | 5 | N/A |
|---|---|---|---|---|-----|
10. The Consultant(s) accesses and/or provides access to the appropriate parties to address financial or contractual matters, as may be applicable:
- | | | | | | |
|---|---|---|---|---|-----|
| 1 | 2 | 3 | 4 | 5 | N/A |
|---|---|---|---|---|-----|
11. Any additional comments or feedback regarding the Consultant/Account Manager(s) as it relates to financial and contractual matters?



General

1 – 5 scale with "5" being most satisfied and "1" being least satisfied:

1. How would you rate your Conner Strong & Buckelew Consultant(s) against the account management personnel of other healthcare related vendors?
- 1 2 3 4 5 N/A

2. Is your Consultant(s) someone that you believe has a good pulse on what is happening in health care and well-grounded in the overall disciplines important to account management?
- 1 2 3 4 5 N/A

3. Is your Consultant(s) a good communicator?
- 1 2 3 4 5 N/A

4. In what areas does your Consultant(s) needs to improvement?

5. Taking all things into consideration, how would you rate your overall satisfaction with Conner Strong & Buckelew?
- 1 2 3 4 5 N/A

Any additional comments related to your overall satisfaction or any other question above?



■ CONNER STRONG & BUCKELEW

SAMPLE BENEVIEW REPORTING PACKAGE

Data through July 31, 2020

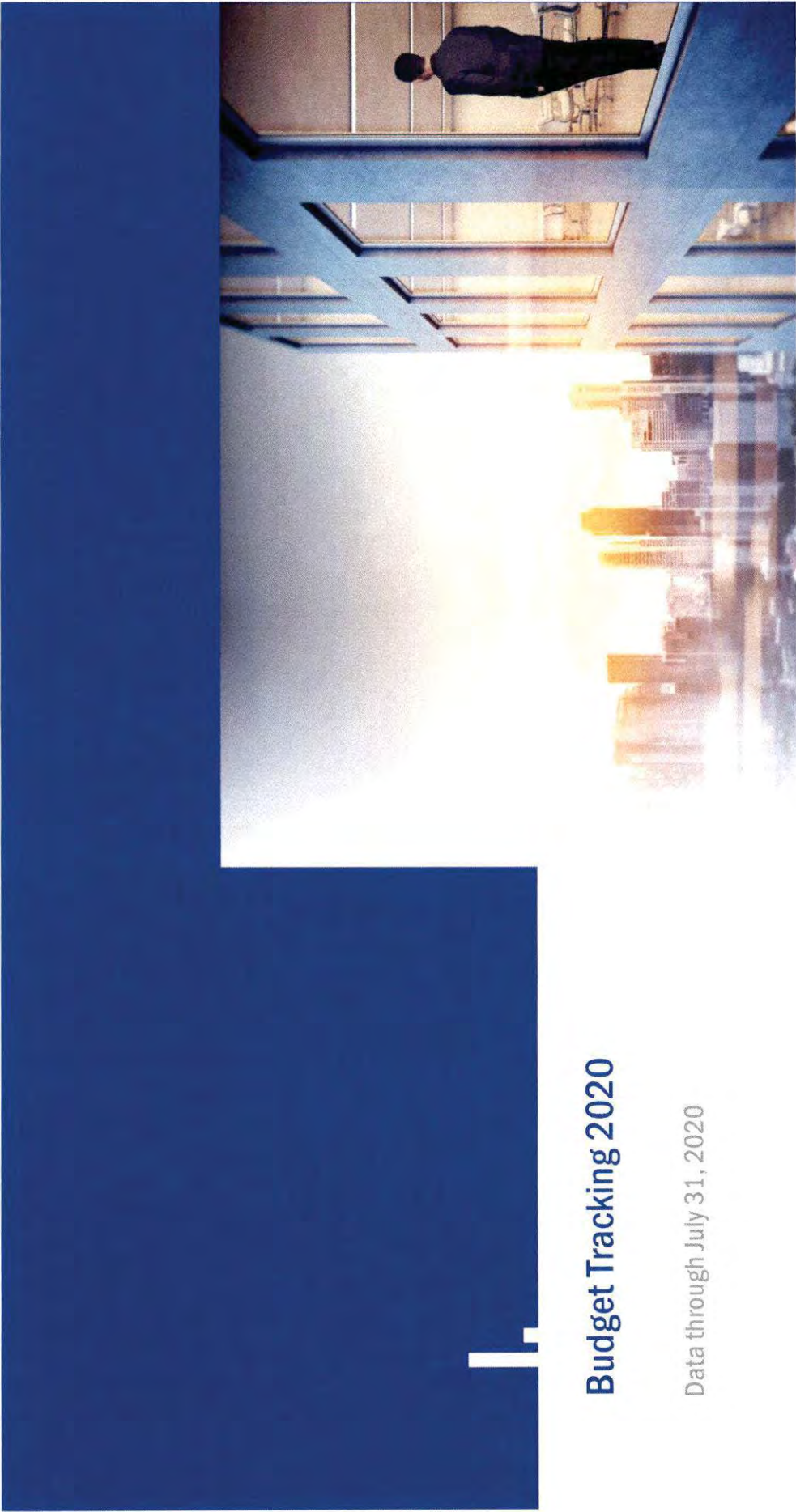
The contents herein are considered Proprietary & Confidential. This material may not be shared or disclosed to any third parties without the approval of Conner Strong & Buckelew.

CONNER
STRONG &
BUCKELEW



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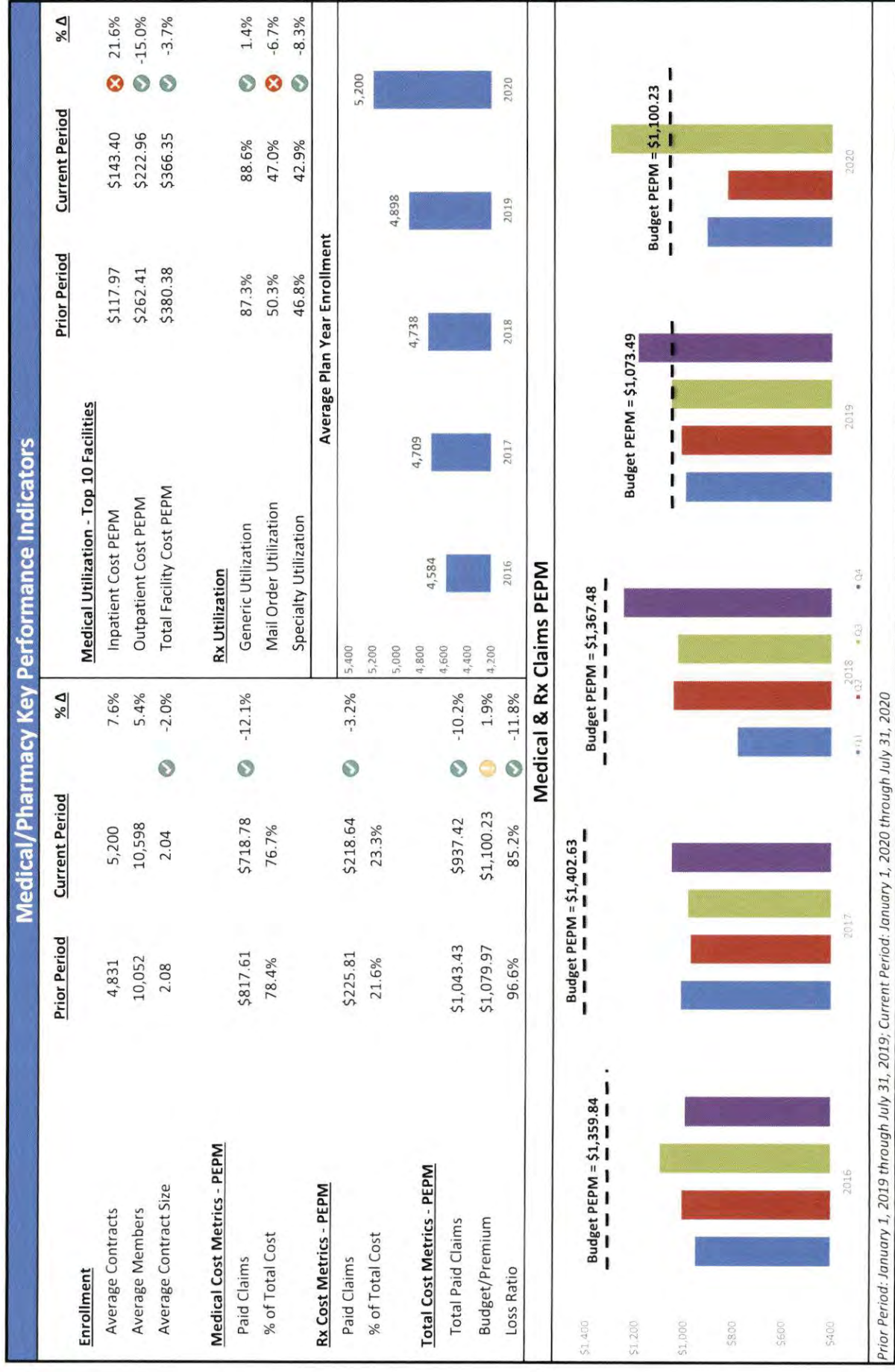
Budget Tracking 2020

Data through July 31, 2020

Sample

BeneView Reporting Package Spotlight Key Indicators

CONNER
STRONG &
BUCKELEW

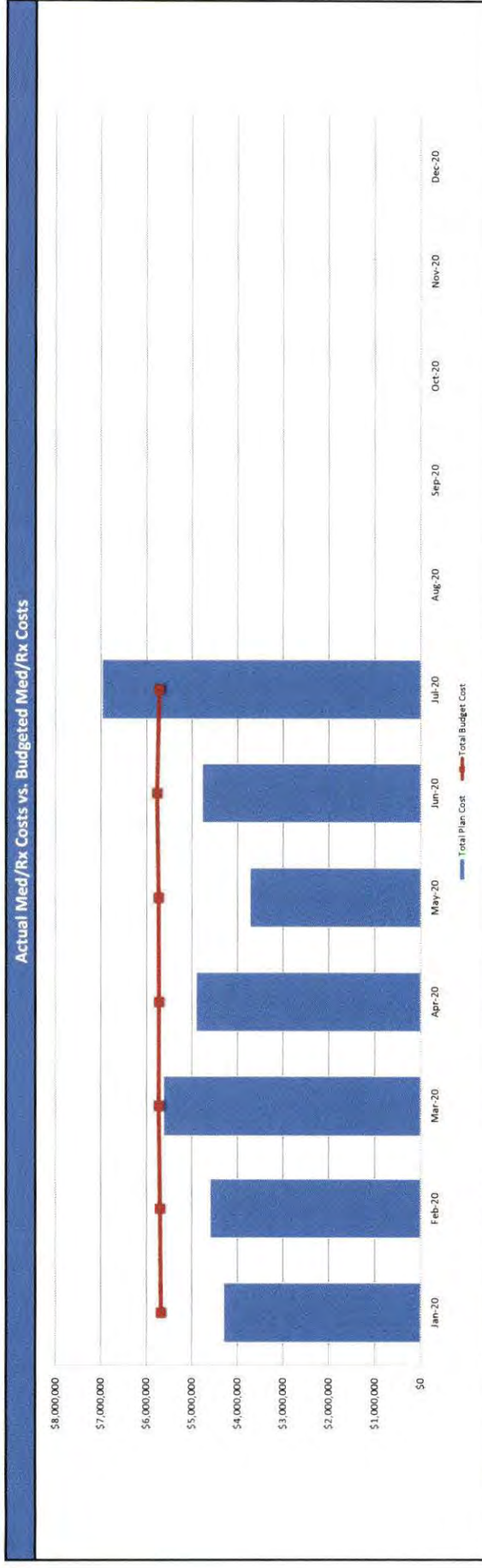


Sample

BeneView Reporting Package Budget Reconciliation

CONNER
STRONG &
BUCKELEW

Medical	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	YTD
Enrollment	5,142	5,175	5,201	5,203	5,210	5,260	5,210	--	--	--	--	--	36,401
Claims	\$3,034,150	\$3,546,890	\$4,312,877	\$3,731,684	\$2,471,074	\$3,526,734	\$5,541,062	--	--	--	--	--	\$26,164,472
SL Reimbursement	\$0	\$0	\$0	\$0	\$0	\$0	\$0	--	--	--	--	--	\$0
Fixed Fees	\$298,953	\$300,708	\$302,250	\$302,338	\$302,794	\$305,418	\$302,634	--	--	--	--	--	\$2,115,095
Pharmacy													
Enrollment	5,142	5,175	5,201	5,203	5,210	5,260	5,210	--	--	--	--	--	36,401
Claims	\$1,182,251	\$928,440	\$1,222,859	\$1,059,031	\$1,144,708	\$1,130,580	\$1,290,797	--	--	--	--	--	\$7,958,667
Rebates	(\$210,075)	(\$174,240)	(\$216,180)	(\$177,450)	(\$187,110)	(\$181,650)	(\$161,580)	--	--	--	--	--	(\$1,308,285)
Total Plan Cost	\$4,305,279	\$4,601,798	\$5,621,806	\$4,915,603	\$3,731,467	\$4,781,083	\$6,972,913	--	--	--	--	--	\$34,929,949
Total Budget Cost	\$5,676,114	\$5,698,683	\$5,725,554	\$5,724,186	\$5,731,617	\$5,770,159	\$5,723,228	--	--	--	--	--	\$40,049,541
\$ Surplus / (Deficit)	\$1,370,836	\$1,096,885	\$103,748	\$808,582	\$2,000,150	\$989,076	(\$1,249,685)	--	--	--	--	--	\$5,119,592
Cost to Budget %	75.8%	80.8%	98.2%	85.9%	65.1%	82.9%	121.8%	--	--	--	--	--	87.2%



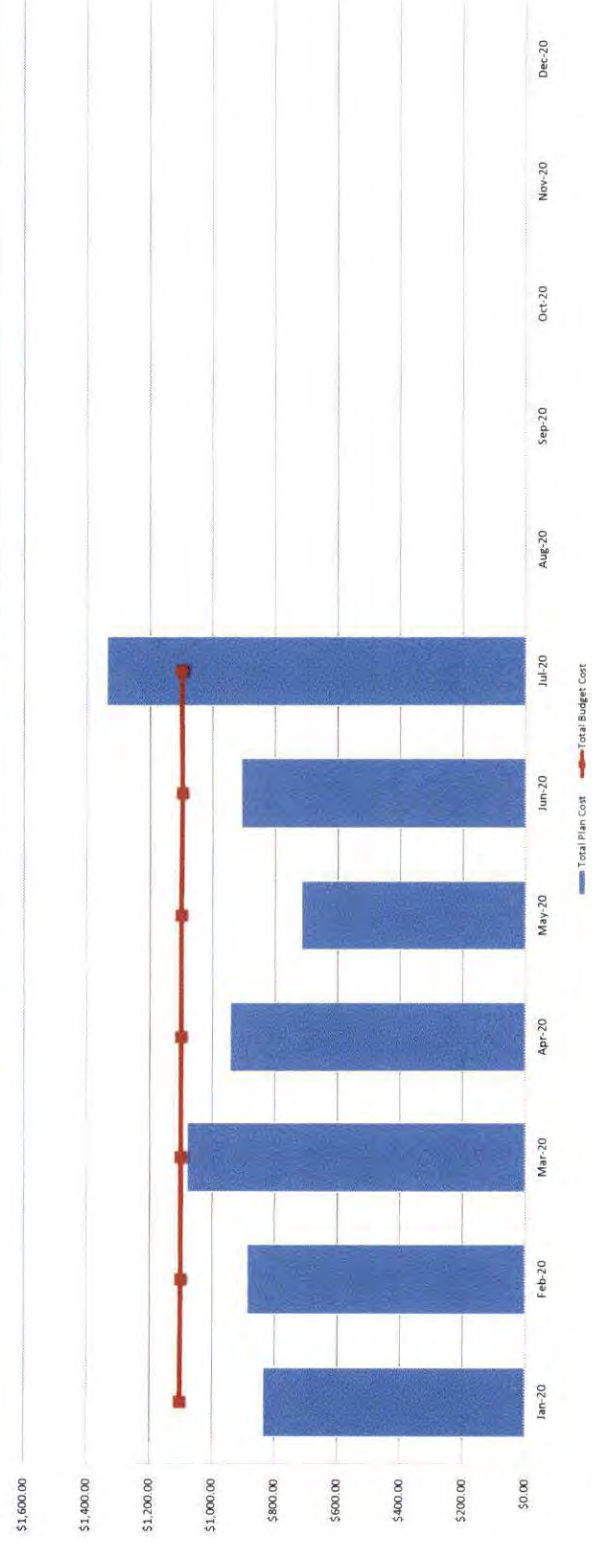
Sample

BeneView Reporting Package Budget Reconciliation - PEPM

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Medical	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	YTD
Enrollment	5,142	5,175	5,201	5,203	5,210	5,260	5,210	--	--	--	--	--	5,200
Claims	\$590.07	\$685.39	\$829.24	\$717.22	\$474.29	\$670.48	\$1,063.54	--	--	--	--	--	\$718.78
SL Reimbursement	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	--	--	--	--	--	\$0.00
Fixed Fees	\$58.14	\$58.11	\$58.11	\$58.11	\$58.12	\$58.06	\$58.09	--	--	--	--	--	\$58.11
Pharmacy													
Enrollment	5,142	5,175	5,201	5,203	5,210	5,260	5,210	--	--	--	--	--	5,200
Claims	\$229.92	\$179.41	\$235.12	\$203.54	\$219.71	\$214.94	\$247.75	--	--	--	--	--	\$218.64
Rebates	(\$40.85)	(\$33.67)	(\$41.57)	(\$34.11)	(\$35.91)	(\$34.53)	(\$31.01)	--	--	--	--	--	(\$35.94)
Total Plan Cost	\$837.28	\$889.24	\$1,080.91	\$944.76	\$716.21	\$908.95	\$1,338.37	--	--	--	--	--	\$959.59
Total Budget Cost	\$1,103.87	\$1,101.19	\$1,100.86	\$1,100.17	\$1,100.12	\$1,096.99	\$1,098.51	--	--	--	--	--	\$1,100.23
\$ Surplus / (Deficit)	\$266.60	\$211.96	\$19.95	\$155.41	\$383.91	\$188.04	(\$239.86)	--	--	--	--	--	\$140.64
Cost to Budget %	75.8%	80.8%	98.2%	85.9%	65.1%	82.9%	121.8%	--	--	--	--	--	87.2%

Actual Med/Rx Costs vs. Budgeted Med/Rx Costs - PEPM



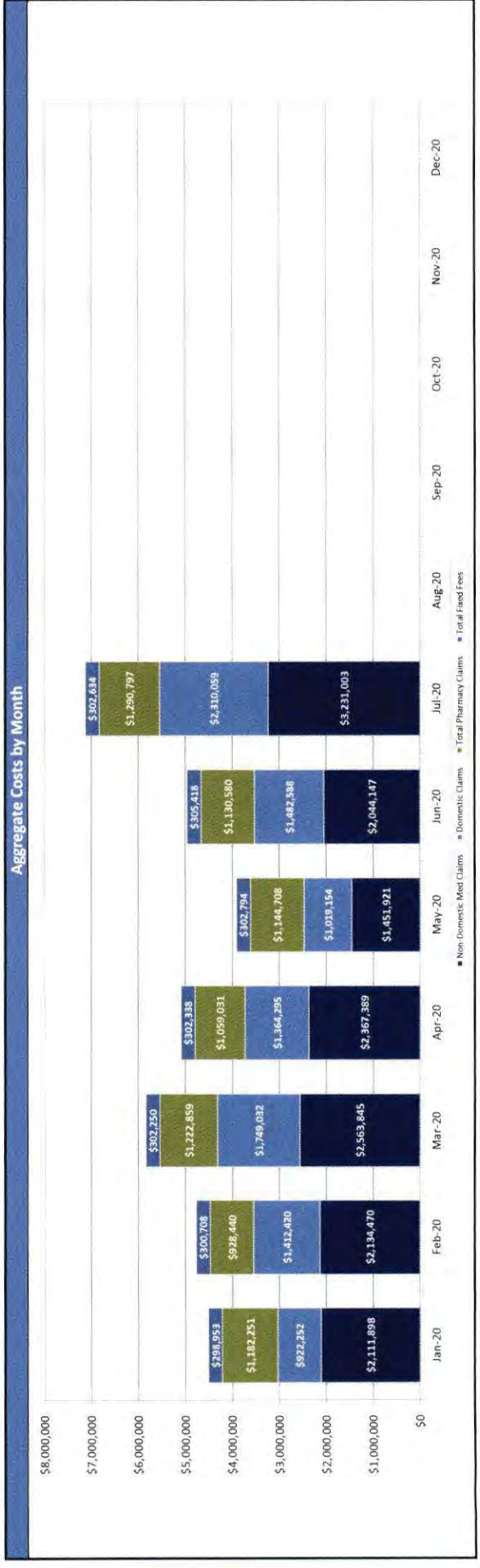
Sample

BeneView Reporting Package

Medical and Pharmacy - Aggregate



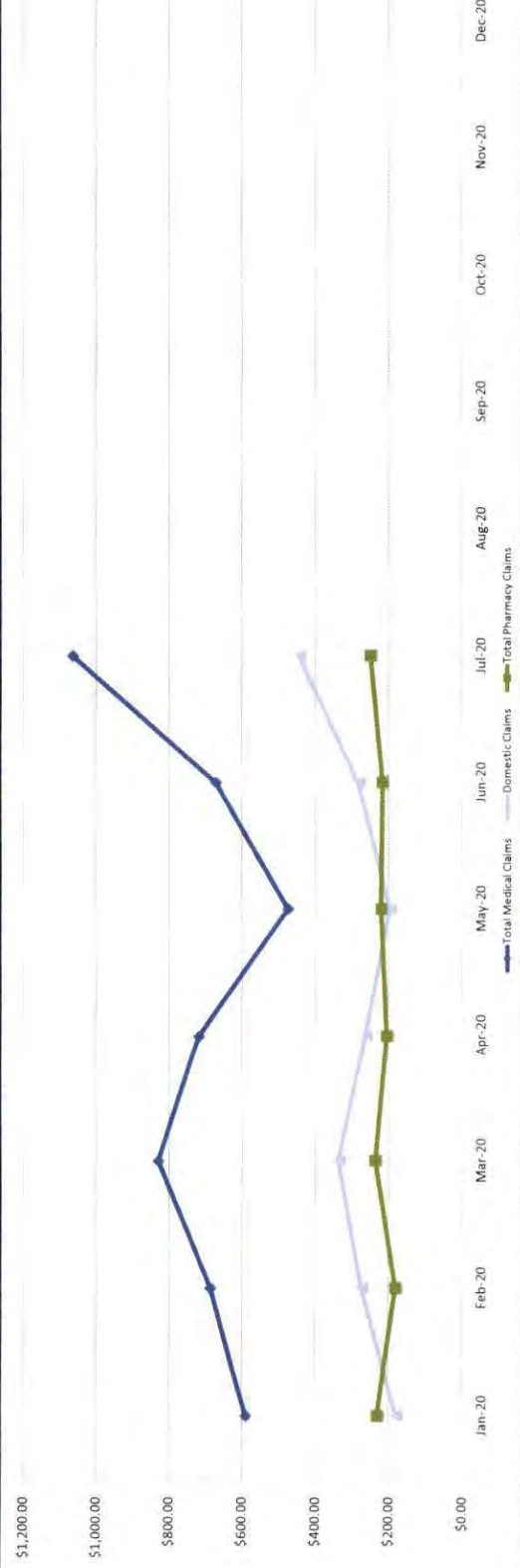
Enrollment	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	YTD
Plan 1	256	250	248	248	246	247	243	-	-	-	-	-	1,738
Plan 2	4,773	4,812	4,839	4,837	4,849	4,898	4,852	-	-	-	-	-	33,860
Plan 3	104	104	105	109	106	106	106	-	-	-	-	-	740
Plan 4	9	9	9	9	9	9	9	-	-	-	-	-	63
Total Enrollment	5,142	5,175	5,201	5,203	5,210	5,260	5,210	-	-	-	-	-	36,401
Medical													
Plan 1	\$941,946	\$487,243	\$469,656	\$541,342	\$166,848	\$461,309	\$617,286	-	-	-	-	-	\$3,685,630
Plan 2	\$2,082,193	\$3,050,928	\$3,837,204	\$3,166,117	\$2,278,117	\$3,062,595	\$4,916,496	-	-	-	-	-	\$22,393,650
Plan 3	\$5,860	\$1,929	\$4,559	\$2,561	\$15,019	\$1,053	\$4,411	-	-	-	-	-	\$33,392
Plan 4	\$4,150	\$6,790	\$1,458	\$21,665	\$13,091	\$1,777	\$2,869	-	-	-	-	-	\$51,800
Total Medical Claims	\$3,034,150	\$3,546,890	\$4,312,877	\$3,731,684	\$2,471,074	\$3,526,734	\$5,541,062	-	-	-	-	-	\$26,164,472
Domestic Claims	\$922,252	\$1,412,420	\$1,749,032	\$1,364,295	\$1,019,154	\$1,482,588	\$2,310,059	-	-	-	-	-	\$10,259,799
Pharmacy													
Total Pharmacy Claims	\$1,182,251	\$928,440	\$1,222,859	\$1,059,031	\$1,144,708	\$1,130,580	\$1,290,797	-	-	-	-	-	\$7,958,667
Estimated Rebates	(\$210,075)	(\$174,240)	(\$216,180)	(\$177,450)	(\$187,110)	(\$181,650)	(\$161,580)	-	-	-	-	-	(\$1,308,285)
Fixed Costs													
ASO Fees	\$238,280	\$239,810	\$241,014	\$241,107	\$241,431	\$243,748	\$241,431	-	-	-	-	-	\$1,686,822
Stop Loss Premium	\$58,453	\$58,670	\$58,996	\$58,991	\$59,120	\$59,414	\$58,967	-	-	-	-	-	\$412,611
HCR Fees	\$2,220	\$2,228	\$2,239	\$2,240	\$2,243	\$2,256	\$2,236	-	-	-	-	-	\$15,661
Total Fixed Fees	\$298,953	\$300,708	\$302,250	\$302,338	\$302,794	\$305,418	\$302,634	-	-	-	-	-	\$2,115,095
Total Plan Cost	\$4,305,279	\$4,601,798	\$5,621,806	\$4,915,603	\$3,731,467	\$4,781,083	\$6,972,913	-	-	-	-	-	\$34,929,949



BeneView Reporting Package Medical and Pharmacy - PEPM

Enrollment	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	YTD
Plan 1	256	250	248	248	246	247	243	--	--	--	--	--	248
Plan 2	4,773	4,812	4,839	4,837	4,849	4,898	4,852	--	--	--	--	--	4,837
Plan 3	104	104	105	109	106	106	106	--	--	--	--	--	106
Plan 4	9	9	9	9	9	9	9	--	--	--	--	--	9
Total Enrollment	5,142	5,175	5,201	5,203	5,210	5,260	5,210	--	--	--	--	--	5,200
Medical													
Plan 1	\$3,679.48	\$1,948.97	\$1,893.78	\$2,182.83	\$678.24	\$1,867.65	\$2,540.27	--	--	--	--	--	\$2,120.62
Plan 2	\$436.24	\$634.02	\$797.97	\$654.56	\$469.81	\$625.27	\$1,013.29	--	--	--	--	--	\$661.36
Plan 3	\$56.35	\$18.55	\$43.42	\$23.50	\$122.82	\$9.93	\$41.61	--	--	--	--	--	\$45.12
Plan 4	\$461.13	\$754.48	\$162.05	\$2,407.17	\$1,454.55	\$197.39	\$318.78	--	--	--	--	--	\$822.22
Total Medical Claims	\$590.07	\$685.39	\$829.24	\$717.22	\$474.29	\$670.48	\$1,063.54	--	--	--	--	--	\$718.78
Domestic Claims	\$179.36	\$272.93	\$336.29	\$262.21	\$195.61	\$281.86	\$443.39	--	--	--	--	--	\$281.85
Pharmacy													
Total Pharmacy Claims	\$229.92	\$179.41	\$235.12	\$203.54	\$219.71	\$214.94	\$247.75	--	--	--	--	--	\$218.64
Estimated Rebates	(\$40.85)	(\$33.67)	(\$41.57)	(\$34.11)	(\$35.91)	(\$34.53)	(\$31.01)	--	--	--	--	--	(\$35.94)
Fixed Costs													
ASO Fees	\$46.34	\$46.34	\$46.34	\$46.34	\$46.34	\$46.34	\$46.34	--	--	--	--	--	\$46.34
Stop Loss Premium	\$11.37	\$11.34	\$11.34	\$11.34	\$11.35	\$11.30	\$11.32	--	--	--	--	--	\$11.34
HCR Fees	\$0.43	\$0.43	\$0.43	\$0.43	\$0.43	\$0.43	\$0.43	--	--	--	--	--	\$0.43
Total Fixed Fees	\$58.14	\$58.11	\$58.11	\$58.11	\$58.12	\$58.06	\$58.09	--	--	--	--	--	\$58.11
Total Plan Cost	\$837.28	\$889.24	\$1,080.91	\$944.76	\$716.21	\$908.95	\$1,338.37	--	--	--	--	--	\$959.59

PEPM Costs by Month





Med/Rx Summary

Data through July 31, 2020

Sample

BeneView Reporting Package Medical Enrollment and Claims

CONNER
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BUCKLEW

Date	Plan 1				Plan 2				Plan 3				Plan 4			
	Contracts	Members	Contract Size	Claims PPM	Contracts	Members	Contract Size	Claims PPM	Contracts	Members	Contract Size	Claims PPM	Contracts	Members	Contract Size	Claims PPM
Jan-18	1,736	3,922	2.26	\$1,098,662	\$632.87	2,855	5,904	2.07	\$678,368	\$237.61	85	120	1.41	28	2.55	\$1,907
Feb-18	1,726	3,892	2.25	\$592,370	\$343.30	2,885	5,950	2.06	\$405,800	\$140.66	83	118	1.42	28	2.55	\$1,583
Mar-18	1,725	3,876	2.25	\$2,736,857	\$1,586.58	2,893	5,943	2.05	\$2,345,630	\$810.80	82	115	1.40	28	2.55	\$1,556
Apr-18	1,736	3,895	2.24	\$1,880,334	\$1,054.34	2,896	5,971	2.06	\$1,999,552	\$483.27	81	116	1.43	31	2.58	\$591
May-18	1,734	3,893	2.25	\$2,420,996	\$1,356.19	2,920	6,000	2.05	\$2,313,756	\$792.18	78	109	1.40	28	2.33	\$1,798
Jun-18	1,720	3,871	2.25	\$1,756,167	\$1,021.03	2,943	6,024	2.05	\$2,075,665	\$705.29	81	111	1.37	27	2.45	\$5196
Jul-18	1,708	3,836	2.25	\$1,628,106	\$953.22	2,924	5,982	2.05	\$1,610,987	\$550.95	82	112	1.37	27	2.45	\$116,887
Aug-18	1,715	3,845	2.24	\$2,528,181	\$1,474.16	2,934	6,001	2.05	\$2,434,795	\$829.85	86	116	1.35	26	2.60	\$816,98
Sep-18	1,721	3,841	2.23	\$1,431,689	\$831.89	2,946	6,015	2.04	\$2,073,797	\$703.94	88	118	1.34	27	2.45	\$8,497
Oct-18	1,727	3,844	2.23	\$1,804,566	\$1,028.82	2,959	6,026	2.04	\$1,875,275	\$635.10	91	121	1.33	26	2.60	\$16,189
Nov-18	1,714	3,802	2.22	\$2,521,003	\$1,470.83	2,944	5,990	2.03	\$2,410,795	\$818.88	89	119	1.34	26	2.60	\$65,333
Dec-18	1,714	3,803	2.22	\$2,885,830	\$1,683.68	2,972	5,972	2.04	\$2,281,742	\$1,121.20	91	122	1.34	26	2.60	\$1,762.76
Jan-19	1,726	3,825	2.22	\$1,647,280	\$954.39	2,972	5,998	2.05	\$1,990,183	\$669.64	104	145	1.39	26	2.60	\$1,003.14
Feb-19	1,721	3,794	2.20	\$2,136,468	\$1,241.41	2,978	6,111	2.05	\$1,830,487	\$614.67	103	144	1.40	26	2.60	\$2,898
Mar-19	1,716	3,781	2.20	\$1,778,921	\$1,036.67	2,993	6,127	2.05	\$1,778,697	\$594.29	103	143	1.39	25	2.78	\$4,632
Apr-19	1,698	3,727	2.19	\$1,699,519	\$1,000.89	2,999	6,104	2.04	\$1,730,798	\$577.12	104	144	1.38	24	2.67	\$233.30
May-19	1,699	3,723	2.19	\$2,043,801	\$1,202.35	3,009	6,117	2.03	\$2,418,854	\$803.87	104	140	1.35	24	2.67	\$78,837
Jun-19	1,705	3,718	2.18	\$1,621,201	\$950.85	3,058	6,181	2.02	\$1,946,138	\$636.41	107	146	1.36	24	2.67	\$3,671
Jul-19	1,702	3,714	2.18	\$1,963,292	\$1,153.52	3,045	6,158	2.02	\$2,775,642	\$910.88	108	150	1.39	24	2.67	\$2,631
Aug-19	1,716	3,730	2.17	\$1,993,542	\$1,161.74	3,096	6,233	2.01	\$2,097,421	\$677.46	111	157	1.41	24	2.67	\$7,635
Sep-19	1,736	3,748	2.16	\$1,698,524	\$978.41	3,119	6,280	2.02	\$1,881,265	\$603.16	114	166	1.46	24	2.67	\$13,388
Oct-19	1,734	3,738	2.16	\$2,363,091	\$1,362.80	3,157	6,341	2.01	\$2,415,673	\$765.18	116	169	1.46	24	2.67	\$1,981
Nov-19	1,727	3,724	2.16	\$2,390,459	\$1,384.17	3,158	6,341	2.01	\$2,078,992	\$688.33	117	170	1.45	24	2.67	\$13,400
Dec-19	1,722	3,710	2.15	\$2,726,472	\$1,583.32	3,176	6,374	2.01	\$2,664,102	\$838.82	118	172	1.46	24	2.67	\$3,480
Jan-20	256	575	2.25	\$941,346	\$3,679.48	4,773	9,765	2.05	\$2,081,193	\$436.24	104	148	1.42	27	3.00	\$461.13
Feb-20	250	558	2.23	\$487,243	\$1,948.97	4,812	9,824	2.04	\$3,050,928	\$634.02	104	146	1.40	27	3.00	\$6,790
Mar-20	248	556	2.24	\$469,656	\$1,893.78	4,839	9,876	2.04	\$3,837,204	\$792.97	105	147	1.40	27	3.00	\$1,458
Apr-20	248	552	2.23	\$541,342	\$2,182.83	4,837	9,878	2.04	\$3,166,117	\$654.56	109	153	1.40	27	3.00	\$21,665
May-20	246	547	2.22	\$166,848	\$678.24	4,849	9,902	2.04	\$2,275,117	\$469.81	106	147	1.39	27	3.00	\$13,091
Jun-20	247	545	2.21	\$461,309	\$1,867.65	4,898	9,966	2.03	\$3,062,595	\$625.27	106	147	1.39	27	3.00	\$1,777
Jul-20	243	540	2.22	\$617,286	\$2,540.27	4,852	9,876	2.04	\$4,916,496	\$1,013.29	106	150	1.42	27	3.00	\$2,869
Aug-20	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Sep-20	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Oct-20	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Nov-20	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dec-20	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Average 2018	1,723	3,860	2.24	\$1,844,563	\$1,128.59	2,919	5,982	2.05	\$1,909,180	\$654.09	85	116	1.37	27	2.50	\$20,781
Average 2019	1,717	3,744	2.18	\$2,005,131	\$1,167.92	3,063	6,206	2.03	\$2,133,854	\$696.58	109	154	1.41	24	2.66	\$11,442
Average 2020	248	553	2.23	\$526,519	\$2,120.62	4,837	9,870	2.04	\$3,199,093	\$661.36	106	148	1.40	27	3.00	\$7,400

Sample

BeneView Reporting Package

Rx Enrollment and Claims

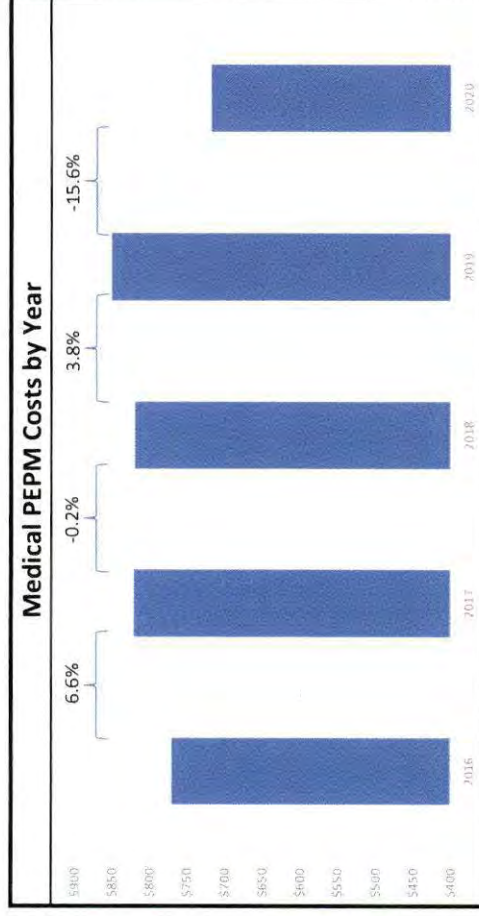
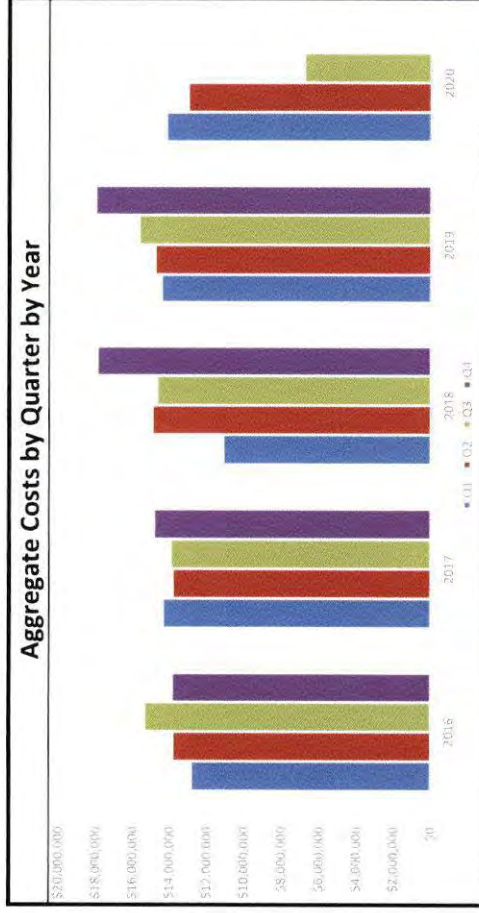


Date	Total Rx				
	Contracts	Members	Contract Size	Claims	Claims PEPM
Jan-18	4,687	9,974	2.13	\$1,210,703	\$258.31
Feb-18	4,705	9,988	2.12	\$959,111	\$203.85
Mar-18	4,711	9,962	2.11	\$1,105,848	\$234.74
Apr-18	4,726	10,013	2.12	\$957,004	\$202.50
May-18	4,744	10,030	2.11	\$1,039,293	\$219.08
Jun-18	4,755	10,033	2.11	\$1,099,557	\$231.24
Jul-18	4,725	9,957	2.11	\$827,784	\$175.19
Aug-18	4,745	9,988	2.10	\$1,097,845	\$231.37
Sep-18	4,766	10,001	2.10	\$918,265	\$192.67
Oct-18	4,787	10,017	2.09	\$1,064,523	\$222.38
Nov-18	4,757	9,937	2.09	\$881,521	\$185.31
Dec-18	4,742	9,923	2.09	\$938,589	\$197.93
Jan-19	4,812	10,094	2.10	\$1,155,866	\$240.20
Feb-19	4,812	10,075	2.09	\$986,226	\$204.95
Mar-19	4,821	10,076	2.09	\$1,025,906	\$212.80
Apr-19	4,810	9,999	2.08	\$1,116,454	\$232.11
May-19	4,821	10,004	2.08	\$1,067,063	\$221.34
Jun-19	4,879	10,069	2.06	\$1,061,856	\$217.64
Jul-19	4,864	10,046	2.07	\$1,223,420	\$251.53
Aug-19	4,932	10,144	2.06	\$1,070,661	\$217.08
Sep-19	4,978	10,228	2.05	\$949,595	\$190.76
Oct-19	5,016	10,272	2.05	\$1,114,150	\$222.12
Nov-19	5,011	10,259	2.05	\$1,079,272	\$215.38
Dec-19	5,025	10,280	2.05	\$1,135,766	\$226.02
Jan-20	5,142	10,515	2.04	\$1,182,251	\$229.92
Feb-20	5,175	10,555	2.04	\$928,440	\$179.41
Mar-20	5,201	10,606	2.04	\$1,222,859	\$235.12
Apr-20	5,203	10,610	2.04	\$1,059,031	\$203.54
May-20	5,210	10,623	2.04	\$1,144,708	\$219.71
Jun-20	5,260	10,685	2.03	\$1,130,580	\$214.94
Jul-20	5,210	10,593	2.03	\$1,290,797	\$247.75
Aug-20	--	--	--	--	--
Sep-20	--	--	--	--	--
Oct-20	--	--	--	--	--
Nov-20	--	--	--	--	--
Dec-20	--	--	--	--	--
Average 2018	4,738	9,985	2.11	\$1,008,337	\$212.84
Average 2019	4,898	10,129	2.07	\$1,082,186	\$220.93
Average 2020	5,200	10,598	2.04	\$1,136,952	\$218.64

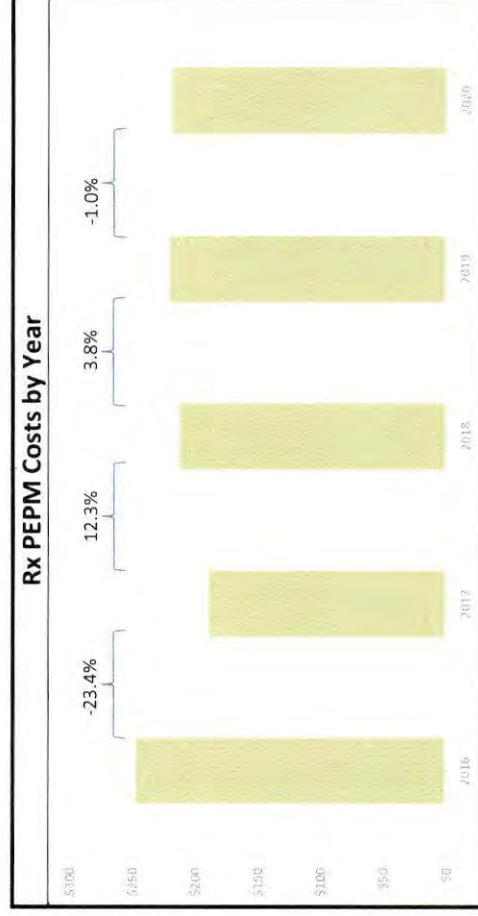
Sample

BeneView Reporting Package PEPM Cost - Quarter over Quarter

CONNER
STRONG &
BUCKELEW



Medical & Rx Quarterly PEPM Cost					
Year	Q1	Q2	Q3	Q4	Average
2016	\$956.46	\$1,013.31	\$1,102.57	\$999.91	\$1,018.64
2017	\$1,017.72	\$979.99	\$991.08	\$1,057.19	\$1,011.45
2018	\$790.47	\$1,051.68	\$1,032.73	\$1,255.62	\$1,033.38
2019	\$1,003.23	\$1,021.97	\$1,062.24	\$1,198.15	\$1,072.60
2020	\$916.84	\$833.52	\$1,311.30	--	\$937.42
Year	Medical		Trend	Rx	Trend
2016	\$771.24		--	\$247.41	--
2017	\$821.98		6.6%	\$189.48	-23.4%
2018	\$820.54		-0.2%	\$212.84	12.3%
2019	\$851.67		3.8%	\$220.93	3.8%
2020	\$718.78		-15.6%	\$218.64	-1.0%



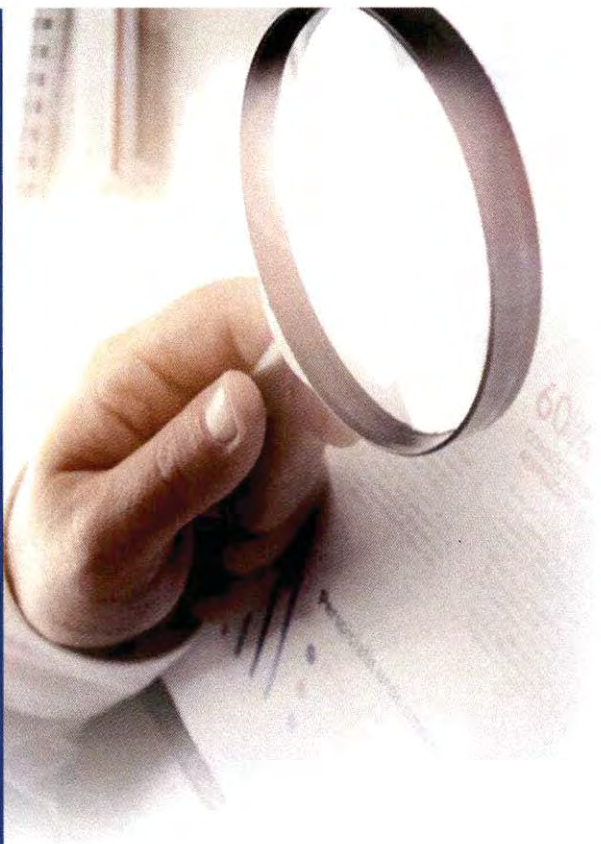
Key Observations:

- » The above is shown on a per employee per month basis
- » All data above included Medical and Rx.
- » PEPM figures are rounded to the nearest whole dollar.
- » Medical and Rx claims data represents year-to-date claims through July 31, 2020.



Utilization

Data through July 31, 2020



Sample

BeneView Reporting Package

Top Facilities

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Facility	% of Total Net Payments	Inpatient		Outpatient	
		Admits/1,000	Net Payments	Services/1,000	Net Payments
Facility 1, NJ	66.9%	41.2	\$3,384,352	5,855.0	\$6,862,811
Facility 2, PA	4.5%	N/A	\$565,793	28.8	\$127,925
Facility 3, PA	3.2%	N/A	\$354,904	66.4	\$141,001
Facility 4, NJ	2.9%	2.5	\$179,007	28.5	\$270,438
Facility 5, PA	2.5%	N/A	\$0	1.7	\$387,048
Facility 6, PA	2.3%	N/A	\$344,810	N/A	\$0
Facility 7, NJ	1.5%	1.3	\$96,792	18.7	\$136,800
Facility 8, NY	1.3%	N/A	\$203,160	1.7	\$0
Facility 9, NJ	0.9%	1.0	\$90,918	12.5	\$53,606
Facility 10, NJ	0.9%	N/A	\$0	47.7	\$136,251
Total Top 10	87.1%		\$5,219,735	6,061.2	\$8,115,879
					53.0%

Key Notes:

- » The top 5 facilities are seeing 80.2% utilization of all Inpatient and Outpatient claims with the top 10 seeing a total of 87.1%.
- » The top 10 inpatient facilities accounted for 34.1% of all facility claims with a total of 46.0 Inpatient admits per 1,000.
- » The top 10 outpatient facilities accounted for 53.0% of all facility claims in payments with a total of 6,061.2 services performed per 1,000.

Sample

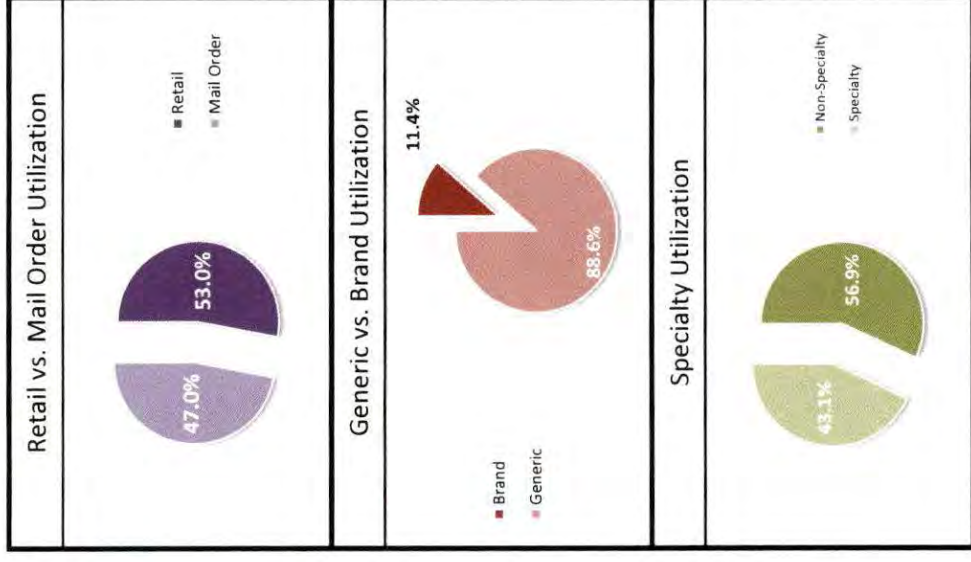
BeneView Reporting Package

Rx Utilization



Month	Utilization			Specialty Rx Utilization		
	Retail	Mail Order	Generic	Total Paid Claims	Specialty Claims *	Specialty Claims %
Jan-20	52.7%	47.3%	88.2%	\$1,182,251	\$536,493	45.4%
Feb-20	55.3%	44.7%	89.3%	\$928,440	\$401,026	43.2%
Mar-20	53.8%	46.2%	88.0%	\$1,222,859	\$504,915	41.3%
Apr-20	52.6%	47.4%	88.7%	\$1,059,031	\$425,773	40.2%
May-20	52.6%	47.4%	88.4%	\$1,144,708	\$491,181	42.9%
Jun-20	51.5%	48.5%	88.6%	\$1,130,580	\$420,244	37.2%
Jul-20	52.7%	47.3%	88.9%	\$1,290,797	\$650,048	50.4%
Aug-20	--	--	--	--	--	--
Sep-20	--	--	--	--	--	--
Oct-20	--	--	--	--	--	--
Nov-20	--	--	--	--	--	--
Dec-20	--	--	--	--	--	--
Average	53.0%	47.0%	88.6%	\$1,136,952	\$489,954	43.1%
PY2019	50.5%	49.5%	87.5%	\$1,082,186	\$511,947	47.3%
BoB*	84.8%	15.2%	86.0%	--	--	36.8%

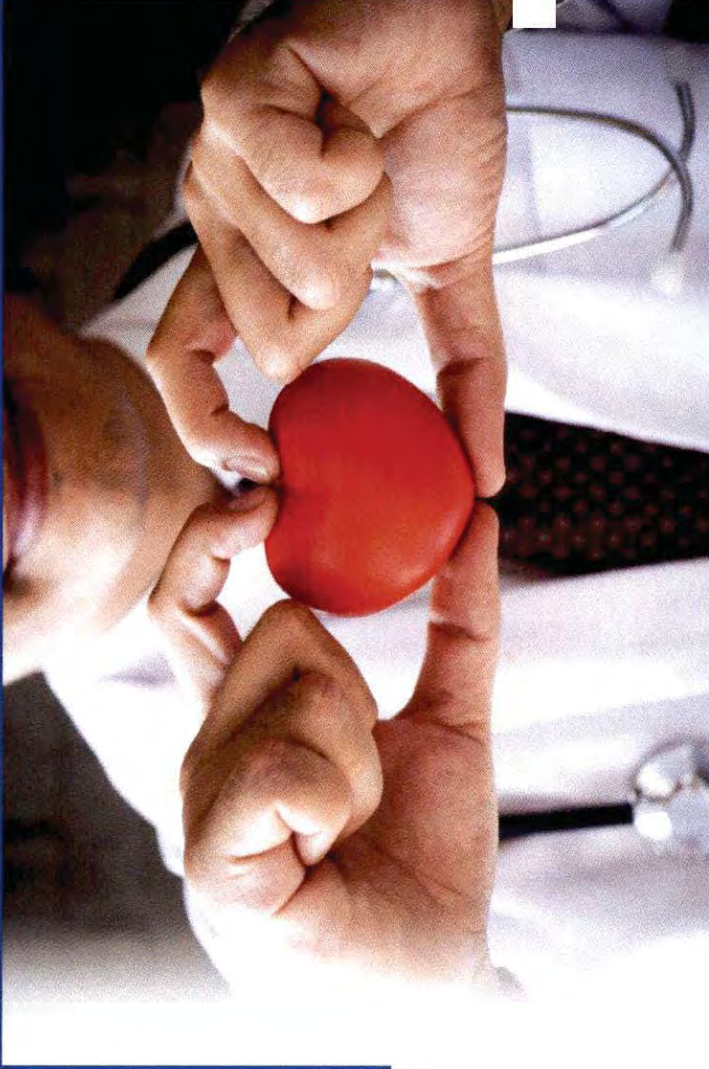
* Book of Business benchmarks are based on the median for time period 1/1/2018 - 12/31/2018.



IV.

High Claims

Data through July 31, 2020



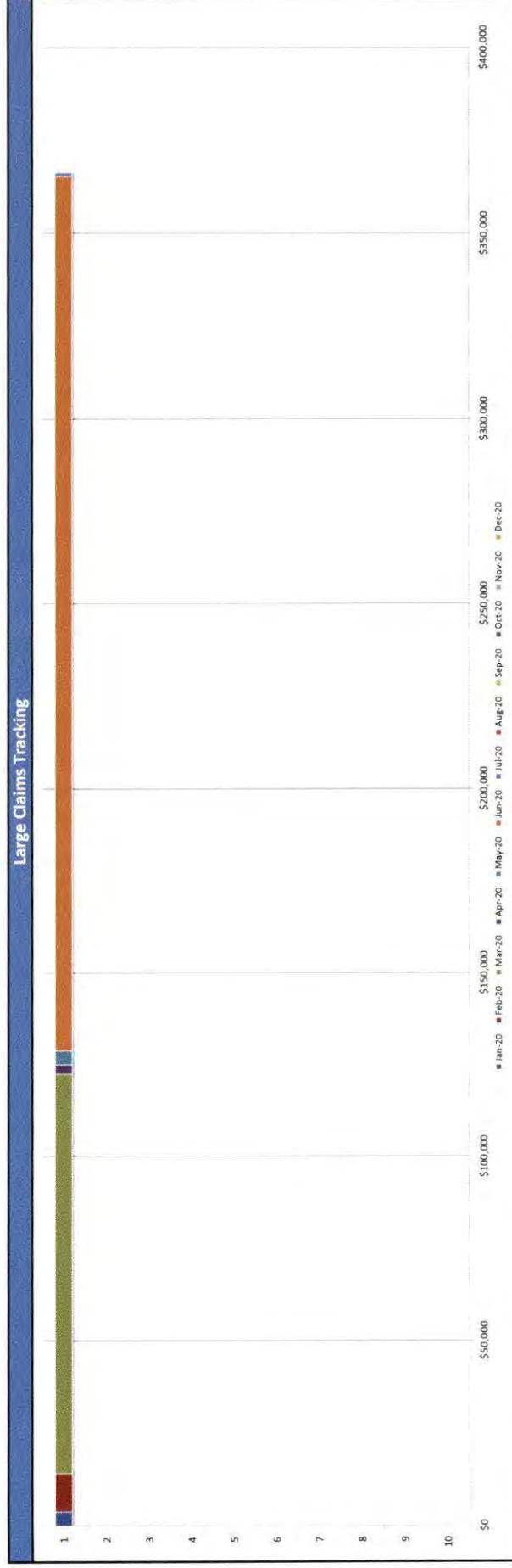
Sample

BeneView Reporting Package

Large Claims Tracking



Number of Large Claims		Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	YTD
Member	ICD Code	Description												
1	1714	ABDOMINAL AORTIC ANEURYSM W/O RUPTURE												
2														
3														
4														
5														
6														
7														
8														
9														
10														
Total Large Claims Paid		\$3,798	\$10,508	\$108,420	\$2,553	\$3,724	\$236,431	\$974	\$0	\$0	\$0	\$0	\$0	\$366,409

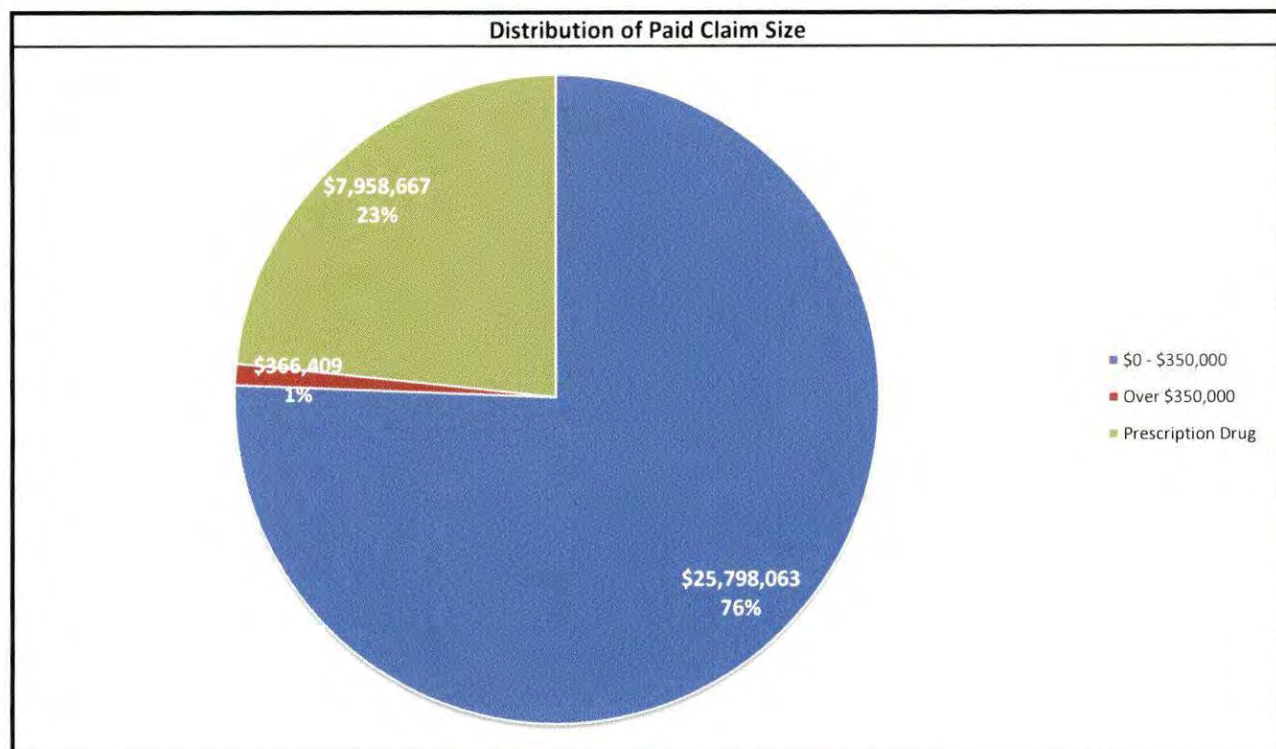


Sample
BeneView Reporting Package
High Claimants



Claims Paid from January 1, 2020 through July 31, 2020				
Member	Relation	Top Diagnosis	Claim Amount (YTD)	Expected Reimbursement
1	EE	ABDOMINAL AORTIC ANEURYSM W/O RUPTURE	\$366,409	\$0
2	--	--	--	--
3	--	--	--	--
4	--	--	--	--
5	--	--	--	--
6	--	--	--	--
7	--	--	--	--
8	--	--	--	--
9	--	--	--	--
10	--	--	--	--
Total	--	--	\$366,409	\$0

Stop Loss Premium (YTD)	\$412,611
Estimated Stop Loss Ratio	0.0%



V

Tracking Graphs

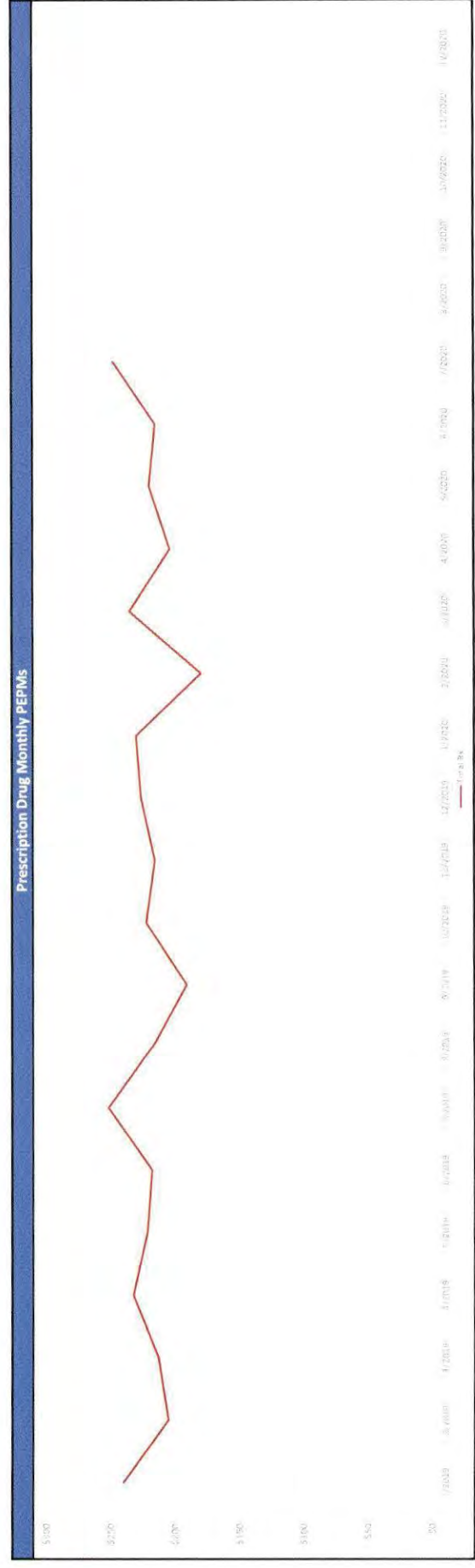
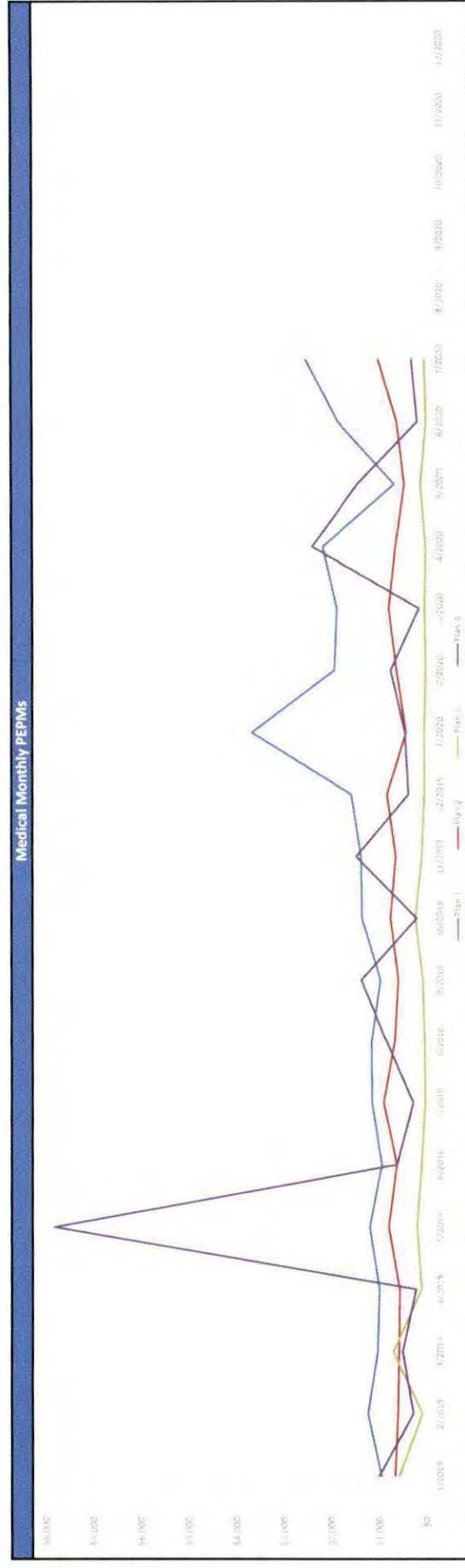
Data through July 31, 2020



Sample

BeneView Reporting Package Medical and Rx Trend Analysis (PEPM)

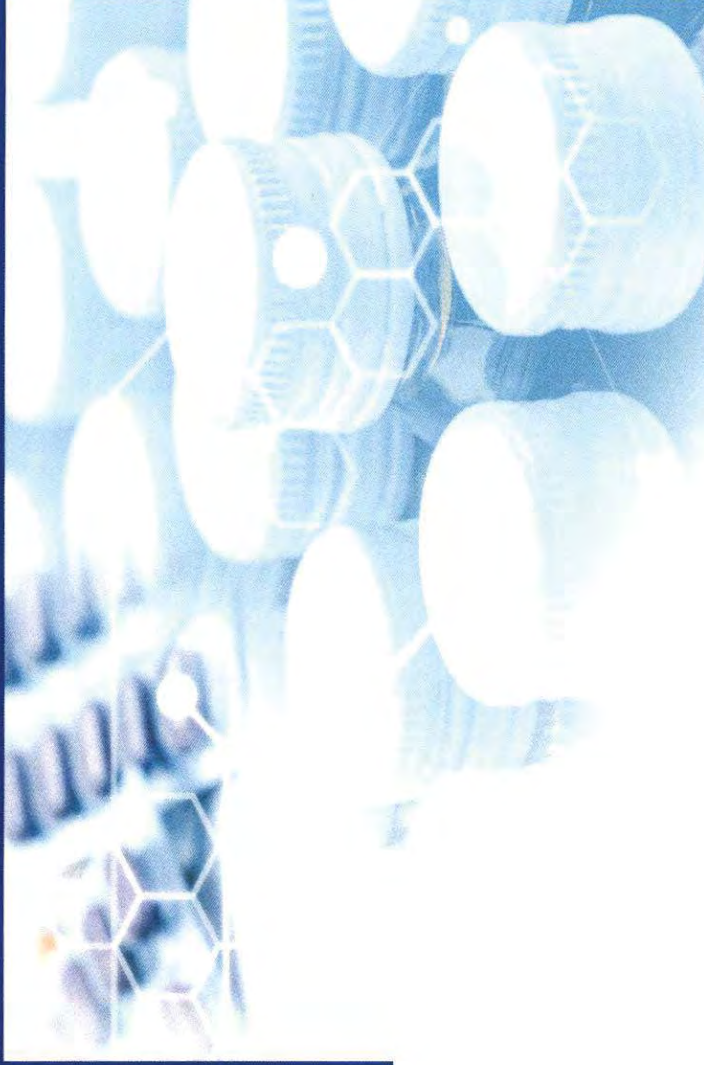
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VI.

Budget Tracking 2019

Data through December 31, 2019



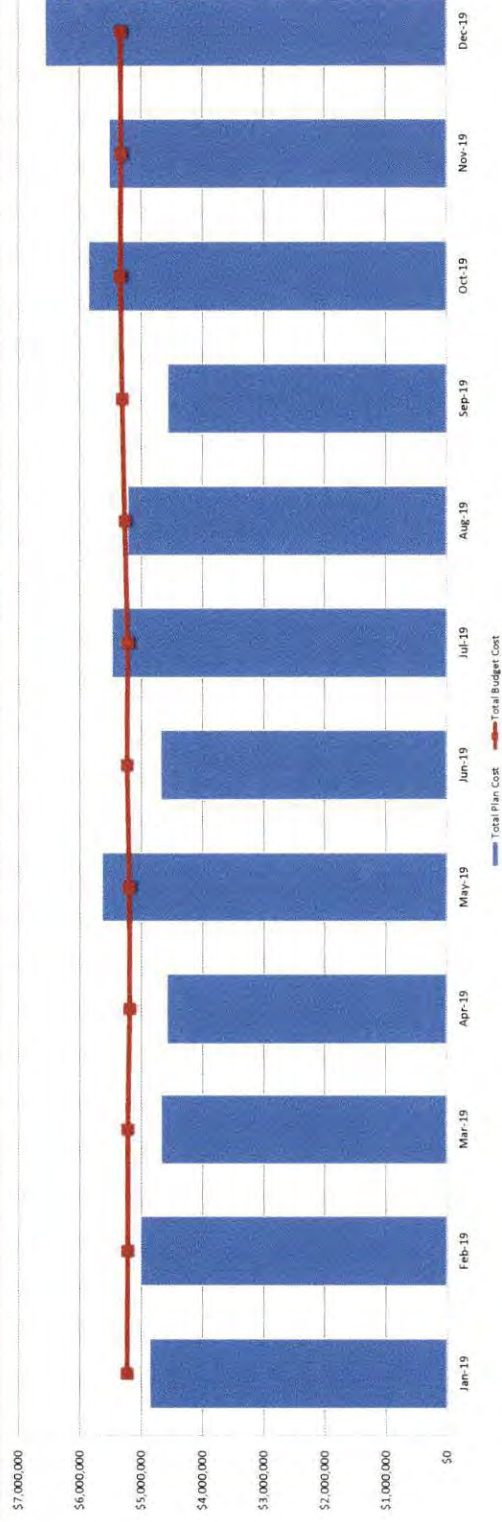
Sample

BeneView Reporting Package

Budget Reconciliation

	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	YTD
Medical													
Enrollment	4,812	4,812	4,821	4,810	4,821	4,879	4,864	4,932	4,978	5,016	5,011	5,025	58,781
Claims	\$3,708,188	\$3,980,177	\$3,635,259	\$3,444,522	\$4,553,502	\$3,585,327	\$4,743,879	\$4,103,734	\$3,602,226	\$4,809,586	\$4,495,295	\$5,400,469	\$50,062,163
SL Reimbursement	\$0	\$0	\$0	\$0	\$0	\$0	(\$502,140)	(\$1,762)	(\$3,911)	(\$73,331)	(\$103,701)	(\$112,179)	(\$598,032)
Fixed Fees	\$266,187	\$266,139	\$266,574	\$265,809	\$266,354	\$269,321	\$268,553	\$272,092	\$274,539	\$276,540	\$276,286	\$277,003	\$3,245,396
Pharmacy													
Enrollment	4,812	4,812	4,821	4,810	4,821	4,879	4,864	4,932	4,978	5,016	5,011	5,025	58,781
Claims	\$1,155,866	\$986,226	\$1,025,906	\$1,116,454	\$1,067,063	\$1,061,856	\$1,223,420	\$1,070,661	\$949,595	\$1,114,150	\$1,079,272	\$1,135,766	\$12,986,234
Rebates	(\$267,236)	(\$217,735)	(\$250,401)	(\$239,886)	(\$240,195)	(\$233,092)	(\$254,297)	(\$228,313)	(\$247,273)	(\$269,936)	(\$220,647)	(\$242,636)	(\$2,911,637)
Total Plan Cost	\$4,863,005	\$5,014,806	\$4,677,337	\$4,586,899	\$5,646,723	\$4,683,412	\$5,479,416	\$5,215,413	\$4,575,166	\$5,837,020	\$5,526,505	\$6,558,423	\$62,684,124
Total Budget Cost	\$5,233,840	\$5,223,537	\$5,223,549	\$5,190,846	\$5,196,510	\$5,234,203	\$5,220,992	\$5,270,847	\$5,311,017	\$5,337,559	\$5,326,539	\$5,331,388	\$63,100,827
\$ Surplus / (Deficit)	\$370,834	\$208,732	\$546,213	\$603,947	(\$450,213)	\$550,791	(\$238,424)	\$55,434	\$735,851	(\$519,461)	(\$199,966)	(\$1,227,035)	\$416,703
Cost to Budget %	92.9%	96.0%	89.5%	88.4%	108.7%	89.5%	104.9%	98.9%	86.1%	109.7%	103.8%	123.0%	99.3%

Actual Med/Rx Costs vs. Budgeted Med/Rx Costs



Sample

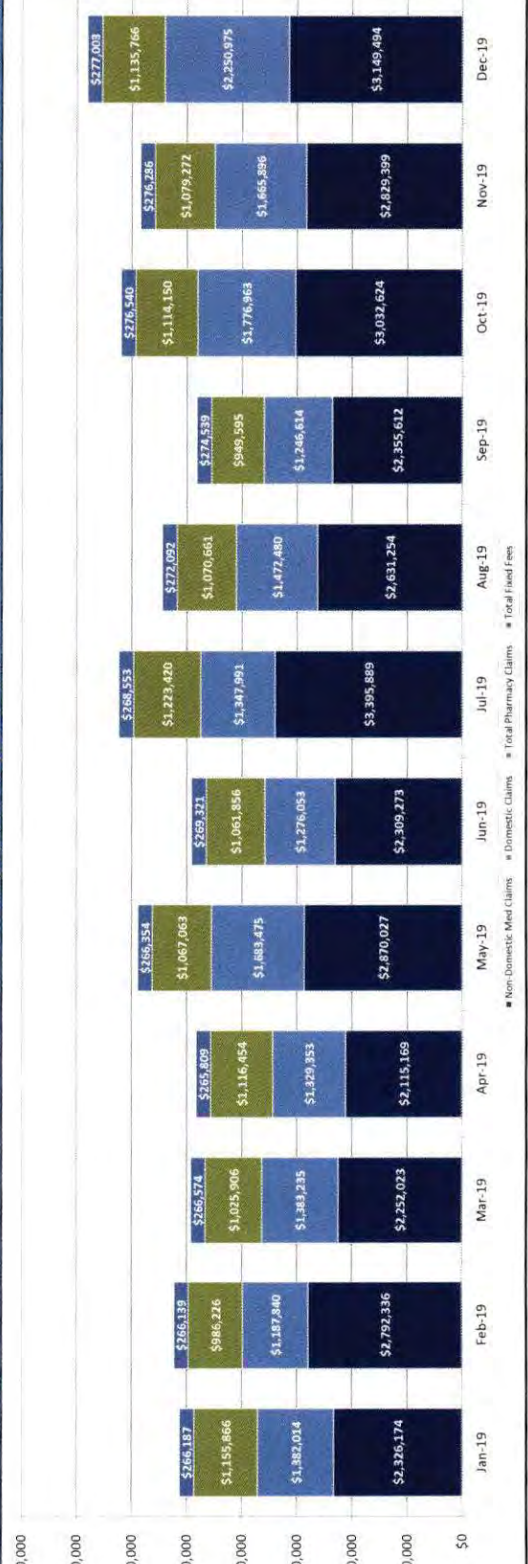
BeneView Reporting Package

Medical and Pharmacy - Aggregate

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Enrollment	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	YTD
Plan 1	1,726	1,721	1,716	1,698	1,699	1,705	1,702	1,716	1,736	1,734	1,727	1,722	20,602
Plan 2	2,972	2,978	2,993	2,999	3,009	3,058	3,045	3,096	3,119	3,157	3,158	3,176	36,760
Plan 3	104	103	103	104	104	107	108	111	114	116	117	118	1,309
Plan 4	10	10	9	9	9	9	9	9	9	9	9	9	110
Total Enrollment	4,812	4,812	4,821	4,810	4,821	4,879	4,864	4,932	4,978	5,016	5,011	5,025	58,781
Medical													
Plan 1	\$1,647,280	\$2,136,468	\$1,778,921	\$1,699,519	\$2,042,801	\$1,621,201	\$1,963,292	\$1,983,542	\$1,698,524	\$2,363,091	\$2,390,459	\$2,726,472	\$24,061,570
Plan 2	\$1,990,183	\$1,830,487	\$1,778,697	\$1,730,798	\$2,418,854	\$1,946,138	\$2,773,642	\$2,097,421	\$1,881,265	\$2,415,673	\$2,078,992	\$2,664,102	\$25,606,252
Plan 3	\$60,694	\$10,323	\$73,009	\$12,106	\$21,392	\$12,316	\$4,314	\$5,137	\$10,049	\$28,841	\$12,444	\$6,414	\$257,039
Plan 4	\$10,031	\$2,898	\$4,632	\$2,100	\$70,455	\$5,671	\$2,631	\$7,635	\$12,388	\$1,981	\$13,400	\$3,480	\$137,303
Total Medical Claims	\$3,708,188	\$3,980,177	\$3,635,259	\$3,444,522	\$4,553,502	\$3,585,327	\$4,743,879	\$4,103,734	\$3,602,226	\$4,809,586	\$4,495,295	\$5,400,469	\$50,062,163
Domestic Claims	\$1,382,014	\$1,187,840	\$1,383,235	\$1,329,353	\$1,683,475	\$1,276,053	\$1,347,991	\$1,472,480	\$1,246,614	\$1,776,963	\$1,665,896	\$2,250,975	\$18,002,889
Pharmacy													
Total Pharmacy Claims	\$1,155,866	\$986,226	\$1,025,906	\$1,116,454	\$1,067,063	\$1,061,856	\$1,223,420	\$1,070,661	\$949,595	\$1,114,150	\$1,079,272	\$1,135,766	\$12,986,234
Estimated Rebates	(\$267,236)	(\$217,735)	(\$250,401)	(\$239,886)	(\$240,195)	(\$233,093)	(\$354,297)	(\$228,313)	(\$247,773)	(\$269,926)	(\$220,647)	(\$242,636)	(\$2,911,637)
Fixed Costs													
ASO Fees	\$214,134	\$214,134	\$214,535	\$214,045	\$214,335	\$217,116	\$216,448	\$219,474	\$221,521	\$223,212	\$222,990	\$223,613	\$2,615,755
Stop Loss Premium	\$49,992	\$49,948	\$49,982	\$49,722	\$49,777	\$50,150	\$50,054	\$50,547	\$50,930	\$51,231	\$51,202	\$51,292	\$604,826
HCR Fees	\$2,061	\$2,057	\$2,057	\$2,041	\$2,042	\$2,056	\$2,051	\$2,071	\$2,088	\$2,097	\$2,095	\$2,099	\$24,816
Total Fixed Fees	\$266,187	\$266,139	\$266,574	\$265,809	\$266,354	\$269,321	\$268,553	\$272,092	\$274,539	\$276,540	\$276,286	\$277,003	\$3,245,396
Total Plan Cost	\$4,863,005	\$5,014,806	\$4,677,337	\$4,586,899	\$5,646,723	\$4,683,412	\$5,981,556	\$5,218,174	\$4,579,087	\$5,930,350	\$5,630,205	\$6,570,602	\$63,382,156

Aggregate Costs by Month

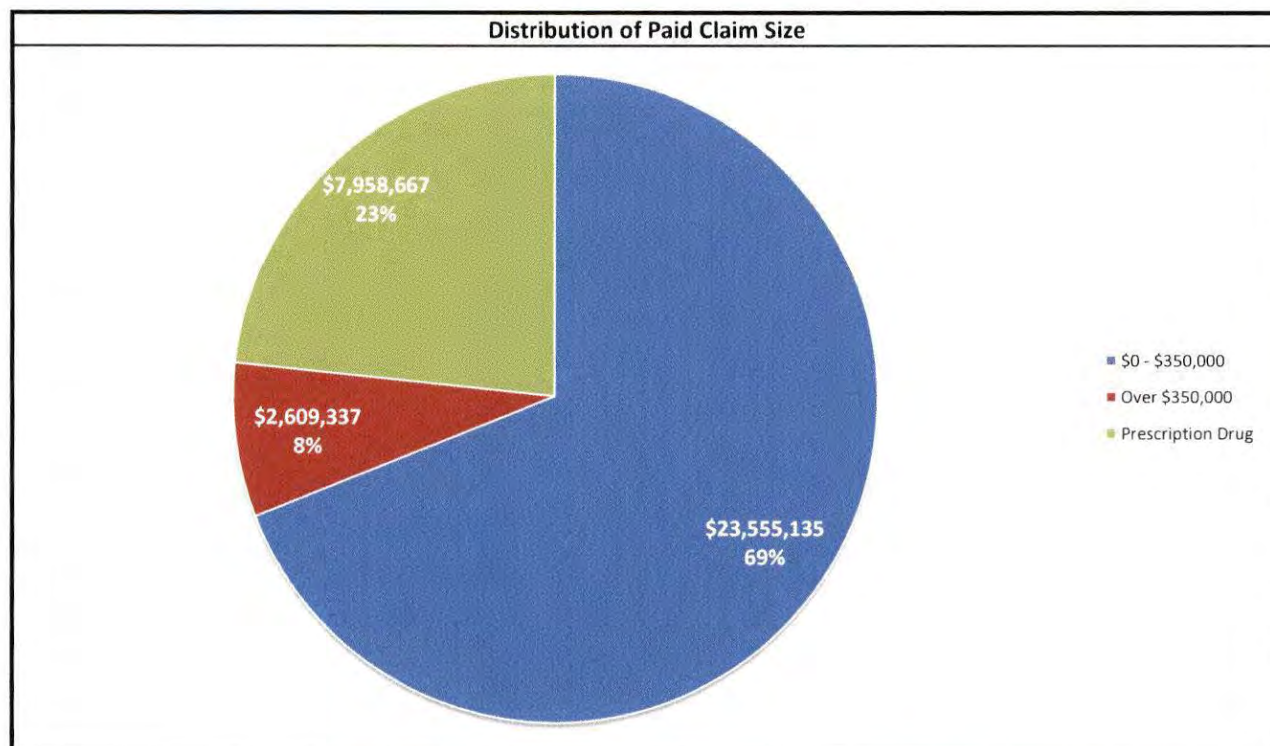


Sample
BeneView Reporting Package
High Claimants

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Claims Paid from January 1, 2019 through December 31, 2019				
Member	Relation	Top Diagnosis	Claim Amount (YTD)	Expected Reimbursement
1	Sp	SEPSIS UNSPECIFIED ORGANISM	\$1,292,707	(\$592,707)
2	Dep	SPINAL MUSCULAR ATROPHY UNSPECIFIED	\$805,325	(\$105,325)
3	Dep	CARDIOMEGALY	\$511,305	\$0
4	--	--	--	--
5	--	--	--	--
6	--	--	--	--
7	--	--	--	--
8	--	--	--	--
9	--	--	--	--
10	--	--	--	--
Total	--	--	\$2,609,337	(\$698,032)

Stop Loss Premium (YTD)	\$604,826
Estimated Stop Loss Ratio	115.4%



Important Note

Conner Strong & Buckelew (CSB) is providing the work product herein in order to assist in the evaluation and analysis of your group benefit plan(s). The work product reflected herein and contained in any exhibits or attachments is based upon data and information supplied by your contracted administrators, carriers, insurers and other vendors engaged in the administration of your plans. In some instances, the data and information may have been supplied by you. As such, CSB cannot warrant the accuracy of said data and information received and used by us in order to produce this analysis. We have evaluated said data and information to the best of our capability and rely upon the representations of your contracted administrators, carriers, insurers and other vendors as to the accuracy of the data and information they have supplied. It is important to note that while our consultants are very familiar with the design, administration and operation of employee benefit plans and the law applicable to those activities, Conner Strong & Buckelew is not a law firm. Therefore, our recommendations should not be construed as, nor are they intended to be, legal advice. You may wish to consult with legal counsel about the issues addressed. The information contained herein is not intended by Conner Strong & Buckelew to be used, and it cannot be used, for the purpose of avoiding penalties under the Internal Revenue Code that may be imposed on the taxpayer. The information contained herein and in any exhibits or attachments is confidential and may not be shared, reproduced or disclosed to any third parties without the express written consent of CSB.

Corona Virus addendum:

Given the uncertainty of the Corona Virus and its resultant impact on an employer's benefit costs, Conner Strong and Buckelew will continue to utilize the carrier's data to report the financial performance of your benefits program. We contend there will be an impact on the changing risk pool and carrier underwriting guidelines. Even more now than ever, CSB cannot warrant the accuracy of said data and information received and used by us in order to produce this analysis. We will continue to work with your carrier partners to update information understanding the newly introduced variables of ever changing enrollment counts and increased claims utilization due to COVID-19. We will also evaluate the anticipated reduction of non-COVID-19 utilization in the short term given mandated legislation to cancel elective surgeries.

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HEALTH STATUS |

10-2016

What's the health of your organization? This report offers a snapshot of your risk profile, risk drivers, high risk members and utilization movement.

GAPS IN CARE

- RX Management
- Cholesterol
- Diabetes
- General Asthma
- Osteoporosis
- Low Back Pain
- CAD
- Rheumatoid Arthritis
- Renal Failure
- Other

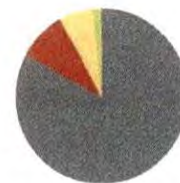


RISK STRATIFICATION



NOV14 - OCT15

- 100% - \$257
- 0% - \$0
- 0% - \$0
- 0% - \$0

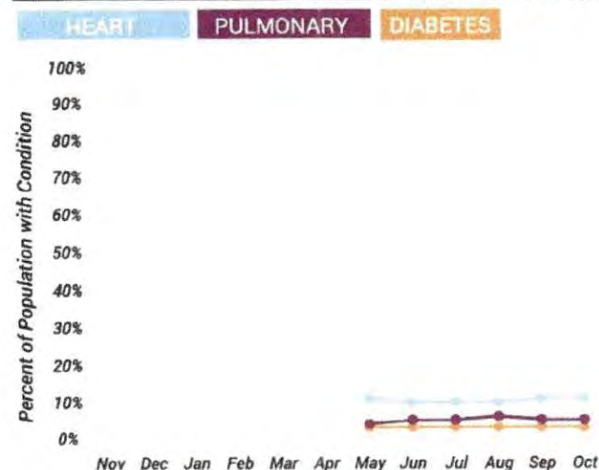


NOV15 - OCT16

- 83% - \$347
- 9% - \$313
- 6% - \$418
- 2% - \$154

GROUP DISEASE PROFILE

FORECASTED RISK



TOP 10 CONDITIONS

FORECASTED COSTS

MEMBERS

% OF POP. W. CONDITION

TOP 10 CONDITIONS	FORECASTED COSTS	MEMBERS	% OF POP. W. CONDITION
Age/Gender/Preventive	\$344,495	690	100 %
Musculoskeletal Disorders	\$163,416	108	16 %
Dermatological Disorder	\$137,960	132	19 %
Minor Infection Related Cond	\$81,141	145	21 %
Metabolic Conditions	\$79,756	82	12 %
Urinary Disorders	\$63,075	47	7 %
Trauma Related Condition	\$61,371	65	9 %
Diabetic Disorders	\$42,965	21	3 %
Chronic Respiratory Disorders	\$42,343	37	5 %
Hypertension	\$37,532	39	6 %

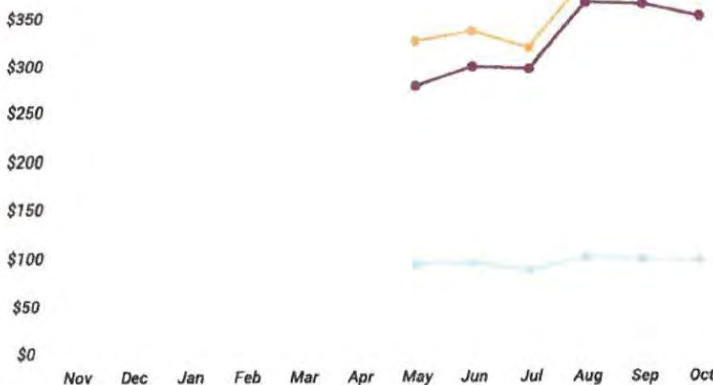
TOP 10 TOTAL FORECASTED COSTS: \$1,054,054

HIGH RISK MEMBERS

UTILIZATION TRENDS

9.1 % ▲ CHANGE

PROFESSIONAL COST PMPM TOTAL COST PMPM FORECASTED COST PMPM



REPORT PROVIDED BY



2016SPRINGBUK. CONFIDENTIAL AND PROPRIETARY

RISK STRATIFICATION

/ NOV14-OCT16

EMPLOYER
RISK PROFILE

Where is your population performing well?

This report makes it easy to classify risk, so you can identify where the greatest opportunities exist in your organization.

BIOMARKERS

LDL



NORMAL RANGE
≤ 129 MG / DL

BMI



NORMAL RANGE
18.5 ≥ BMI ≤ 25

BODY FAT %



NORMAL RANGE

AGE	NORMAL
20-4041-	8% - 19%11% -
6061-79	22%13% - 25%
20-4041-	21% - 33%23% -
6061-79	35%24% - 36%

Triglycerides



NORMAL RANGE
Normal < 150

Tobacco



NORMAL RANGE
100-149 MG / DL

HDL



NORMAL RANGE
MALES
≥ 40 MG / DL
FEMALES
≥ 50 MG / DL

BLOOD PRESSURE



NORMAL RANGE

Systolic	Diastolic
<120	<80

Glucose (Fasting Plasma)



NORMAL RANGE
< 100 MG/DL

Total Cholesterol



NORMAL RANGE
100-149 MG / DL

Waist/Hip

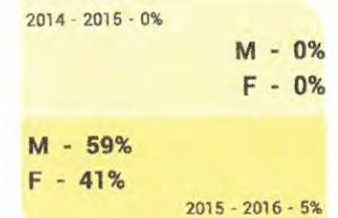


NORMAL RANGE
Male ≥ .95
Female ≥ .8

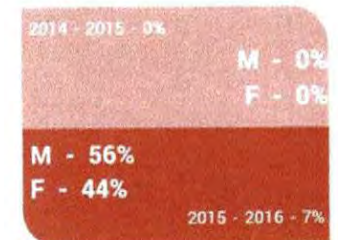
HEALTHY



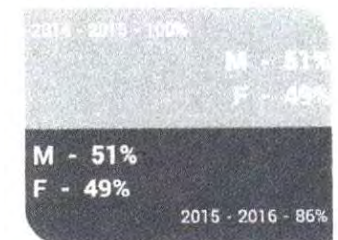
PREVENTABLE



HIGH RISK



UNKNOWN



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FINANCIALS

/ 10-2016

CLAIMS SUMMARY

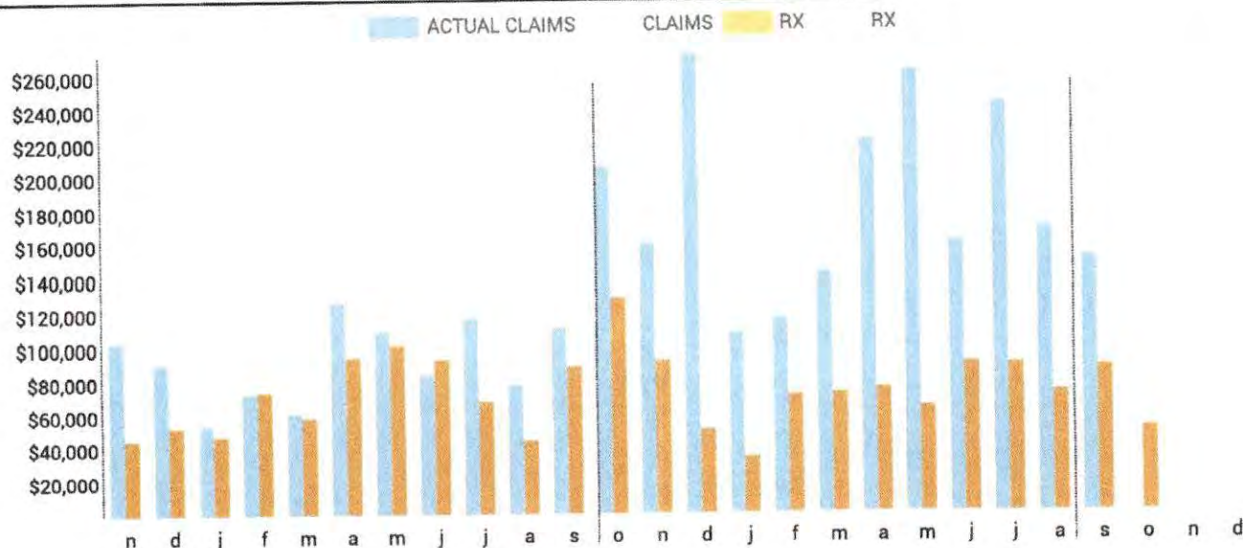
NOV14 - OCT15 / \$2,371,537 / PMPM \$269

NOV15 - OCT16 / \$2,915,436 / 22%▲ / PMPM \$352 / 30%

Forecasted 12 / \$2,847,787 / -3%▼ / PMPM \$344 / -3%▼

Where are the dollars spent in your population? Look beyond historical claims with predictive cost modeling of where health costs are headed.

HISTORIC CLAIMS & RX



UTILIZATION METRICS

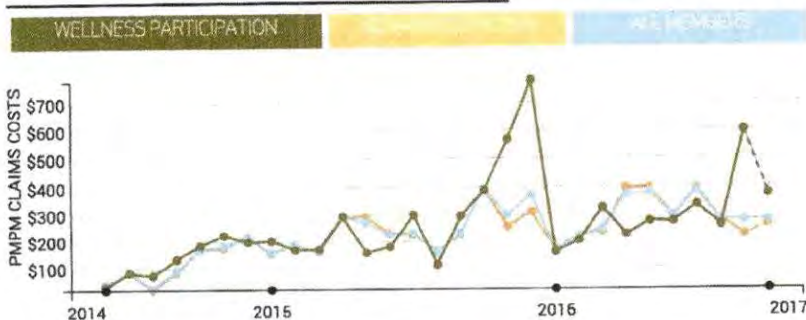
TOP TEN RX

CURRENT YEAR		CURRENT YEAR	
ADMITS/1000	36	OT + PT COST PMPM	\$38
DAYS IP CARE/1000	172	INPATIENT COST PMPM	\$57
OP ER VISITS/1000	121	OUTPATIENT COST PMPM	\$85
ER COST/VISIT	\$1,129	PROFESSIONAL COST PMPM	\$96
RX \$ / SCRIPT	\$221	TOTAL COST PMPM	\$327
RX COST PMPM	\$90	FORECASTED COST PMPM	\$355

PRESSCRIPTION	BY DOLLAR
REVLIMID	\$123,951
NORDITROPIN	\$85,221
HUMIRA	\$63,467
ENBREL	\$43,755
LATUDA	\$23,734
WELLBUTRIN	\$17,431
ARIPIRAZOLE	\$15,223
SENSIPAR	\$13,591
TEMOZOLOMIDE	\$13,566
ANDROGEL	\$12,002

WELLNESS & ENGAGEMENT

TOP TEN DIAGNOSIS CATEGORIES



CATEGORY	BY DOLLAR
NEOPLASM	\$560,054
ORTHOPEDIC	\$232,408
GASTROINTESTINAL	\$216,233
PREVENTIVE	\$121,666
BLOOD	\$104,465
ENDOCRINOLOGY	\$92,128
PSYCHIATRIC	\$90,988
MISC	\$89,363
SKIN	\$88,893
TRAUMA	\$83,046

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Gaps in Care

/ 10-2016

16% MEMBERS WITH GAPS IN CARE

38% SPEND LAST 12 MONTHS

33% PREDICTED SPEND NEXT 12 MONTHS

Where can we improve care for chronic diseases?

This report helps identify trends and trouble spots by comparing population care against best practices for chronic disease treatment.

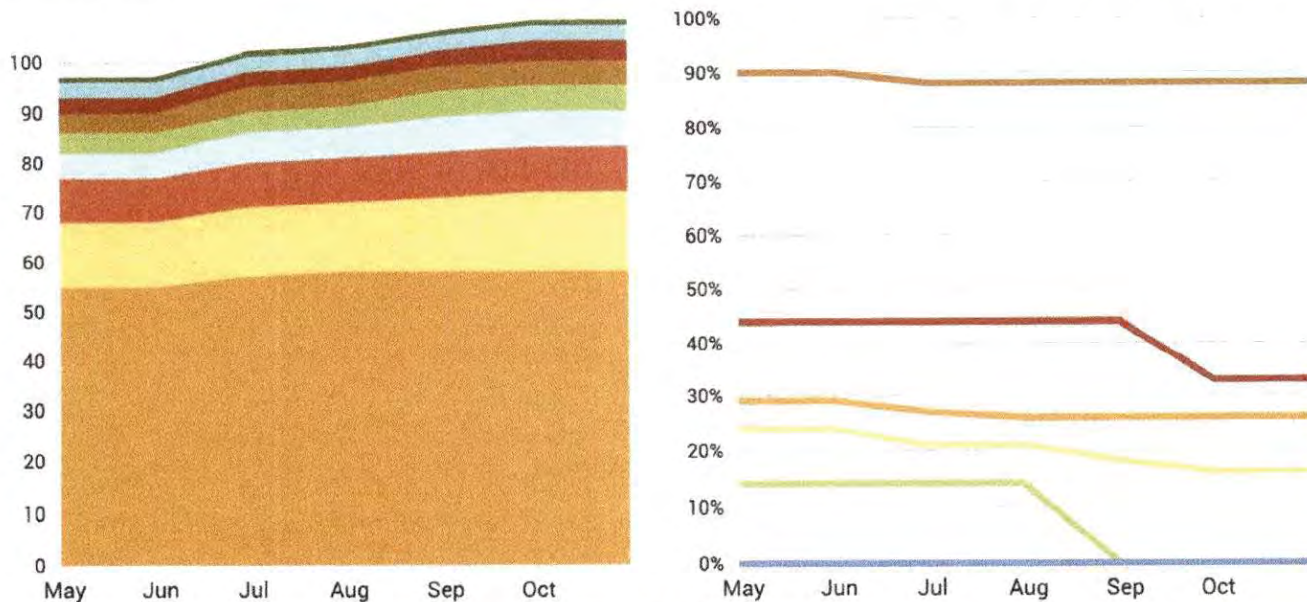
Conditions by Savings Opportunity

Disease State	Members	Not Compliant	Compliance %	Unique	Savings Opportunity
RX Management	78	58	26%	31	\$129,264
Cholesterol	38	32	16%	12	\$74,585
Diabetes	15	15	0%	9	\$43,079
Low Back Pain	37	8	78%	7	\$13,719
General Asthma	7	7	0%	5	\$21,180
CAD	6	6	0%	0	\$10,043
Osteoporosis	9	6	33%	4	\$18,570
Rheumatoid Arthritis	4	4	0%	3	\$9,971
CVA	2	2	0%	0	\$0
HBP	17	2	88%	2	\$1,557
TOTALS	158	108	32%		\$246,461

Columns may not sum to totals due to members with multiple conditions.

Compliance Trend

November 2015 - October 2016



REPORT PROVIDED BY



2016 SPRINGBUK. CONFIDENTIAL AND PROPRIETARY

CHANNEL PARTNER CLIENT ON-BOARDING TIMELINE

Welcome to the Springbuk family! We are excited to kick-off the on-boarding process and get your client set up in the Springbuk platform. Below is a brief overview of what the Springbuk on-boarding process looks like for your clients.



1 - KICK-OFF CALL

The kick-off call between you and your Client Enablement and Client Success Managers is the official start to the on-boarding process. During this call you will review the steps in the on-boarding process and iron out any details regarding communication, channel partner involvement and specific requests pertaining to on-boarding your employer groups.



2 - OBTAINING BASIC INFORMATION

After the kick-off call, you can either send your Client Enablement manager some basic information for the employer group (company name/address/phone number/etc.), or your Client Enablement Manager will reach out directly to the group to obtain the information. The choice is yours.



3 - EULA

After your Client Enablement Manager has received the info, they will send the End User License Agreement (EULA) to the group through an online signature tool called SignNow. The group will receive a follow up email with some instructions to ensure they properly complete the document.



4 - SPRINGBUK ON-BOARDING APPLICATION

After the EULA has been signed, your Client Enablement Manager will provide you, or the employer group with access to the Springbuk On-boarding Application. The application allows Springbuk to collect contact information for the group's TPA, PBM, Payroll and Clinic vendors, as well as user permissions.



5 - AUTHORIZATION LETTERS

Your Client Enablement Manager will create drafts of vendor authorization letters. The group will need to copy and paste the letters to their company letterhead, print, sign, and send scanned copies back to the Client Enablement Manager. Please note: The estimated 90-day timeframe for on-boarding begins once Springbuk receives all signed authorization letters.



6 - GATHERING DATA

This is the part of the on-boarding process that takes the most time (and why we allot an estimated 90 days). This process can shorten or extend depending on response time.



7 - GOING LIVE

Once all of the data has been pulled into the group's account and it is ready to go live, your Customer Success Manager will set up a meeting with you and the group. They will review the data in the group's account and walk through some basic training. Additional training for individuals is always available.

BenePortal

Online Benefits Resource



CONNER
STRONG &
BUCKELEW

Your benefits information in one place

BenePortal, powered by Wix, is BeneComm's virtual employee benefits portal, providing access to company benefits programs, health and wellness information, recommended links, pertinent forms and guides, and a wealth of additional tools and resources.

BenePortal is available 24/7 to BeneComm's employees and their eligible dependents to access benefit plan information, insurance company contacts, forms, guides, links and other applicable benefit materials.

Simply go to
www.samplebenefitsportal.com
to access your benefits information today!

BenePortal features include:

- Secure online access - with NO login required!
- Mobile optimized site
- Direct links to specific enrollment sites
- Plan summaries
- Wellness resources
- Carrier contacts
- Downloadable forms
- GoodRx
- Benefit Perks Discount Program
- And more!

Member Advocacy

Conner Strong & Buckelew



CONNER
STRONG &
BUCKELEW

Do you need help resolving a benefits issue?

Member Advocacy, provided by Conner Strong & Buckelew, allows you to speak to a specially trained Member Advocate who can help you get the most out of your benefits.

You can contact Member Advocacy for assistance if you:

- Believe your claim was not paid properly
- Need clarification on information from the insurance company
- Have a question regarding a bill from a doctor, lab or hospital
- Are unclear on how your benefits work
- Need information about adding or deleting a dependent
- Need help resolving a benefits problem you've been working on

You can contact Member Advocacy in any of the following ways:

- Via phone: **800.563.9929**, Monday through Friday, 8:30 am to 5:00 pm
- Via the web:
www.connerstrong.com/memberadvocacy
- Via e-mail:
cssteam@connerstrong.com
- Via fax: **856.685.2253**

*Member Advocates are available
Monday through Friday, 8:30 am to 5:00 pm (Eastern Time).*

After hours, you will be able to leave a message with a live representative and receive a response by phone or email during business hours within 24 to 48 hours of your inquiry.



MEMBER ADVOCACY



Dear BeneComm Employee:

Conner Strong & Buckelew is pleased to represent BeneComm in helping to manage and administer your health benefits program. Headquartered in Camden, New Jersey, we are one of the country's leading insurance brokerage/consulting firms. We have an unsurpassed commitment to supporting our clients with the highest level of customer service.

We know it is often difficult to fully understand your health benefits and use them properly—especially when insurance companies make more and more changes to the way plans are administered and how claims are paid. This is where our **Member Advocacy Program** can help.

The attached Member Advocacy card conveniently provides important contact information for each of your coverages (such as the toll-free customer service number, website address, and group number). If you have a question about your benefits or a claim payment, your first point of contact should always be the insurance company. However, if you cannot resolve your concerns or require special assistance, please contact a specially trained and experienced Member Advocate to intercede on your behalf:

- call the Conner Strong & Buckelew Member Advocacy hotline at **800.563.9929**, or
- submit a request via the Conner Strong & Buckelew website www.connerstrong.com/memberadvocacy

Please note that this card is in addition to and not a substitute for your medical/prescription and dental ID cards. Be sure to keep all of them in a safe place. For replacement or additional Member Advocacy cards, contact your Human Resources Department or call our toll-free number at **800.563.9929** for an electronic copy.

Conner Strong & Buckelew looks forward to providing any help you may need regarding your health benefits program. Please feel free to contact us if we can be of service.

Wishing you the best in health,

Conner Strong & Buckelew



TO ANSWER YOUR
BENEFIT QUESTIONS

Medical/Rx: United Healthcare
Group #: 741970
Customer Service: 877-844-4999
Website: www.uhc.com

Vision: Superior Vision
Group #: 33399
Customer Service: 800-507-3800
Website: www.superiorvision.com

Dental: United Healthcare
Group #: 741970
Customer Service: 877-844-4999
Website: www.uhc.com

Life and AD&D: Transamerica
Group #: 33399
Customer Service: 800-507-3800
Website: www.superiorvision.com



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Website: www.superiorvision.com

Commonly Asked Questions about the Member Advocacy Program

When should I contact the Member Advocacy team?

Through Conner Strong & Buckelew, our insurance brokerage firm, you will have access to their member advocacy program to assist you in a variety of ways. If you experience any of the following, please contact a Member Advocate:

- You believe your claim was not paid properly
- You need clarification on information from the insurance company
- You have a question regarding a bill from a doctor, lab or hospital
- You are unclear on how your benefits work
- You need help to resolve a problem you've been working on

When should I contact the BeneComm Human Resources Department?

The BeneComm Human Resources department is here to help you, in addition to the Member Advocacy team. However, there are certain questions that the Member Advocacy team will not be able to answer for you and you will need to speak directly to the BeneComm Human Resources department.

If you have an eligibility question, such as:

- "Have I satisfied the benefit waiting period?" or
- "When can I elect benefits?"

How can I contact Member Advocacy?

You may contact the Conner Strong & Buckelew Member Advocacy Unit in any of the following ways:

- Via phone: **800.563.9929**, Monday through Friday, 8:30 am to 5 pm
- Via the web: go to **www.connerstrong.com/memberadvocacy** and complete the fields
- Via e-mail: **cssteam@connerstrong.com**
- Via fax: **856.685.2253**

Can the Member Advocacy team assist with multiple languages?

Yes! Through Para Plus® language line the Member Advocacy team will be able to communicate with any employee and/or their eligible dependent(s) that requires a language other than English. Para Plus® language line offers an interpreter who will be a third-party responsible for communicating between a Member Advocate and the BeneComm employee and/or their eligible dependent(s).



If you have questions about your benefit plan or a claim payment, your first point of contact should be directly with your insurance company. However, if you are unable to resolve your concerns or require special assistance, you may contact a Conner Strong & Buckelew Member Advocate to intercede on your behalf.

Call 800-563-9929 or submit an online request at
www.connerstrong.com/memberadvocacy

Please note that this card is not a substitute for your plan specific ID cards.



If you have questions about your benefit plan or a claim payment, your first point of contact should be directly with your insurance company. However, if you are unable to resolve your concerns or require special assistance, you may contact a Conner Strong & Buckelew Member Advocate to intercede on your behalf.

Call 800-563-9929 or submit an online request at
www.connerstrong.com/memberadvocacy

Please note that this card is not a substitute for your plan specific ID cards.



CLIENT ACTIVITY REPORT

MAY 2019

XYZ Company

This is your monthly BeneService Advocacy Activity Report providing de-identified details regarding calls, emails or other inquiries received and acted upon by Conner Strong & Buckelew. Note that the data is de-identified to protect the confidentiality of the individual participant pursuant to HIPAA. Furthermore, this reflects cases and inquiries under activity. Some cases are closed immediately while other, depending on their complexity, may take additional time to bring to closure. Conner Strong & Buckelew manages all activity and ensures all cases are acted upon, followed up and brought to closure in as timely a basis as possible.



CLIENT ACTIVITY REPORT

From: 5/1/2019 To: 5/31/2019

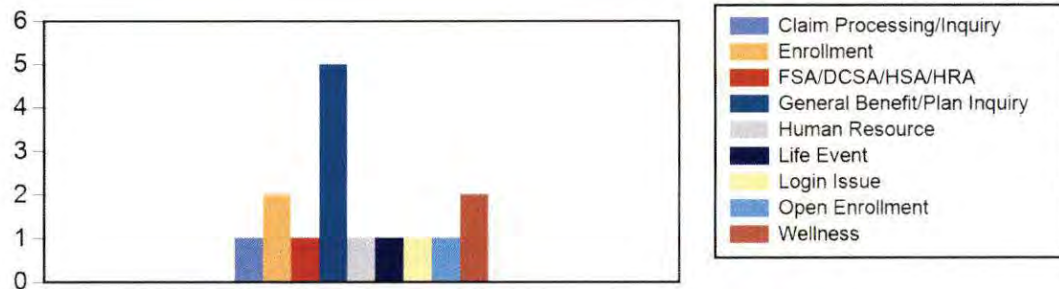
XYZ Company

SUBJECT (MAY)

	<u># of Issues</u>
Claim Processing/Inquiry	1
Enrollment	2
FSA/DCSA/HSA/HRA	1
General Benefit/Plan Inquiry	5
Human Resource	1
Life Event	1
Login Issue	1
Open Enrollment	1
Wellness	2

Total for Subject

15





CLIENT ACTIVITY REPORT

From: 5/1/2019 To: 5/31/2019

XYZ Company

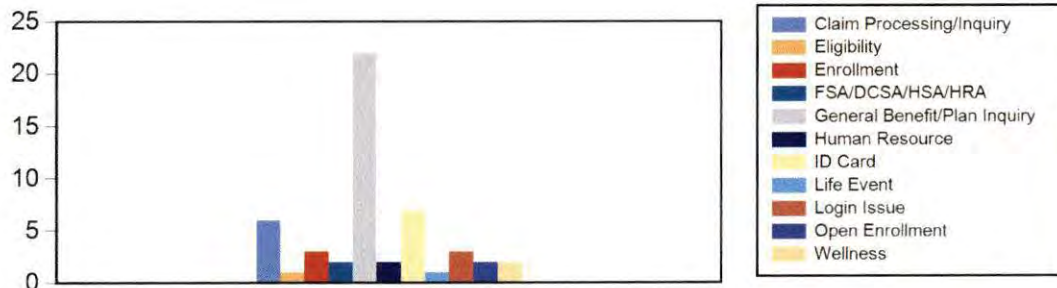
SUBJECT (YTD)

of Issues

Claim Processing/Inquiry	6
Eligibility	1
Enrollment	3
FSA/DCSA/HSA/HRA	2
General Benefit/Plan Inquiry	22
Human Resource	2
ID Card	7
Life Event	1
Login Issue	3
Open Enrollment	2
Wellness	2

Total for Subject

51



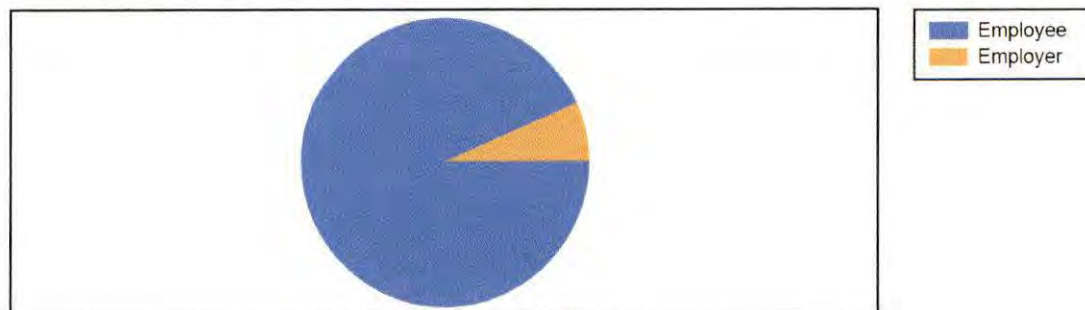
CALL SOURCE (MAY)

of Issues

Employee	14
Employer	1

Total for Call Source

15





CLIENT ACTIVITY REPORT

From: 5/1/2019 To: 5/31/2019

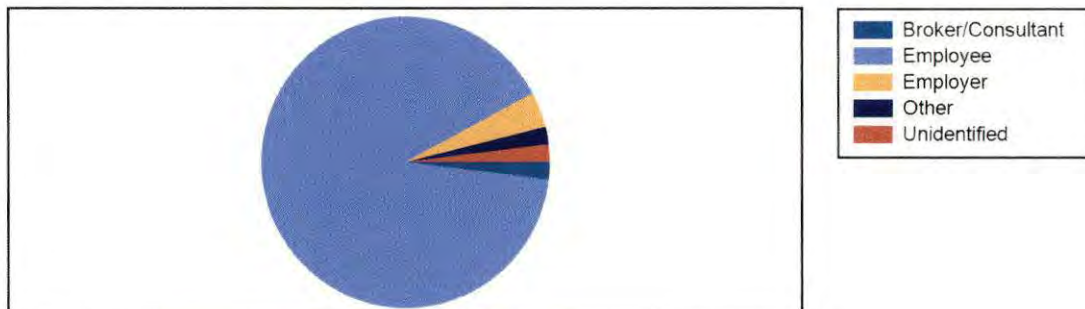
XYZ Company

CALL SOURCE (YTD)

	<u># of Issues</u>
Broker/Consultant	1
Employee	46
Employer	2
Other	1
Unidentified	1

Total for Call Source

51



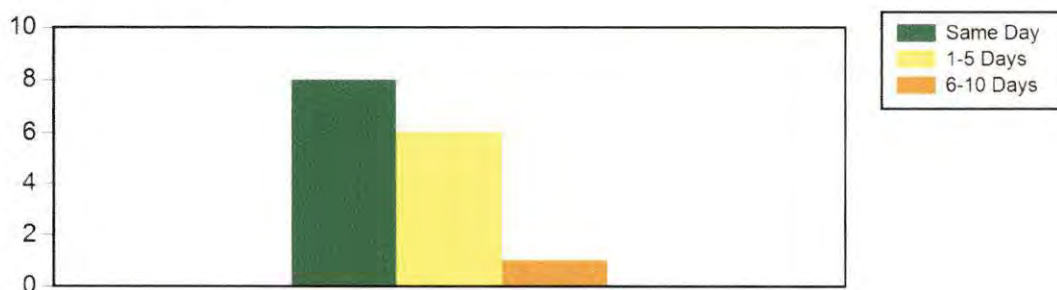
CLOSED TIME (MAY)

	<u># of Days</u>	<u>%</u>
Same Day	8	53%
1-5 Days	6	40%
6-10 Days	1	7%

Total for Time Range

15

100%





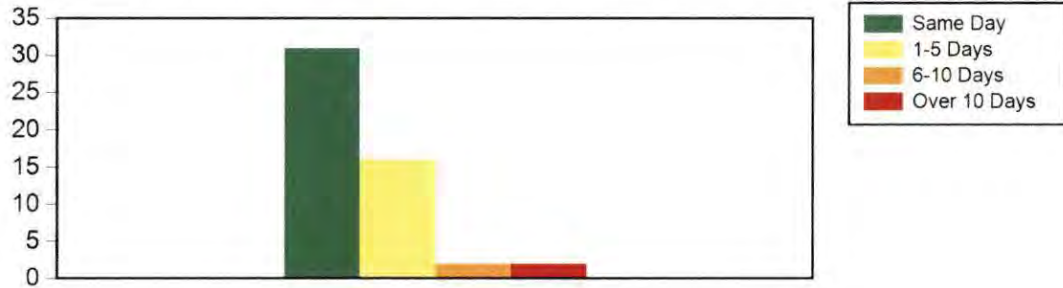
CLIENT ACTIVITY REPORT

From: 5/1/2019 To: 5/31/2019

XYZ Company

CLOSED TIME (YTD)

	<u># of Days</u>	<u>%</u>
Same Day	31	61%
1-5 Days	16	31%
6-10 Days	2	4%
Over 10 Days	2	4%
Total for Time Range	51	100%



DETAIL (YTD)

From: 1/1/2019 To: 5/31/2019

<u>Received</u>	<u>Call Source</u>	<u>Subject</u>	<u>Status</u>	<u>Closed Time</u>
1/2/2019	Employee	ID Card	Closed	Same Day
1/10/2019	Employee	General Benefit/Plan Inquiry	Closed	1-5 Days
1/15/2019	Employee	Login Issue	Closed	Same Day
1/16/2019	Employee	Claim Processing/Inquiry	Closed	Over 10 Days
1/16/2019	Employee	General Benefit/Plan Inquiry	Closed	Same Day
1/16/2019	Employee	Enrollment	Closed	Same Day
1/18/2019	Employee	ID Card	Closed	Same Day
1/22/2019	Employee	Claim Processing/Inquiry	Closed	1-5 Days
2/4/2019	Employee	ID Card	Closed	1-5 Days
2/12/2019	Employee	General Benefit/Plan Inquiry	Closed	Same Day
2/20/2019	Broker/Consultant	General Benefit/Plan Inquiry	Closed	Same Day
2/21/2019	Employee	General Benefit/Plan Inquiry	Closed	Same Day
2/26/2019	Employee	Claim Processing/Inquiry	Closed	6-10 Days
2/26/2019	Employee	General Benefit/Plan Inquiry	Closed	Same Day
3/1/2019	Employer	Claim Processing/Inquiry	Closed	Same Day
3/1/2019	Employee	Eligibility	Closed	Same Day
3/6/2019	Employee	ID Card	Closed	1-5 Days
3/7/2019	Employee	General Benefit/Plan Inquiry	Closed	Same Day
3/8/2019	Employee	FSA/DCSA/HSA/HRA	Closed	Same Day



CLIENT ACTIVITY REPORT

From: 5/1/2019 To: 5/31/2019

XYZ Company

DETAIL (YTD)

From: 1/1/2019 To: 5/31/2019

<u>Received</u>	<u>Call Source</u>	<u>Subject</u>	<u>Status</u>	<u>Closed Time</u>
3/11/2019	Employee	General Benefit/Plan Inquiry	Closed	Same Day
3/13/2019	Employee	Human Resource	Closed	1-5 Days
3/15/2019	Employee	General Benefit/Plan Inquiry	Closed	Same Day
3/19/2019	Employee	Claim Processing/Inquiry	Closed	Over 10 Days
3/19/2019	Employee	General Benefit/Plan Inquiry	Closed	Same Day
3/25/2019	Other	General Benefit/Plan Inquiry	Closed	1-5 Days
4/2/2019	Employee	General Benefit/Plan Inquiry	Closed	Same Day
4/2/2019	Employee	ID Card	Closed	1-5 Days
4/3/2019	Employee	General Benefit/Plan Inquiry	Closed	Same Day
4/5/2019	Employee	General Benefit/Plan Inquiry	Closed	Same Day
4/9/2019	Employee	ID Card	Closed	1-5 Days
4/12/2019	Employee	General Benefit/Plan Inquiry	Closed	Same Day
4/16/2019	Employee	Login Issue	Closed	1-5 Days
4/16/2019	Employee	General Benefit/Plan Inquiry	Closed	Same Day
4/26/2019	Employee	ID Card	Closed	1-5 Days
4/30/2019		General Benefit/Plan Inquiry	Closed	Same Day
4/30/2019	Employee	Open Enrollment	Closed	Same Day
5/2/2019	Employer	Enrollment	Closed	1-5 Days
5/2/2019	Employee	Login Issue	Closed	1-5 Days
5/6/2019	Employee	FSA/DCSA/HSA/HRA	Closed	Same Day
5/6/2019	Employee	General Benefit/Plan Inquiry	Closed	1-5 Days
5/7/2019	Employee	General Benefit/Plan Inquiry	Closed	Same Day
5/7/2019	Employee	Enrollment	Closed	1-5 Days
5/7/2019	Employee	Life Event	Closed	Same Day
5/8/2019	Employee	Open Enrollment	Closed	Same Day
5/8/2019	Employee	General Benefit/Plan Inquiry	Closed	Same Day
5/8/2019	Employee	General Benefit/Plan Inquiry	Closed	Same Day
5/9/2019	Employee	Wellness	Closed	Same Day
5/13/2019	Employee	Claim Processing/Inquiry	Closed	1-5 Days
5/13/2019	Employee	Wellness	Closed	1-5 Days
5/14/2019	Employee	General Benefit/Plan Inquiry	Closed	6-10 Days
5/29/2019	Employee	Human Resource	Closed	Same Day

GoodRx

Prescription Drug Price Comparison Tool

CONNER
STRONG &
BUCKELEW



Stop paying too much for your prescriptions!

Good Rx, provided by Conner Strong & Buckelew, allows you to simply and easily search for retail pharmacies that offer the lowest price for specific medications. The cost for the same medications – even when using a network retail pharmacy – vary drastically from one drug store to the next. And while prescription drug plan copays may be the same no matter which pharmacy you go to, the retail cost to your employer may be greatly reduced when you get your medications from a pharmacy that charges a lower discounted price.

Use Good Rx to compare drug prices at local and mail-order pharmacies and discover free coupons and savings tips. Find huge savings on drugs not covered by your insurance plan – you may even find savings versus your typical co-payment!

Lower costs to your employer can also help keep your benefits costs down in the long run.

You can find the lowest price on prescriptions right from your phone or tablet.

Our free, easy-to-use mobile apps feature:

- Instant access to the lowest prices for prescription drugs at more than 75,000 pharmacies
- Coupons and savings tips that can cut your prescription costs by 50% or more
- Side effects, pharmacy hours and locations, pill images, and much more!

Start saving on your prescriptions today at
connerstrong.goodrx.com

Wellness

Free Employee Resources

CONNER
STRONG &
BUCKELEW

The following programs offer you support for living a healthy life and preventing illness. These programs are available at no cost to all employees.

GlobalFit Gym Discount Program

GlobalFit offers discounts at more than 10,000 gyms nationwide. Members also get exclusive savings on home health and fitness products including Zumba, Total Gym, Schwinn, StairMaster and more!

Learn more about GlobalFit by calling
800.294.1500 or visit
globalfit.com/connerstrong

GoodRX

Compare drug prices at local and mail-order pharmacies and discover free coupons and savings tips.

Learn more at:
connerstrong.goodrx.com

HealthyLearn

This resource covers over a thousand health and wellness topics in a simple, straight-forward manner. The HealthyLearn On-Demand Library features all the health information you need to be well and stay well.

Learn more at:
healthylearn.com/connerstrong

Benefit Perks

This feature provides a broad array of services, discounts and special deals on consumer services, travel services, recreational services and much more. Simply access the site and register and you can begin using it now.

Learn more at:
connerstrong.corestream.com



June 5, 2018

PCORI Fee Due to IRS July 31

The Patient-Centered Outcomes Research Institute (PCORI) fee for plan years ending on and after January 1, 2017 and on and before December 31, 2017 must be remitted to the IRS by July 31, 2018. The PCORI fee for plan years ending on or after October 1, 2017 and before October 1, 2018, including 2017 calendar year plans, is \$2.39 per person covered under the applicable health plan, up from \$2.26 for the previous plan year.

Background

The Affordable Care Act (ACA) created PCORI to help patients, clinicians, payers and the public make more informed health decisions by advancing comparative effectiveness research. The Institute's research is funded, in part, through PCORI fees paid by insurers of "specified health insurance policies" and plan sponsors of self-insured health plans. Plan sponsors of self-insured health plans are required to pay the PCORI fee for certain health coverage arrangements. Plan sponsors of fully-insured health plans are not responsible for paying the PCORI fee (the obligation rests with the insurer). For a list of insurance coverage or arrangements subject to the PCORI fee, please see the [IRS chart](#).

PCORI Fee Amount and Remittance

The PCORI fee applies to plan years ending on or after October 1, 2012 and before October 1, 2019. The IRS has published the [PCORI Filing Due Dates and Applicable Rates](#) chart to assist insurers and plan sponsors with determining the applicable fee and due date based on the end date of a policy/plan year. The filing and remittance process to the IRS is largely unchanged from last year. The PCORI fee is paid using [IRS Form 720](#) Quarterly Federal Excise Tax Return and the payment can be made through the [Electronic Federal Tax Payment System \(EFTPS\)](#). When completing the payment voucher (720-V), the tax period for the fee should indicate "2nd Quarter." This quarter designation is an essential step in the reporting processes, as failure to properly designate "2nd Quarter" on the voucher may trigger a tardy filing notice from the IRS. For a more detailed explanation of the PCORI fee, including information on calculating and paying the fee, please see our legislative update, [PCORI Fees – Reporting and Preparation Process](#). Detailed guidance regarding how to calculate, report, and pay the fee is also provided on the IRS PCORI fee [webpage](#).

Should you have questions about this or any other aspect of healthcare reform, please contact your Conner Strong & Buckelew account representative toll free at 1-877-861-3220. For a complete list of Legislative Updates issued by Conner Strong & Buckelew, visit our online [Resource Center](#).



January 24, 2019

2019 Calendar Year Prescription Drug Plans Must Report Creditable Coverage Status to CMS by March 1, 2019

Group health plan sponsors that offer prescription drug coverage must, at least annually, notify Medicare Part D eligible individuals and the Centers for Medicare & Medicaid Services (CMS) of their plan's creditable coverage status. Both disclosures (to Medicare Part D eligible individuals and to CMS) must meet specific form, content and timing requirements as prescribed by [CMS](#). This Update addresses the required disclosure to CMS and reminds plan sponsors with 2019 calendar year prescription drug programs that disclosure is due to CMS by **March 1, 2019**. (For more information on Medicare Part D disclosures to individuals, please see our update, [Medicare Part D Notices Due Before October 15th](#)).

General Background

Rules under Medicare Part D generally require group health plans with a prescription drug benefit to disclose whether the prescription drug coverage offered is "creditable" or "non-creditable". "Creditable" prescription drug coverage generally means the actuarial value of prescription drug coverage under the group health plan is equal to (pays out as much) or better than the prescription drug benefits offered under Medicare Part D. Conversely, "non-creditable" prescription drug coverage is coverage that is actuarially less in value (expected to pay out less) than the coverage offered under Medicare Part D.

Notification to CMS

CMS should receive a prescription drug plan's creditable coverage disclosure:

- annually; disclosure must be received by CMS within 60 days of the beginning of the plan year for which the disclosure is being reported.
- within 30 days of a change in creditable coverage status.
- within 30 days of the prescription drug plan's termination.

A prescription drug plan must use the online [CMS Disclosure Form](#) to report its "creditable" or "non-creditable" prescription drug status at the times noted above. [Guidance and Instructions](#) are provided to assist prescription drug plan sponsors with completing the form.

Should you have questions about this or any aspect of group health plan requirements, contact your Conner Strong & Buckelew account representative toll-free at 1-877-861-3220. For a complete list of Legislative Updates issued by Conner Strong & Buckelew, visit our online [Resource Center](#).



CONNER STRONG & BUCKELEW

STANDARD CONSULTANCY AND BROKERAGE SERVICES FOR *MIDDLE MARKET* HEALTH AND WELFARE BENEFIT PLANS



STATEMENT OF SERVICES

Conner Strong & Buckelew provides the following consulting and brokerage Services:

DESIGNATED ACCOUNT TEAM

- Provide access to a designated consulting team that shall be responsible for managing and overseeing the day to day aspects of the engagement. The account team shall be responsible for managing and directing all day-to-day activities and deliverables related to the client's account; acting as the client's advocate internally and externally and in the execution of the Services;
- The account team shall develop an annual set of milestones/project plan and deliverables with the cooperation and mutual agreement of the client;
- The account team shall meet with the client's designated representatives at least quarterly, if not more frequently, to review status of the annual milestones/project plan and discuss other projects and deliverables in progress;
- The account team shall be routinely available to client for routine calls, conference calls, and in-person meetings, as may be necessary in the normal course of performing the Services;
- The account team shall represent the client to the various insurance and benefits carriers/insurers/third party administrators/pharmacy benefit administrators (the markets). This shall include, with the advance prior approval of the client, issuing requests to the markets for proposals, pricing and information;

BENCHMARKING SERVICES

- Provide nationally validated sources for benchmarking related to health and benefit plans. All benchmarking data shall be source labeled;

DATA ANALYTICS AND REPORTING

- On a quarterly basis, collect claims and other cost items from the various markets for which Conner Strong & Buckelew has been retained and share said data in an agreed upon reporting format with the client;
- Develop gross and net benefit budgets; including contributions; reserves and other items related to budget preparation and development;

PLAN DESIGN FINANCIAL ANALYSIS

- Perform plan modeling to determine the financial impact of possible benefit plan modifications. In the performance of these functions, the team shall use actuarially validated tools;

COMPLIANCE SERVICES

- Issuance of standard compliance updates and bulletins on matters related to health and welfare plans;
- Access to standard, on-going educational services like webinars and in-person sessions dedicated to client education;
- Provide access to an on-line benefits and human resources web based repository, HR-360, for access to compliance related services;

Note certain compliance services may be deemed out of scope for which an additional, mutually agreeable fee may be assessed, as agreed by the Parties.

FORM 5500 SUBMISSION | SUMMARY ANNUAL REPORT (SAR)

- The account team shall work with the client and its markets to collect the data needed to prepare the client's Form 5500 for electronic submission to the United States Department of Labor (USDOL), if applicable;
- Provided that all needed materials are received timely and in accordance with the time lines agreed upon between the team and the client, the team shall supply "electronic signature ready" Form 5500s in time for annual filings by the client. The client will be responsible to submit the final electronic submission to the USDOL;
- The account team shall prepare and provide to the client the SAR for issuance to plan participants;

SUMMARY PLAN DOCUMENTS (SPDs) AND PLAN DOCUMENT (PD) REVIEW

- The account team shall assist in a general review of the client's SPD and PD;

Note certain SPD and PD related services may be deemed out of scope for which an additional, mutually agreeable fee may be accesses, as agreed by the Parties. SPD or PD reviews that require a compliance evaluation are out of scope and shall require a separate, mutually negotiable fee.

PATIENT PROTECTION AND AFFORDABLE CARE ACT (PPACA) ADVISORY SERVICES

- The account team shall provide electronic updates and explanations related to the regulatory updates around the PPACA;
- The account team shall ensure the issuance of such updates to the client as timely as the materials may be evaluated and distributed;
- Conner Strong & Buckelew shall make available on-going educational services including webinars and access to materials from the Conner Strong & Buckelew corporate web site;

Note certain PPACA related services may be deemed out of scope for which an additional, mutually agreeable fee may be accesses, as agreed by the Parties.

WELLNESS ADVISORY SERVICES

- Provide access to a vetted set of Wellness vendors and suppliers that may offer discounted wellness services;
- Provide an on-line wellness portal for all plan participants, *Healthier at Home*

Note certain wellness advisory services may be deemed out of scope for which an additional, mutually agreeable fee may be accesses, as agreed by the Parties.

BENEFIT COMMUNICATION AND VIDEO SERVICES

- Develop a (one) standard new employee benefit communication guide and an (one) open enrollment guide that outline the provisions of the employee benefit programs;

Note certain benefit communication shall be deemed out of scope for which an additional, mutually agreeable fee may be accesses, as agreed by the Parties. Custom guides shall require a mutually negotiable fee. Guides that require more than 2 edited versions shall have an additional fee.

OPEN ENROLLMENT COORDINATION

- Oversee and assist with the coordination of the annual enrollment process;
- Assist with developing schedule for on site benefit meetings, as necessary, including coordinating vendor participation;
- Participate in certain, high-volume office location enrollment meetings (meetings that have 100 or more participants at the location)

Note certain open enrollment related services may be deemed out of scope for which an additional, mutually agreeable fee may be accesses, as agreed by the Parties.

CALL CENTER SERVICES - MEMBER ADVOCACY

- Provide the Member Advocacy Program to support employees and dependents in the resolution of complex benefit related service issues;
- Provide access to 24/7 toll-free service line with access to the Member Advocacy specialist team;
- Assist with claim payment issues errors, eligibility and enrollment issues, plan design questions or inquiries, billing disputes and other benefit related inquiries;
- Provide activity reports at the group level that shall illustrate service activity;



WEB BASED PORTAL - BENEPORTAL

- Provide a customized informational (non-enrollment based) web based benefits platform; BenePortal. The site shall include:
 - Benefit outlines, including benefit booklets, summary plan descriptions and other coverage details;
 - Employee contributions;
 - Claims, enrollment and forms;
 - Health and Wellness links;
 - Links to carriers and administrators
 - Benefit comparison tools
 - Mobile “app” included

ITEMS OUTSIDE OF STANDARD COMPENSATION

There are additional services that are optionally available, outside the compensation terms noted above. This includes:

- Printing and postage costs related to benefit communication materials;
- Claims Audits;
- Dependent Enrollment and Eligibility Audits;
- Compliance Audits;
- DOL/IRS/HHS Audit assistance;
- Wellness services, screening and coaching (Wellness consultation and advisory is included);
- Benefit Statements;
- BeneView claims Data Warehouse;
- Web-based benefits enrollment and administration;
- Private Exchange technology services;
- COBRA Administration;
- Flexible Spending Account Administration;
- Transit Account Administration;
- Dependent care Account Administration;
- Health Reimbursement and Health Savings Account Administration;
- The development of a new Plan Document(s) and/or Summary Plan Description(s), compliance focused reviews or substantial modifications to these documents;
- The filing of delinquent Form 5500s, filing Form 5500 for more than one Form 5500 per year or for lines of coverage not handled by Conner Strong & Buckelew, amending Form 5500 filings;
- All services and advice related to client specific PPACA related Employee Tracking and Reporting;
- Communication services outside of one annual employee enrollment benefits guide, and one new hire benefits. Also, additional fees shall apply for any guides requiring more than 2 draft versions;
- Video services, including access to the standard video library;



- Translation services for communication materials (i.e., translate benefit guide from English to Spanish, etc.);
- Manual key entry of enrollment applications; including new applications, changes and/or deletions;
- Actuarial attestations;
- Other unique items or projects not specifically noted in the Schedule of Services

Note

Conner Strong & Buckelew is not a law firm and does not provide legal and/or tax advice in connection with the offer of our Services. We cannot confirm any employer or plan sponsors actual compliance with any requirement and we cannot anticipate all the facts that a particular employer or plan sponsor will have to consider in their benefits decision-making process. Therefore, it is always the case that the final determination of appropriate next steps and whether the employer or plan sponsor meets its many and varied benefits related requirements will always be made by the employer or plan sponsor, in consultation with the employer's or plan sponsor's own legal counsel and tax advisor, as the employer or plan sponsor deems appropriate.