



**LAUGHLIN
CONSTABLE**

R&R

INSURANCE

Knowledge is in the
Knowing...



As the largest, fiercely independent family-owned insurance agency in the Midwest, R&R Insurance provides complete coverage for your business and your employees. We pride ourselves on having “Wall Street” resources with “Main Street” Service.

the **knowledge** brokers™

- Employee Benefits
- Business Insurance
- Personal Insurance
- Wealth Management

200 Employees

Waukesha, West Bend & Neenah



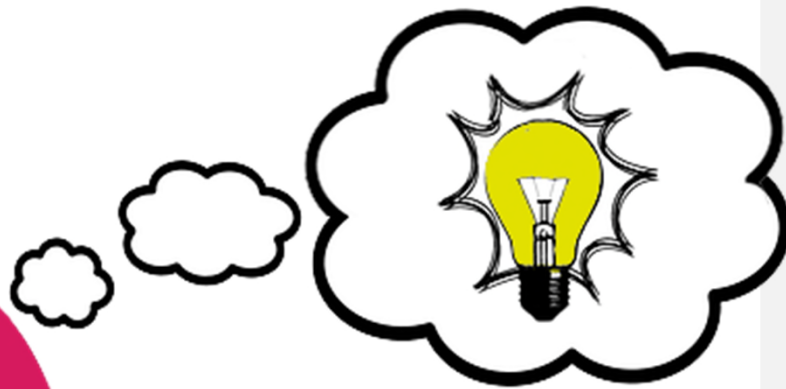


Topics We'll Cover

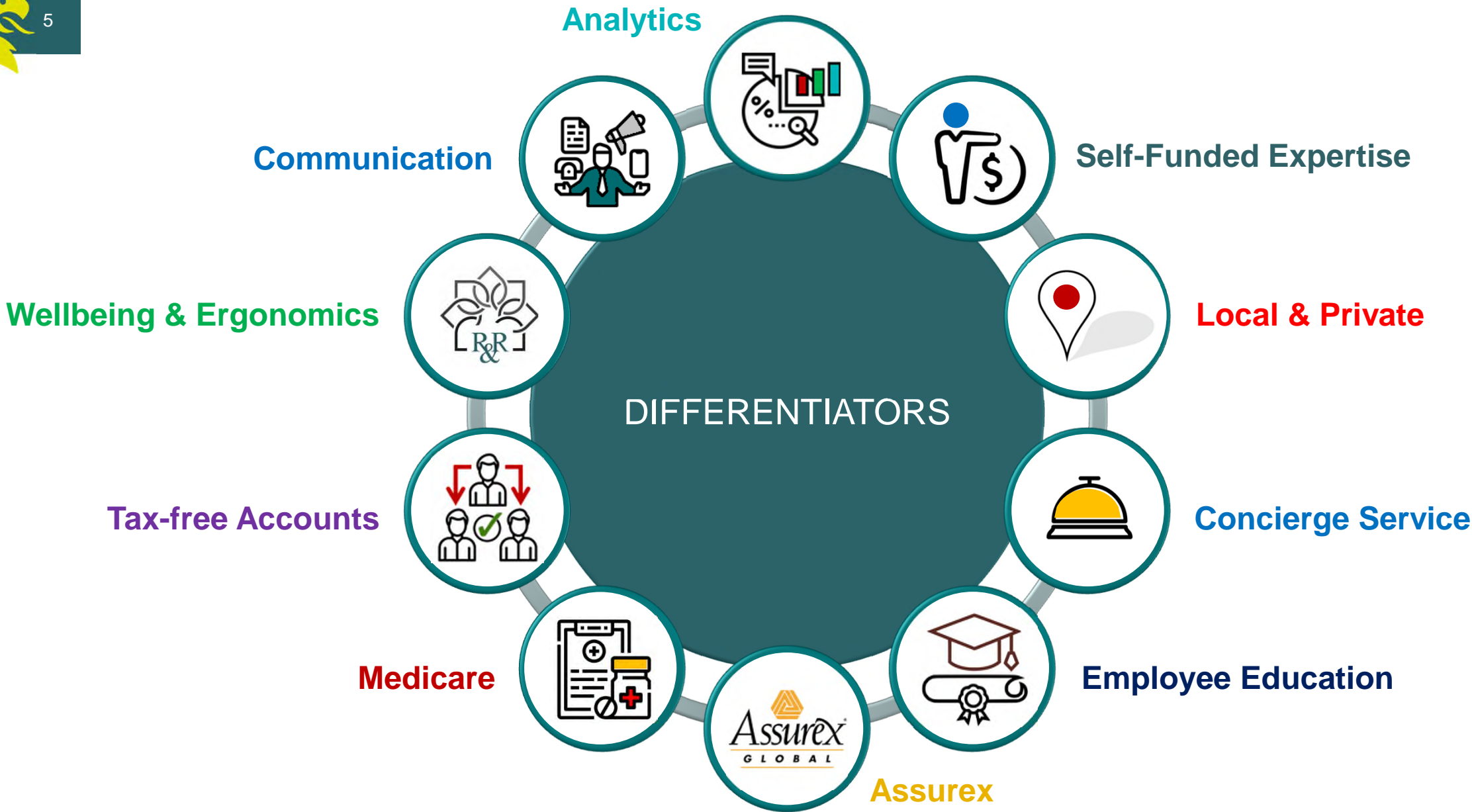
- ✓ Team Members and Differentiators
- ✓ Challenges / Options for Employers (100 Employees)
- ✓ Claims management / Reporting / Analytics
- ✓ Technology Benefit Administration Options
- ✓ Compliance Support
- ✓ Employee & Employer Education and Training



What We Think We Know



- Fiercely independent brand experiences agency
- 47 years of expertise “making it personal”
- Well known clientele across the country
- Provide robust benefits that are sustainable
- Industry is cyclical / impact from economy
- Seeking enhanced employee communication and ease of use





6 **R&R Employee Benefits Professional Team**



**Molly
Flynn-Johns**

Manager, Analytics
and Data Strategy



**Chris
Kramer**

Employee Benefits
Consultant



**Ellen
Dunn**

Manager of Client
Services



**Taylor
Hahn**

Strategic Wellbeing
Consultant



Expertise Across Multiple Industries

Over 130 Self-funded Clients
Over 1,000 Fully-insured Clients

- Benchmarking
- Claim analysis
- Contribution setting
- Plan differential review



“The District went through multiple vendors for fully funded health insurance in the last decade. This created substantial administrative time commitment as well as disruption for staff members. R&R carefully evaluated the market and provided a recommendation when conditions were optimal for a switch. In particular, R&R has excelled in their ability to negotiate costs on Stop Loss Insurance and our Pharmacy Benefit Plan to save the District hundreds of thousands of dollars in the first two years of being self-funded.”



Jonathan Mitchell
Director of Business Services
Greendale Schools



Challenges Facing Employers & Health Plans

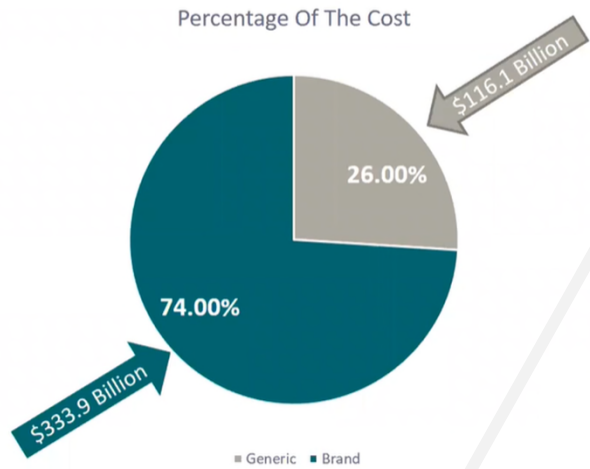
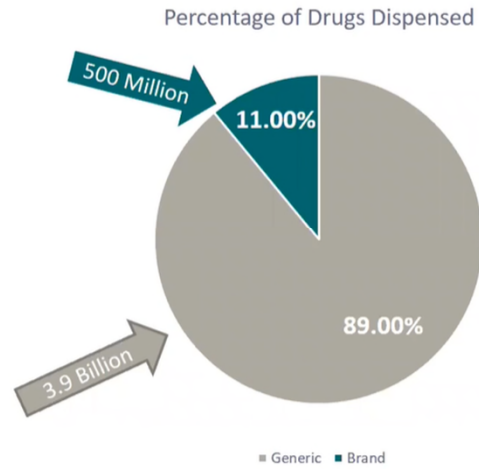
- Changes in employer demographics and size
- Competitive labor market
- Significant wage increases for healthcare workers
- Impact due to delayed care during COVID
- Healthcare systems renegotiating contracts
- Prescription drug spend / Gene Therapy
- Inflationary equipment cost increases
- Consolidation of healthcare systems
- New regulations
- Increasing number of \$1 million dollar claims



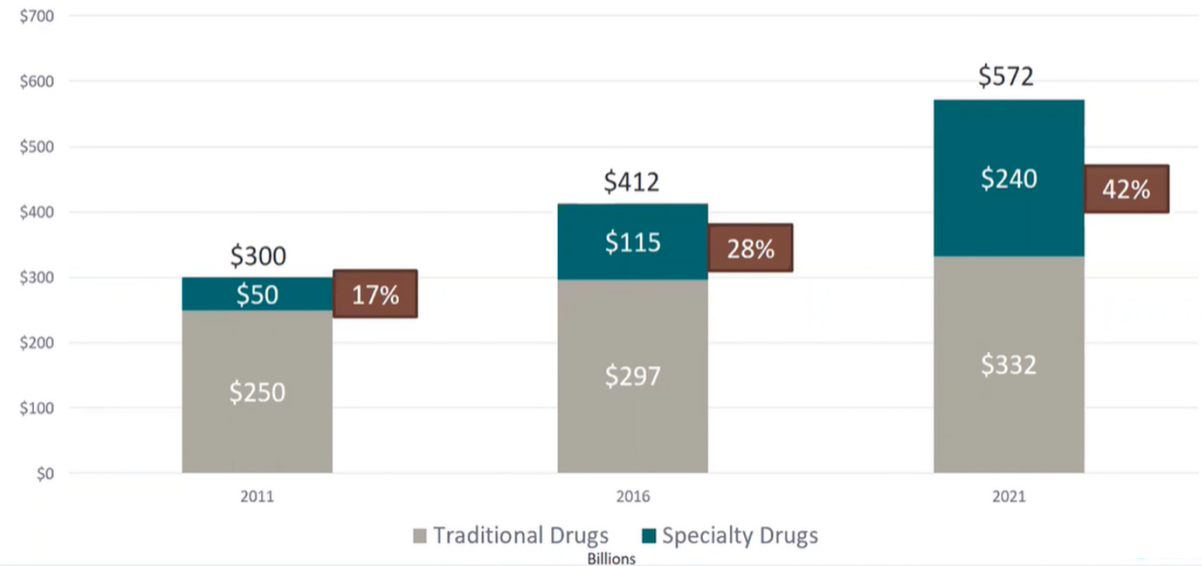


Prescription Drug Spend

Generic vs. Brand



Pharmacy Industry Prescription Revenues in Billions Traditional vs. Specialty 2011-2021





SOLUTIONS FOR SELF-FUNDED EMPLOYERS

- Confirm your PBM is aligned with your goals
- Promote prior authorization & step therapy
- Lowest net cost formulary & reduce pharmacy network
- Mandatory generic
- Specialty pharmacy management
- Quantity limits
- Monitor new drugs to market
- Promote biosimilar



Innovative & Methodical Solutions

Clinic Options: Fully insured OR Self Funded

- Onsite
- Near Site
- Froedtert Fast Care Partnership
- Direct Primary Care

Acne	Earache & Infections	Ear Wax Removal	Strep
Pregnancy Test	Urinalysis	TB Test	Mono
Pink Eye	Tonsil Check	Ligament Pain	Personal Injury
Sore Throat	Neck Ache	Counseling	Sinus Troubles
Inflamed Breast Tissue	Trouble Urinating	Sore Joints	Post COVID Sickness
Allergy	Rash	Nausea / Vomiting	UTIs
Lower Back Pain	Weight Loss	Smoking Cessation	Wart Removal
Asthma	High Blood Pressure	Sprains	Diabetes
Medication Adjustment	Eye Irritation	Thyroid	Anxiety

DISTRICT COST :

Clinic / Froedtert

Approximately

\$45

Primary Care Doctor

Approximately

\$245

Urgent Care

Approximately

\$525



Innovation Solution Spectrum

As is

Due Diligence

Changes



- Marketing of plan and negotiating with carriers
- Premium and HRA/HSA contribution strategy review
- Alternate plan design analysis
- Compare fully insured / level funded / self-funded
- Wellbeing plan review and changes
- Captive arrangement
- Self-funding for health
 - ASO model vs Un-bundled
- Boutique PBM / International Rx
- Transplant carve out
- Other options

Fully Insured

Self-funding



Path of Health Care Cost Containment

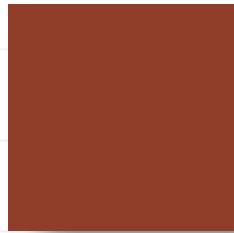
POTENTIAL SAVINGS

PATH OF PROGRESSION



Traditional

- Plan Design Strategy
- HSA Plan Migration
- Medicare Eligibility
- Self-funded Arrangement / Stop Loss Observations
- Defined Contribution Strategy
- Network Models



Customized

- Optimize Current Offerings (i.e. Telemedicine)
- Population Health Management
- Third Party Administrator / Pharmacy Benefit Management Analysis



Advanced

- Behavior Based Outcomes
- Value-Based Pricing
- Fair Market Value Pricing
- Direct Provider Contracting
- Group Captive Programs
- On-site / Near Site Clinics

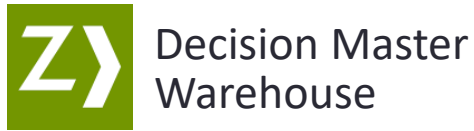


Progressive

- Independent TPA's; Bundled Pricing, Centers of Excellence & Second Opinion
- Quality vs. Cost Education/Communication
- Hospital Bill Auditing
- Direct Primary Care



Data Analytics & Technology



- Staffed Benefit Analysts
- Plan Design Benchmarking
- Simplified Cost Comparisons
- Predicative Decision-making
- Evaluate and Dynamically Tune Benefits to Meet Your Budget and Goals
- Risk Tolerance Models (test funding methods including self, level, full, and captive)



Analytical Resources

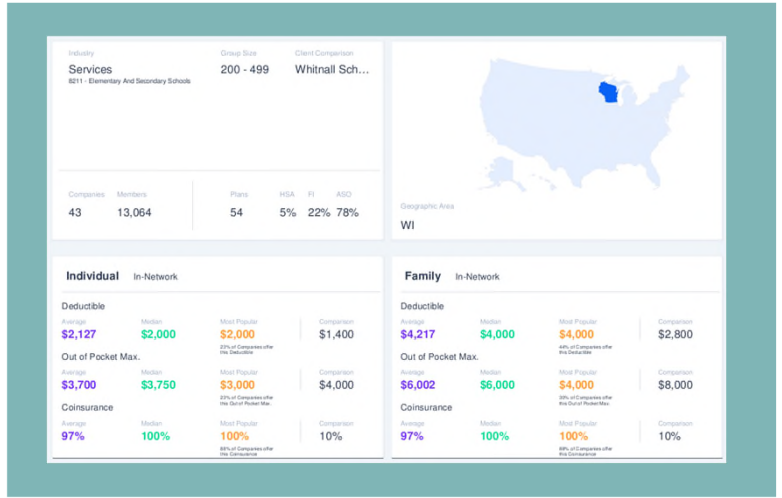
Plan Benchmarking

Lines of Coverage

- Medical
- Dental
- Vision
- Life
- STD
- LTD

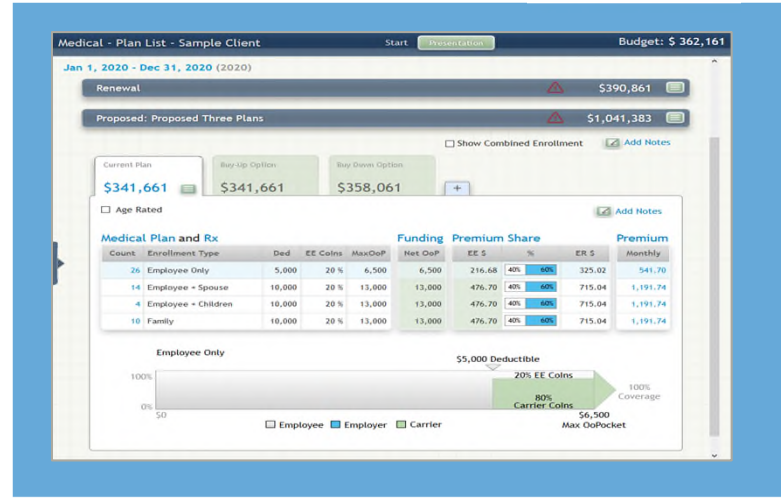
Data Sources

- R&R Book of Business
- DPI
- Assurex
- United Healthcare
- Anthem / BCBS
- Humana
- Delta Dental
- Sun Life and Unum
- Companies Like Me



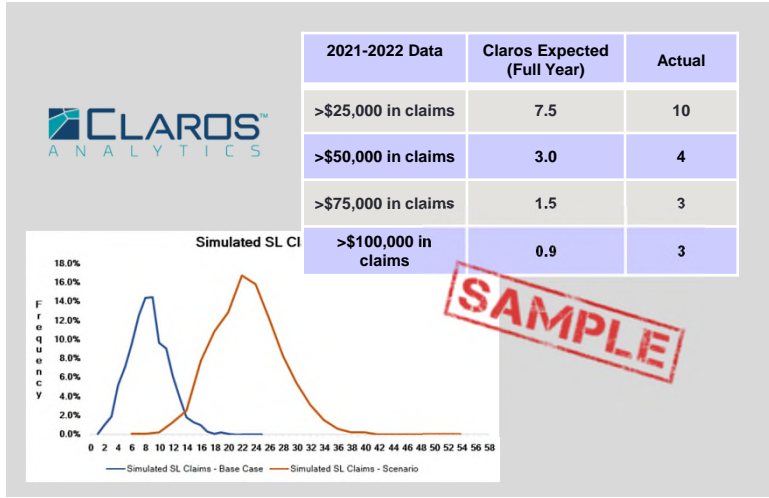
Contribution Modeling

- Average session is 1-1.5 hours with in-depth reports showcasing total projected costs
- Review contribution strategies in real-time
- Develop short/long term budgeting strategies
- Example – Defined Contribution Strategy
 - Currently Client ABC pays more per employee on the Select and Choice Plans than the Prime Plan
 - Defining based on Prime Plan Dollar Amounts would result in about \$90,000* in Client ABC savings thru Employee Contribution or Plan Choice (*HMO Employees)



Claros Analytics Tools

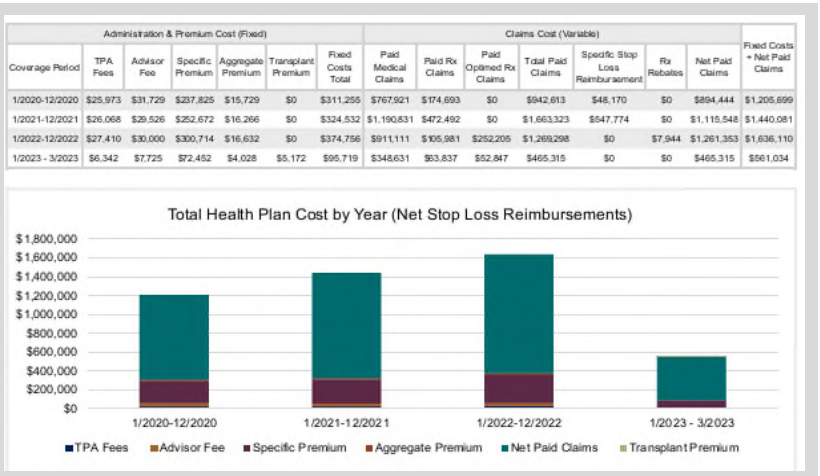
- ? Does it make sense to move to a self-funded option?
- ? What is the optimal stop loss level?
- ? Are high-cost claims as expected? Did the carrier rate correctly?
- ? What is the best plan funding option?
- ? Where should the budget be set?





Monthly and Annual Reporting Packages

Action Oriented Reporting Based on Your Experience and Needs



DATA



SORTED



ARRANGED



PRESENTED VISUALLY



EXPLAINED WITH A STORY



Client Name
Dental Funding Analysis Report

	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Annual Total
2023 Dental Funding													
Single	\$33.50												
Family	\$94.49												
Dental Admin Fee													
PEPM	\$5.00												
Monthly Dental Enrollment													
Single													
Family													
Monthly Dental Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Monthly Dental Expenses													
Dental Paid Claims	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Monthly Admin Fee	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Loss Ratio - Expenses/Funding	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Dental Funding Less Expenses	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

2021 Overview:

- Medical spend is up 24.3% over 2020:**
- Medical costs are up for high cost claimants (\$50k) and everyone else
 - Inpatient stays were up 32.8% with costs up 26.5%
 - ✓ HCC preemie newborn with 4 admits and 38 days
 - ✓ HCC behavioral health with 4 admits and 47 days
 - Covid-19 bounce back is driving spend for non-high cost claimants.
 - Average age has increased 3.4% over 2020
 - Network is still performing with over 54% in savings
- Pharmacy spend is down 27.7%:**
- Generic utilization is over 88%
 - Specialty costs are down over 25%
 - Pharmacy rebates have returned over \$278,000 in savings

Client Name
Life and Disability Renewal Summary 2015 to 2023

Year	Renewal Increase	Overview
2014		Effective 1.1.2014, moved carriers from the WMC/Aetna to Reliance Standard. Resulted in an estimated annual savings of \$23,064 . Life, AD&D and LTD rates guaranteed 3 years; STD rates guaranteed 2 years.
2015	0.00%	Rate Guarantee Life, AD&D, STD and LTD
2016	0.00%	STD up for Renewal, but receive a Rate Pass for 12 months; all other lines under the final year of their rate guarantee.
2017	0.00%	STD called for a rate increase, but changed the plan design for the STD which resulted in a "rate pass".
2018	25.00%	Life and STD increased, all other lines received a rate pass for 12 months. Went to market , and all other carrier rates were higher.
2019	0.00%	Added Critical Illness and Accident coverage - received a 12 month rate pass on all other lines for adding these lines of coverage.
2020	0.00%	Received a "rate pass"
2021	0.00%	Received a "rate pass"
2022	0.00%	Received a "rate pass"
2023	0.00%	Received a "rate pass" for STD; Voluntary Accident and Critical Illness. LTD & Life not up for renewal until 1/1/2024
9 Year Renewal Average	2.78%	

Year over Year Increase





High-Cost Claim Monitoring



Year-to-Date Large Claims Analysis

Client Name
(1/2023 - 3/2023)

Claims > \$37,500								
Plan	Relationship	Diagnosis	Medical Claims	Rx Claims	Total Paid Claims	Specific Deductible	Net Claims Expense	Claims > Specific
Buy Up Plan	Employee	Condition	\$68,124	\$352	\$68,476	\$75,000	\$68,476	\$0
Total Claimants:					1			
Total (YTD) Medical/Rx Claims Paid					\$465,315			
Large Claims % of Medical/Rx Claims Paid					15%			

- Monthly review of clinical notes
- Develop strategy around plan design as needed
- Discussions with TPA if additional programming may reduce plan costs





Rx Management

- Annual review of PBM contracts
- Review of Specialty Rx trends / actuals
- Vetting of third-party Specialty Rx programs
- Year end pharmacy reconciliations





Chronic Disease: The Costs Involved

DIRECT COSTS:

Behavior drives most chronic conditions



Poor diet



Tobacco

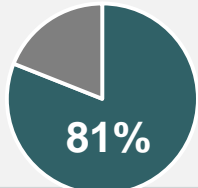


Lack of exercise

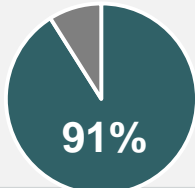


\$0.75 of every \$1.00 spent on healthcare

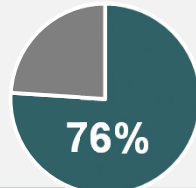
Chronic conditions account for:



Hospital Admissions



Prescriptions



Doctor Visits

INDIRECT COSTS:



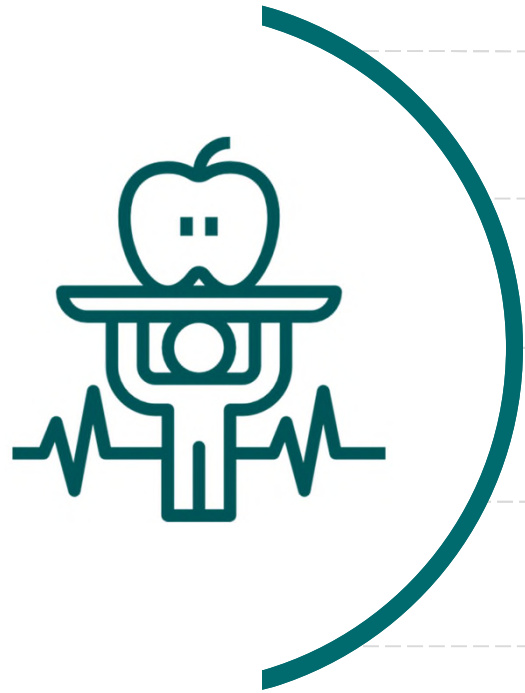
Frequent Absences From Work

Work Injuries

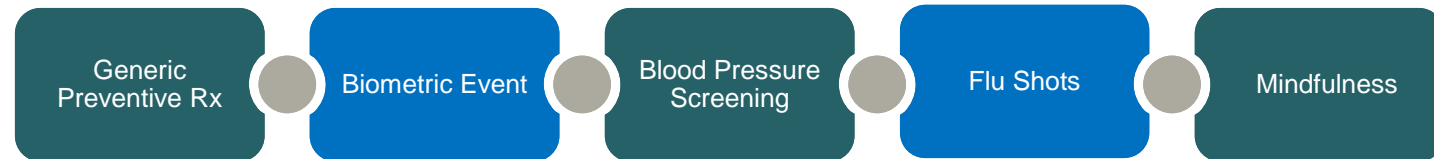
Lost Productivity



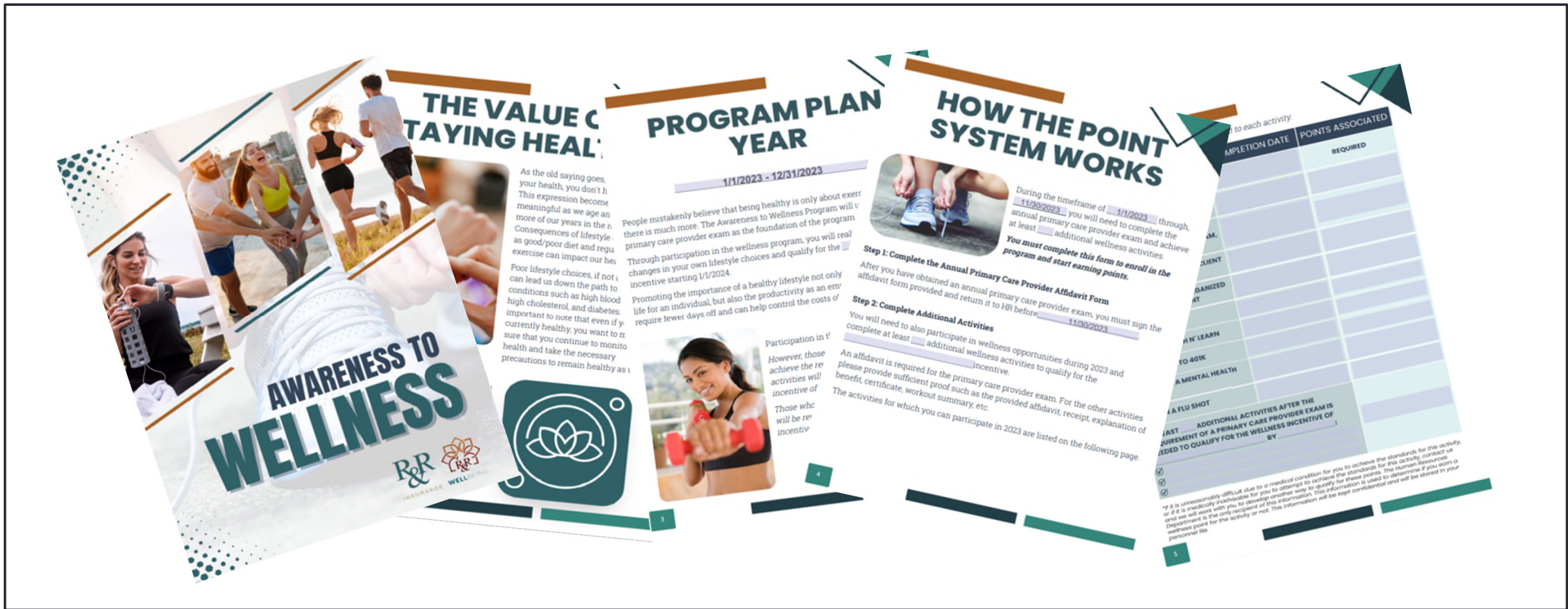
Wellbeing & Ergonomics Team



- Design and manage wellness programs
- Vendor management includes bio-metrics and health risk assessments
- Provide data to illustrate exposures impacting employer costs that are tied directly to employee health
- Client-site assessment and recommendations for focused initiatives
- Maximizing carrier programs



Awareness to Wellness



1. THE VALUE OF STAYING HEALTHY

As the old saying goes, your health, you don't have it until you lose it. This expression becomes more meaningful as we age and more of our years in the consequences of lifestyle choices such as good/poor diet and regular exercise can impact our health. Poor lifestyle choices, if not corrected, can lead us down the path to conditions such as high blood pressure, high cholesterol, and diabetes. It is important to note that even if you are currently healthy, you want to ensure that you continue to monitor your health and take the necessary precautions to remain healthy as you age.

2. PROGRAM PLAN YEAR

1/1/2023 - 12/31/2023

People mistakenly believe that being healthy is only about exercising and eating right. There is much more. The Awareness to Wellness Program will require you to complete an annual primary care provider exam as the foundation of the program. Through participation in the wellness program, you will realize the benefits of making changes in your own lifestyle choices and qualify for the incentive starting 1/1/2024.

Promoting the importance of a healthy lifestyle not only benefits the individual, but also the productivity as an employee. A healthy lifestyle requires fewer days off and can help control the costs of healthcare.

3. HOW THE POINT SYSTEM WORKS

During the timeframe of 1/1/2023 through 11/30/2023, you will need to complete the annual primary care provider exam and achieve at least additional wellness activities. **You must complete this form to enroll in the program and start earning points.**

Step 1: Complete the Annual Primary Care Provider Affidavit Form
After you have obtained an annual primary care provider exam, you must sign the affidavit form provided and return it to HR before 11/30/2023.

Step 2: Complete Additional Activities
You will need to also participate in wellness opportunities during 2023 and complete at least additional wellness activities to qualify for the incentive.

An affidavit is required for the primary care provider exam. For the other activities, please provide sufficient proof such as the provided affidavit, receipt, explanation of benefit, certificate, workout summary, etc.

The activities for which you can participate in 2023 are listed on the following page.

ACTIVITY	COMPLETION DATE	POINTS ASSOCIATED	REQUIRED
ANNUAL PRIMARY CARE PROVIDER EXAM			
WELLNESS ACTIVITIES			
FLU SHOT			
ADDITIONAL ACTIVITIES AFTER THE REQUIREMENT OF A PRIMARY CARE PROVIDER EXAM IS MET TO QUALIFY FOR THE WELLNESS INCENTIVE OF \$ <u> </u> BY:			

4. AWARENESS TO WELLNESS

5. CUSTOMIZED FOR YOU AND YOUR ASSOCIATES

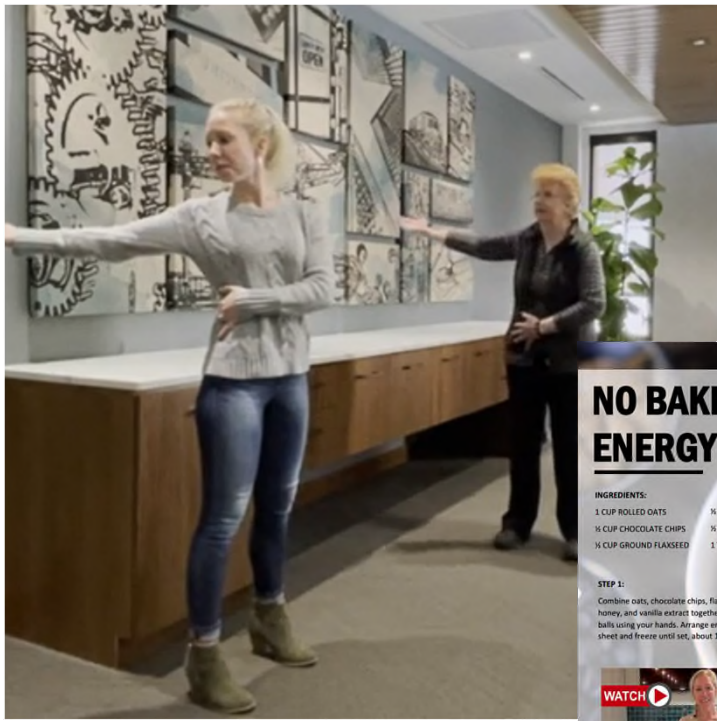
Customized for you and your associates



Wellbeing Made Easy



Improve Flexibility through Stretching Video and Flyer



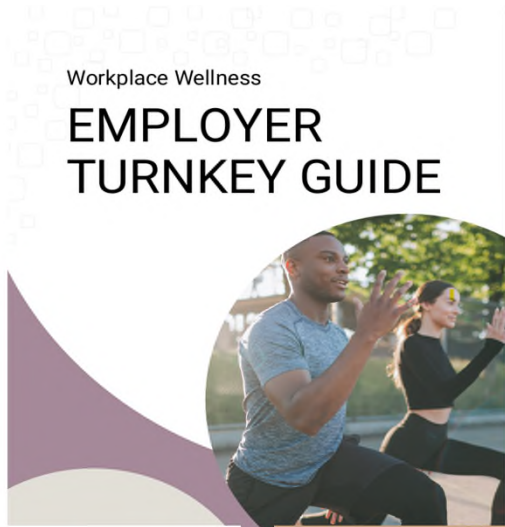
NO BAKE ENERGY BITES

- INGREDIENTS:**
- 1 CUP ROLLED OATS
 - 1/2 CUP PEANUT BUTTER
 - 1/2 CUP CHOCOLATE CHIPS
 - 1/2 CUP HONEY
 - 1 CUP GROUND FLAXSEED
 - 1 TSP. VANILLA

STEP 1:
Combine oats, chocolate chips, flaxseed, peanut butter, honey, and vanilla extract together in a bowl, form into balls using your hands. Arrange energy bites on a baking sheet and freeze until set, about 1 hour.



Click the video above to follow along as our Health & Wellness Consultant demonstrates how to make these tasty bites!



Workplace Wellness EMPLOYER TURNKEY GUIDE

WHY WELLNESS?

Engage employees in a healthy way... (text continues)

Six Steps to Wellness Success!

1. Create a Wellness Team
2. Collect Data
3. Assess Needs
4. Develop Program
5. Implement Program
6. Evaluate Program

Q&A: What is an Operating Plan?

Operating plans are usually a map for... (text continues)

Wellness Tip #3:

Regular evaluation is important for any wellness program... (text continues)

Wellness Tip #4:

Improving your health doesn't have to be expensive... (text continues)



AWARENESS TO WELLNESS

THE VALUE OF STAYING HEALTHY

As the old saying goes, "If you don't have your health, you don't have anything"...

PROGRAM PLAN YEAR

1/1/2023 - 12/31/2023

People mistakenly believe that being healthy is only about exercise and diet when there is much more to it...

HOW THE POINT SYSTEM WORKS

During the timeframe of 1/1/2023 through 12/31/2023, you will need to complete the annual primary care provider visits and activities at least 1 additional wellness activities.

WHAT DO YOU NEED TO DO?

- 1. Complete the Annual Primary Care Provider Affirmation Form
- 2. Complete Additional Activities

ACTIVITY	COMPLETION DATE	POINTS ASSOCIATED
COMPLETE FORM OF AN ANNUAL PRIMARY CARE PROVIDER AFFIRMATION	1/1/2023 - 12/31/2023	REQUIRED
COMPLETE FORM OF AN ANNUAL PRIMARY CARE PROVIDER AFFIRMATION	1/1/2023 - 12/31/2023	REQUIRED
COMPLETE AN ANNUAL PRIMARY CARE PROVIDER AFFIRMATION	1/1/2023 - 12/31/2023	REQUIRED
COMPLETE AN ANNUAL PRIMARY CARE PROVIDER AFFIRMATION	1/1/2023 - 12/31/2023	REQUIRED
COMPLETE AN ANNUAL PRIMARY CARE PROVIDER AFFIRMATION	1/1/2023 - 12/31/2023	REQUIRED





Mental Health

WISCONSIN & ILLINOIS Content & Courses

- ✓ Well Badger Resource Center
- ✓ Illinois Family Resources
- ✓ Resilient Wisconsin
- ✓ Access
- ✓ Family Caregiver Support Programs
- ✓ 211
- ✓ Help for Homeowners
- ✓ Coping with Stress – CDC
- ✓ Lifesaver Wellbeing Series



Mental Health Tools & Resources

R&R has accumulated a number of tools and resources around Mental Health support that employers can provide to their employees to assist them in navigating their challenges, from mental health, depression and anxiety as well as caregiver stress and financial hardship.

Hover your phone over the QR Code in the bottom right to access the digital resources.



RESOURCES TO CONTACT

- ✓ **National Mental Health Hotline**
(free & confidential)
866.903.3787 or text NAMI to 741741
- ✓ **Mental Health-Related Distress**
Call or Text: 988
Chat 988lifeline.org
988 Suicide & Crisis Lifeline
- ✓ **211**
(Free Referral Helpline)
Dial 211 from any phone
- ✓ **Local NAMI Chapters**
Wisconsin: 608.268.6000
Illinois: 217.522.1403
www.namiwisconsin.org
www.namiillinois.org
- ✓ **National Suicide Prevention**
Hours: Available 24hrs.
Languages: English/Spanish
800.273.8255
- ✓ **HOPELINE**
Text HOPELINE to 741741
- ✓ **Aging & Disability Resource Center**





Benefit Open Enrollment Process



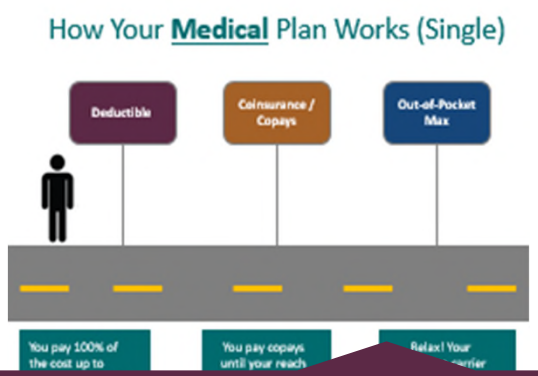
Recruitment



Benefits & Enrollment Guide



Embedded Video Education



Face-to-Face Employee Meetings



Wiser Consumer of Healthcare



Importance of Preventive Care

Laughlin Constable

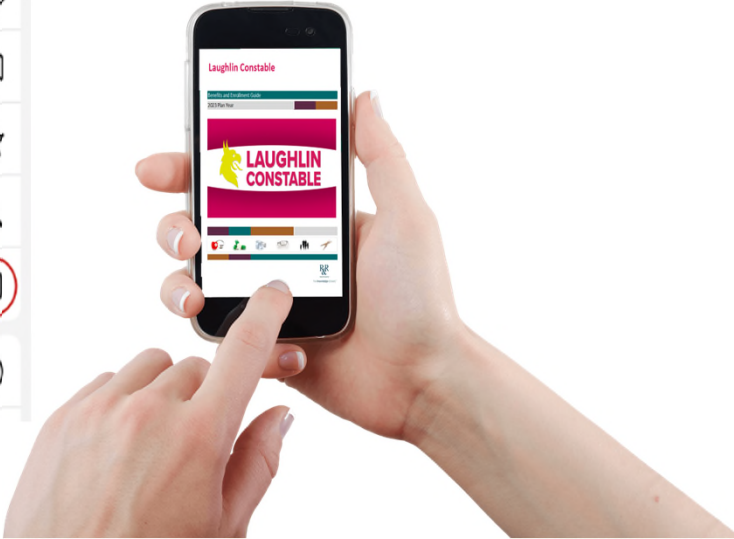
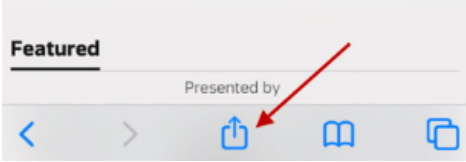
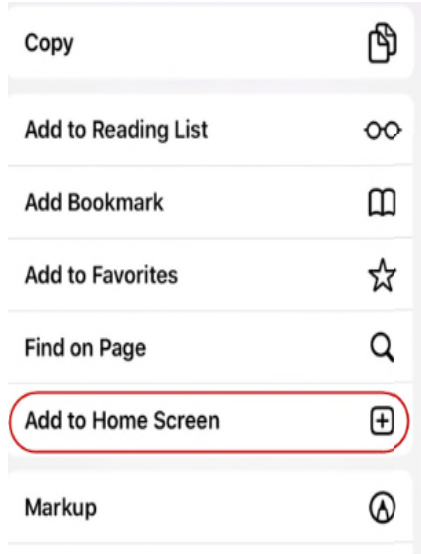
Benefits and Enrollment Guide

2023 Plan Year



Educate & Communicate

- Scan QR code
- Save to Home screen
- Title it: *“Benefits”*





Open Enrollment Meetings



Face-to-Face Meetings

Live Virtual Meetings



Video with Green Room Technology

Dental Plan Page 11 & 12 of your Benefits Guide

Dental
Dental coverage is provided through Delta Dental and includes coverage for exams, cleanings, and restorative services. For a list of participating providers, visit www.deltadental.com

Benefit Category	Coverage Services	On Network Coverage (In-Network Provider)	Out-of-Network Coverage (Out-of-Network Provider)
Preventive Services	Cleanings, Fluoride Treatments, Sealants, Space Maintainers	100%	100%
Basic Services	Restorations, Single Crowns, Oral Surgery, Periodontics, Endodontics, Inlays, Onlays, Castings	80%	80%
Major Services	Implants, Dentures, Bridges, Dentures	50%	50%
Orthodontia	Orthodontia	50%	50%

Employee Contributions (Premiums)

	Employee	Employee + Spouse	Employee + Child(ren)	Family
Delta Plan	\$8.75	\$22.50	\$24.42	\$28.81
\$2,000 Plan	\$8.98	\$22.73	\$24.65	\$29.04

When do Dental Benefits Begin?

For New Hires: Coverage begins immediately following 30 days of employment.
For Current Employees: Coverage can be retroactive each year during our next Open Enrollment period (11/15/23), effective as of 1/1/2024. You may also be eligible to enroll and start based on Qualifying Event (the marriage, birth of a child, or loss of other coverage). See HR for additional information.





FSA, HRA, HSA and COBRA Expertise



Chris Kramer

Employee Benefits Consultant

Chris has **20+ years** of expertise in FSA, HRA and HSA design, communication, compliance and administration

- Designed, implemented, or helped manage over 3,000 plans nationally
 - Ex: Blain's Farm & Fleet, Green Bay Packers, Hobby Lobby, & LSU
- Speaker at WASBO, State Education Convention, SHRM, Chambers of Commerce, and Economic Development Commissions
- Lobbied in Washington DC as a proponent of FSAs, HRAs, and HSA with Representatives, Senators, their Health Care Liaisons, members of the Treasury Department and Economists from the Domestic Policy Council.
- Excellent contacts at account-based plan TPAs



Maximizing your Offerings

Maximizing your current programs

- Education on helping employees save money using digital resources



How I Saved Over 1K

Ex: Add QR code to Employee education piece on Carrier value adds so it is at your employee's fingertips



Ex: Customized video on how to use hospital Price Transparency tools



A digital coach for your health

Well-being Coach can help you reach your health goals

Whether your health goals are big or small, Well-being Coach is here to help motivate and inspire you. The digital coaching app is available to you at no extra cost.

Well-being Coach can help you make positive, lasting change with 24/7 support through your smartphone or Apple Watch. The app learns about your habits and lifestyle to give you customized, step-by-step guidance you can act on — whether you want to quit using tobacco, lose weight, or achieve other wellness goals.

Well-being Coach helps keep you on track with:

- One-on-one text coaching, day or night.
- Feedback on food choices, general nutrition, and meal planning.
- Support for quitting tobacco before, during, and after your actual quit date.
- Activity tracking and recommendations.
- Help for other well-being issues, like mindfulness and sleep.

Your health journey is yours to explore. Well-being Coach is here to encourage and inspire you wherever you are along your path.



Anthem.



Maximizing your Offerings

Maximizing your current programs

- Education focused on what employees need and using technology to assist

Ex: Focused Learning Session on topics employees requested – Video recorded for employee portal



Ex: Highlight important yet often underutilized benefits

Call **LifeMatters®** by Empathia toll-free anytime. **1-800-367-7474**

Assistance with Life, Work, Family, and Wellbeing • 24/7/365

Call collect to **262-574-2509** if outside of North America

Visit **LifeMatters®** online at **mylifematters.com**

 facebook.com/lifematterseap

Language assistance services in your preferred spoken and written languages are available at no cost by calling 1-800-367-7474.




HSA/HRA/WELLNESS PROCESS
VOLUNTARY LEARNING SESSION

 **MAY 31ST**  **3:45 PM** 

The following to be reviewed in detail:

- Health Savings Accounts (HSA)**
 - HSA rules - how to use them and the HSA Authority platform and tools available
- Health Reimbursement Arrangement (HRA)**
 - How HRAs work and integrate with the HSA
- Biometric Tests**
 - Process to earn additional HSA contribution
- Awareness to Wellness**
 - How it works and impacts the employee share of premiums for the 7/1/23-6/30/24 period


CHRIS KRAMER
R&R INSURANCE SERVICES, INC.

Example of Benefit Administration Technology



Personalized Virtual Open Enrollment With EP6ix

Summarize benefits and educate employees

LISTEN

RVM

Click [Here](#)  to play



WATCH

Custom Videos

Click [Here](#) to watch video

Virtual Open Enrollment

Let us do the work with you...

Benefit Counselors available for
» Phone or Screenshare Meeting «

Enrollment is more convenient than ever. One conversation, by phone or screenshare meeting, provides a comprehensive look at your benefits, from health to life insurance, from disability to supplemental insurance coverage. We'll even help make sure you're not paying for coverage you don't need.

APPLE CORE REHAB
Contact the Call Center from 9 AM to 9 PM at (855) 698-3938 Nov 15 - Dec 1, 2021 (Register using Enrollify starting 11.24.21)

Do open enrollment the convenient way. Complete open enrollment with a Benefit Counselor over the phone or through a virtual screenshare meeting.

Two options for enrolling: Register for the app to receive benefit information and schedule a virtual with a Benefit Counselor by downloading the app at <https://enrollify.com/app> and entering **Benefit2022** (capital B) as your temporary password along with your cell phone number or use the number above to contact the Call Center for assistance.

enrollify

MetLife DELTA DENTAL

enrollify

READ

Digital/Printed Postcards & Posters

Virtual Open Enrollment

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» Phone or Screenshare Meeting «

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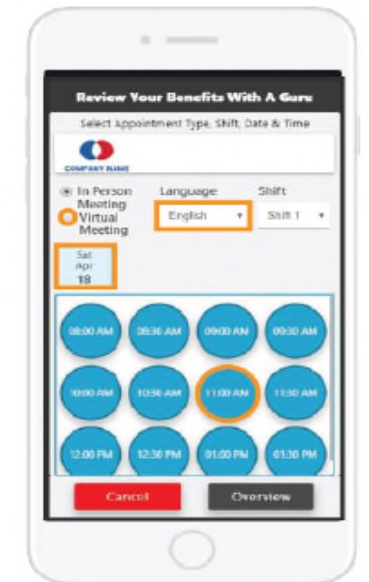
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enrollify

ACT

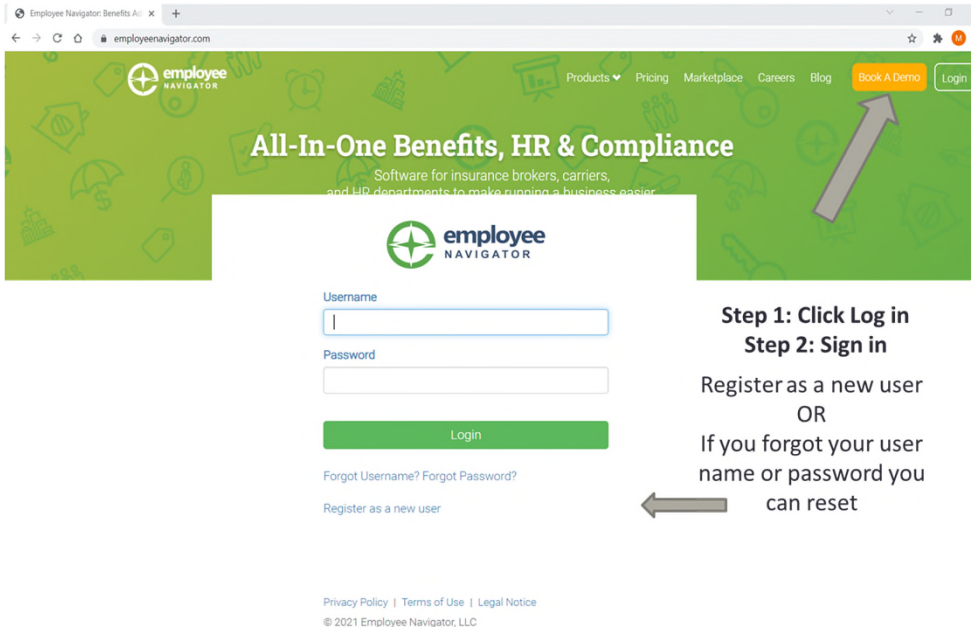
Schedule & reminders

One on One meetings with Benefit Counselors & call centers for employees



How To Enroll Into Your 2023 Benefits

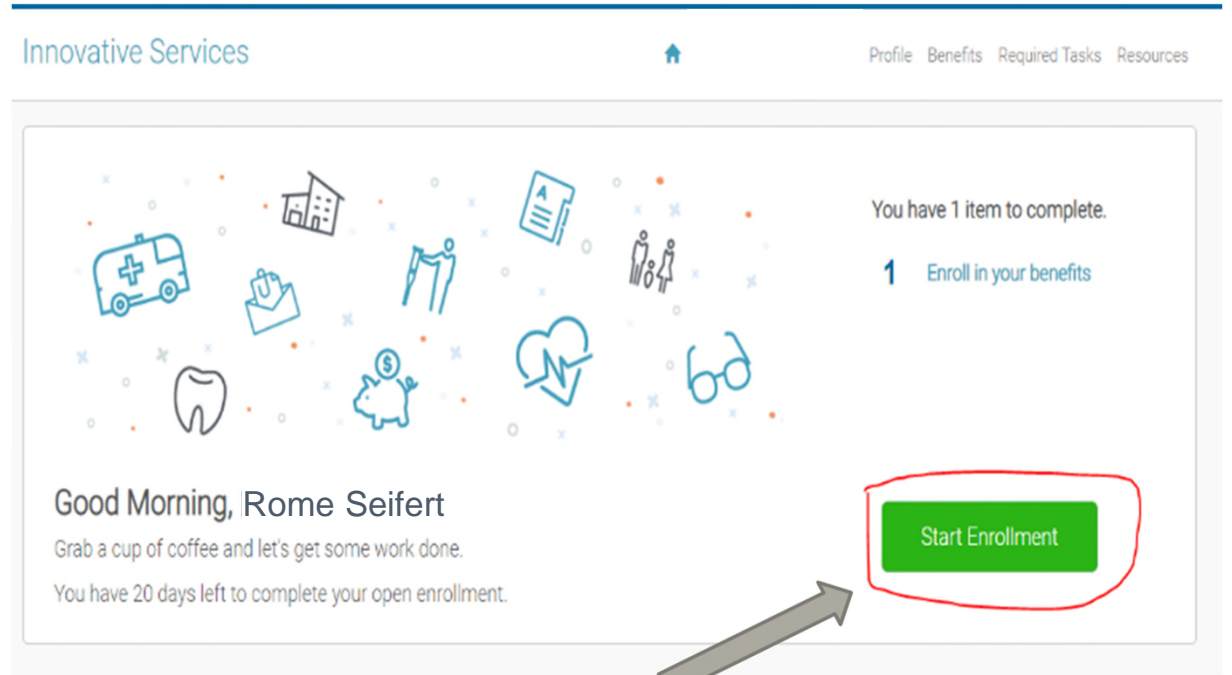
STEP 1: Log-in, STEP 2: Sign-In



Step 1: Click Log in
Step 2: Sign in

Register as a new user
OR
If you forgot your user name or password you can reset

STEP 3: Start Enrollment



You have 1 item to complete.

- 1 Enroll in your benefits

Start Enrollment

How To Enroll Into Your 2023 Benefits

STEP 4: Select Plan(s)

Which plan do I want?

2023 POS HSA \$3500

Single \$52.54 Effective 7/1/23
Family \$119.51 Employee
Cost per pay period

[Compare](#) [Details](#) [Select](#)

2023 HMO HSA \$3500

Single \$20.15 Effective 7/1/23
Family \$45.94 Employee
Cost per pay period

[Compare](#) [Details](#) [Select](#)

[Save & Continue](#)

[Don't want this benefit?](#)

Helpful Resources

[SBCs](#)
[Ep6ix links](#)

Step 4: Select each plan you want or waive and SAVE

STEP 5: Sign & Finalize Elections

Enrollment Summary **Step 5: After all elections are complete, click to SIGN and finalize your selections** [Print](#)

Below is a summary of your elections and cost for the upcoming plan year. If you have any questions about your enrollment or would like to make changes, please contact HR.

Signature required

You've elected all your benefits, but we still require a signature before advancing.

Please review the acknowledgment below.

As an eligible employee, I acknowledge that I understand the benefits, rights, and obligations available to me under the plan. I certify the facts contained in this summary are true and complete to the best of my knowledge. I understand that deductions can be made on a pre-tax or post-tax basis. Furthermore, I understand that elections for plans that are deducted on a pre-tax basis cannot be changed during the plan year unless I experience a Qualified Life Event.

[Sign to complete enrollment](#) [Click to Sign](#)

Employer Educational Seminars

Below is a sampling of our 2023 Benefits Seminars:



Trends & Prescription Drugs	<ul style="list-style-type: none">• Tuesday, March 14, 2023• 11:00 a.m. Central (60minutes)
How Employee Navigator Can Make Paper Forms a Thing of the Past	<ul style="list-style-type: none">• Tuesday, March 28, 2023• 11:00 a.m. Central (60 minutes)
How Employee Navigator Can Make Paper Forms a Thing of the Past	<ul style="list-style-type: none">• Tuesday, May 16, 2023• 11:00 a.m. Central (60 minutes)
FMLA/ADA Requirements for Employers	<ul style="list-style-type: none">• Tuesday, June 13, 2023• 11:00 a.m. Central (60 minutes)

Access Workplace Policies & Forms

Find What you are looking for - FAST

ACA Reporting – Generate Forms 1094/1095

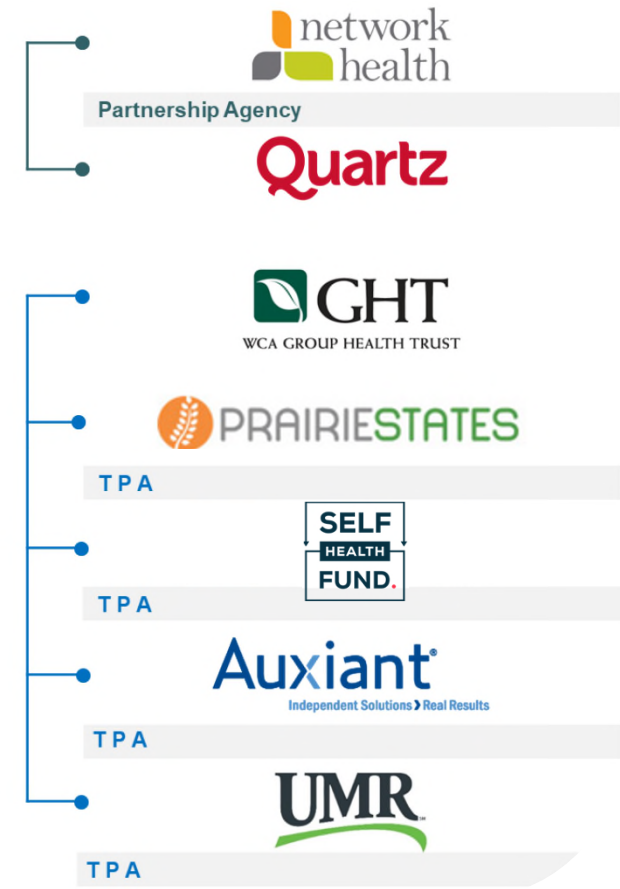
Multistate Law Comparison Tool

Salary Benchmarking Tool

Sample Job Descriptions

Total Compensation Statements

Partnerships Matter!





About Assurex Global

We are an exclusive partnership of the most prominent independent insurance agents and brokers in the world

- Founded in 1954, Assurex Global is the world's largest privately-held commercial insurance, risk management, and employee benefits brokerage group
- Large Practice Group
- Tens of thousands of clients within Assurex
- Share 'best practices' with each other



- LARGEST INDEPENDENT BROKERAGE IN REVENUE
- 5TH LARGEST BROKER WORLDWIDE
- \$35 BILLION ANNUAL PREMIUM VOLUME
- 630+ PARTNER OFFICES
- 100+ PARTNER FIRMS
- 21,500+ EMPLOYEES
- 6 CONTINENTS



Global Innovation – Powered By Benefitpitch



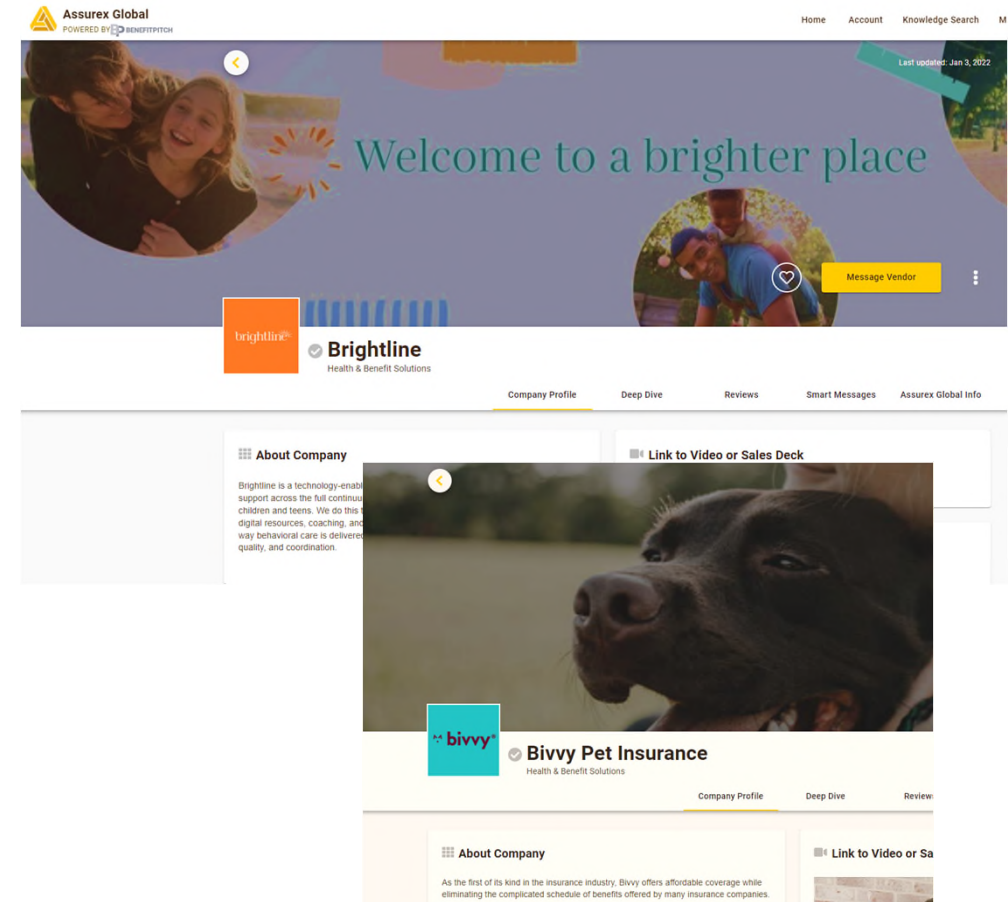
Provides:

- Easy Access to locate specific niche benefit vendors
- Deep Dive on the costs, how the programs work
- Reviews

Top 10 Assurex Global Service Type Searches

- Behavioral / Mental Health
- Benefits Administration
- COVID-19 Testing / Services
- Earned Wage Access / Instant Pay
- High Performing Networks
- Mindfulness
- Pet Services (Pet Insurance / Pet Wellness)
- Pharmacogenomics (PGX)
- Tobacco / Smoking Cessation
- Voluntary Benefits

Example: Technology-enabled pediatric behavioral health company



HR & Member Support Concierge Service

Call or Email Your Insurance Concierge Team!

- Chris Kramer
- Ellen Dunn



R&R Insurance Services, Inc.
262-953-7100

- N14 W23900 Stone Ridge Dr.
Waukesha, WI 53188
- 5317 W. Grande Market Dr.
Appleton, WI 54913
- 1370 Glory Road
Green Bay, WI 54304



Laughlin Constable

If you have questions or concerns about your insurance, we want to help.

Your insurance Concierge Team will work directly with you to:

- Explain your insurance benefits
- Provide claim advocacy and explanation
- Recommend value-added services from your insurance carrier
- Help you make healthy changes by connecting you to available preventive care and wellness resources
- Guide you through insurance options as the needs of you and your family change



N14 W23900 Stone Ridge Drive, Waukesha, WI 53188
myknowledgebroker.com

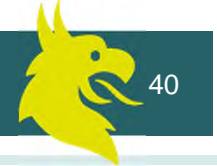
Your Concierge Team



Chris Kramer
Employee Benefit Consultant
Chris.Kramer@rins.com
Phone & Fax: 262.953.7151



Ellen Dunn
Manager, Client Services
Ellen.Dunn@rins.com
Phone & Fax: 262.953.0722



Additional Team Expertise



Compliance Expertise



- Compliance gap analysis
- Customized Compliance Documents
- Online HR Library resource
- Proprietary Tools
(HCR impact, ALE calculator, 1095-Cs)

von Briesen
von Briesen & Roper, s.c. | Attorneys at Law





The end of continuous Medicaid coverage

What you and your employees need to know

During the COVID-19 Public Health Emergency, nearly all Medicaid members were able to stay enrolled in their current health coverage regardless of changes in eligibility or status.

When Medicaid renewals and eligibility reviews start again, your employees may lose coverage for a variety of reasons. In fact, approximately **6.8 million people** could lose Medicaid coverage and will be looking to understand the health coverage options available to them.¹

How could these changes impact my workforce?

You may have employees who waived employer-sponsored health coverage and kept their Medicaid benefits when starting employment with your company.

If these employees are disenrolled from Medicaid, they could be eligible to enroll in your employer-sponsored coverage or another health plan outside of your standard open enrollment period due to what's known as a qualifying life event.

Employees have 60 days before and 60 days after a qualifying life event to join a group medical plan.²

What are the possible scenarios my business could encounter?

1. An employee could still qualify for Medicaid benefits and maintain their Medicaid coverage.
2. An employee may no longer qualify for Medicaid benefits and could join your employer-sponsored group plan.
3. An employee may no longer qualify for Medicaid benefits and could enroll in an Anthem Individual and Family plan outside of your employer-sponsored group plan.

Meet Rhonda³

In 2020, Rhonda became unemployed and enrolled in Medicaid coverage. During the summer of 2021, she started a new job.

When the open enrollment season began that fall, Rhonda waived employer-sponsored coverage with her employer and maintained her Medicaid benefits.

When Medicaid renewals and eligibility reviews resume, Rhonda realizes she will no longer qualify for Medicaid coverage because her income has changed.

Rhonda asks her company's Human Resources department for employer-sponsored health plan information. She will be eligible to sign up outside of the open enrollment period due to her qualifying life event.

She discusses her options with Human Resources, including an employer-sponsored plan with Anthem.

Questions? We're here to help. Please contact your sales representative or broker for additional information.

NEW Annual Employer Reporting Responsibility

Complete CAA Rx Data Collection Reporting by March 1, 2023

Please complete the following information for 2022, and submit by March 1, 2023. You may need to scroll down to complete all information and select the Finish button to submit your response.

*1. In 2023, we are required to report the Average Monthly Percentage of Premium that is covered by your employee/member and the Average Monthly Percentage of Premium that is covered by you, the employer/group.

These two percentages should total 100%. Round your answers so that they total 100% (your Remaining Value should be 0). Please enter your responses below.

Average Monthly Percentage of Premium covered by Employee/Member for 2022 (%)

Average Monthly Percentage of Premium covered by Employer/Group for 2022 (%)

100 Remaining value

Here is an example of one way that the Average Monthly Premium percentage for Employer and Employee can be calculated:

	Premium Paid Dollars	Premium Paid %	Calculation
Total 2022 Employee Contribution of Premium	\$225,000	37%	\$225,000/\$600,000 = 37.5%
Total 2022 Employer Contribution of Premium	\$375,000	63%	\$375,000/\$600,000 = 62.5%
Total Premium	\$600,000	100%	

Please ensure that the percentages of employer and employee contributions equals 100% by rounding up or down as needed.

2. To complete the submission, please enter the following information. Click "Finish" below to submit your response by March 1, 2023.

Your Responses

Group Name _____

Group/Case Number _____

Group Employer Identification Number (EIN) _____



Compliance / Consulting & Legal Support

- **Compliance Kit:**
 - Summary Plan Descriptions
 - Summary of Benefits & Coverage
 - Women's Health & Cancer Rights Act (WHCRA)
 - Medicare Part D Notice of Creditable Coverage
 - Children's Health Insurance Program
 - Health Insurance Exchange / Marketplace Notice
 - Wellness Notice
- **Additional Compliance Support:**
 - 5500 Preferred Vendor Pricing
 - 1094 / 1095 Proprietary Tool
 - PCORI Fee Calculation
 - R&R/Zywave Client Portal



Check-off as completed

① Review the "Requirements for Digital Distribution of your Compliance Documents" to determine if you are able to distribute these documents electronically or not.

② Review the Employer Compliance Checklist that provides a brief summary of the documents provided, the audience that must receive the documents and the distribution timeframe for the documents to be received by.

③ Distribute Summary Plan Descriptions (SPD's) to plan participants.

④ Distribute Summary of Benefits and Coverages (SBC's) to health plan participants.

⑤ Distribute Women's Health & Cancer Rights Act Annual Notification to health plan participants.

⑥ Distribute Medicare Part D Notice to health plan participants.

⑦ Distribute the Children's Health Insurance Program (CHIP) Annual Notification to ALL employees.

⑧ Distribute the Health Insurance Exchange/Marketplace Notice to ALL employees. Referred to as the FLSA notice.

⑨ If applicable, distribute the Wellness Disclosure to health plan participants.

800.566.7007 | myknowledgebroker.com

Customized
Compliance Docs



Medicare Education & Support

R&R's Medicare Team can help your employees with:



- Understanding the “Alphabet Soup” of Medicare
- Reviewing options of enrolling onto Medicare versus remaining on the plan
- Explaining the difference between traditional Medicare and Medicare Advantage (Part C) plans
- Evaluating Medicare Part D (prescription drug) coverage options
- Group Meetings & One-On-One Sessions

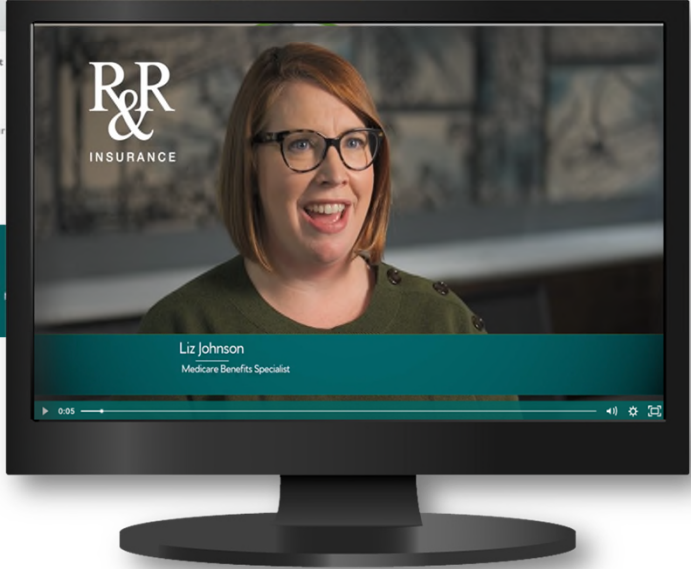
we know:
The right amount of health insurance means a healthy life



- 6 MONTHS BEFORE TURNING 65**
- Learn the different parts of Medicare
 - Part A
 - Part B
 - Part C (Medicare Advantage Plan)
 - Part D
 - Medicare Supplement Plans
 - Determine if you need to enroll in Medicare
 - Do you have access to an employer group health plan?
 - Is your current plan considered Creditable Coverage?
 - Is your current coverage an Health Savings Account (HSA) qualified plan?
 - Are you, or your employer, contributing towards the HSA?

- 1 MONTH BEFORE TURNING 65**
- Make sure you have your red, white and blue Medicare card and the ID card for your other lines of coverage
 - Once you have your new coverage in place, make sure you terminate your old coverage
 - Update your healthcare providers with your new insurance information
- ANNUALLY**
- Watch for your plan's Annual Notice of Change (ANOC) that outlines any plan changes for the next calendar year. The ANOC is sent out in October
 - During the Annual Enrollment Period (AEP), review your Part D coverage or Medicare

- 3 MONTHS BEFORE TURNING 65**
- Enroll in Medicare through the Social Security Administration, unless you have determined that you can delay your Medicare enrollment
 - Once you have your Medicare Claim Number, you can enroll the other lines of coverage
 - Schedule an appointment with Liz to review your coverage and cost information



Our Business Units



Strategic Business Units



Personal Insurance

- Offering Group Home and Auto Insurance



Commercial Insurance

- Keeping your business, your people and your assets safe – free from the risk that can drive up your operating costs.



Wealth Management

- Helping employees improve their financial wellbeing and retirement goals

the knowledge brokers™



Transition Plan

Our Transition plan is ‘Reading, Writing and Arithmetic’



Reading
wRiting
aRithmetic

Reading -

- Re-review the current Laughlin Constable Employee Benefit Guide
- Review Benefit policies and documents with carriers
- Review previous meeting notes on strategy and goals

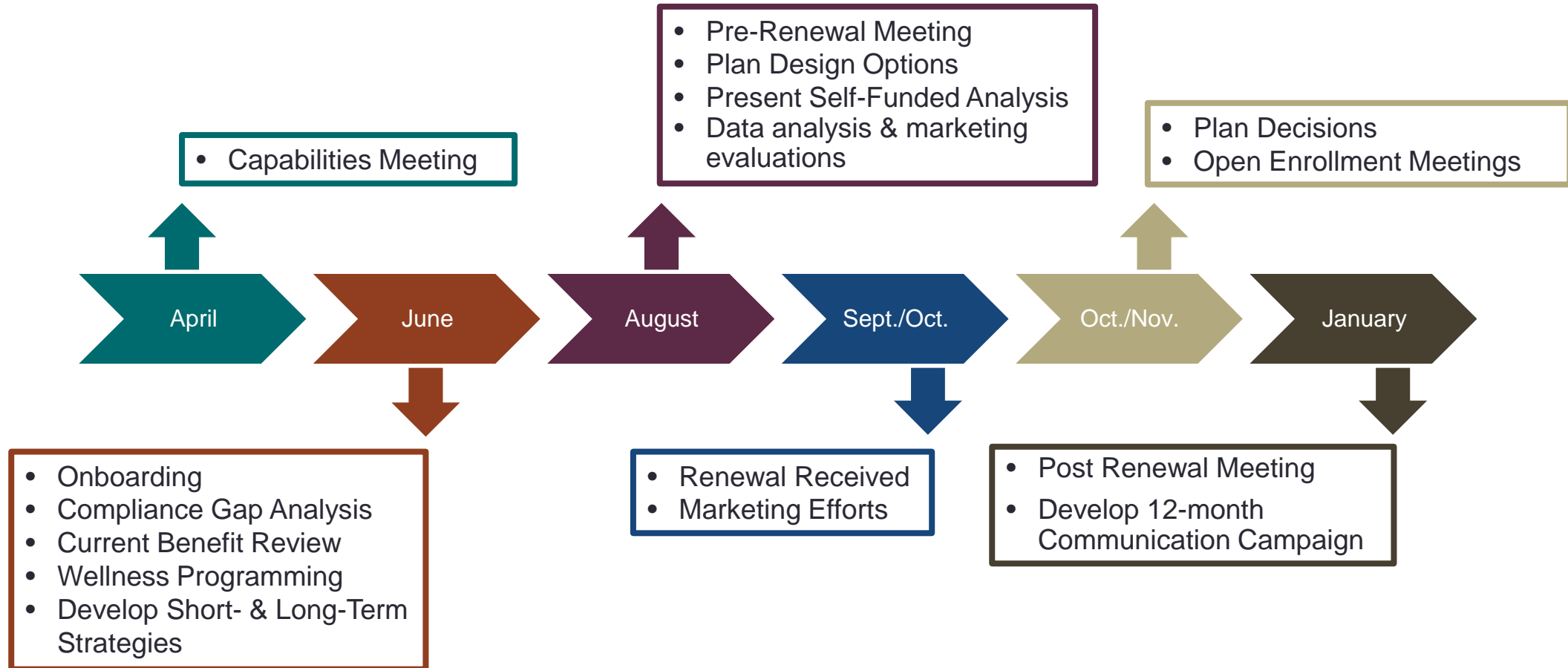
Writing -

- Meet with the Laughlin Constable administrative team and take notes on what is important to them, areas of benefit understanding and areas of benefit education improvement
- Complete R&R Insurance’s proprietary Onboarding guide documenting current benefit understanding and future goals

Arithmetic –

- Analytical analysis of current funding and cost structure of benefits
- Make sure costs are aligned with fiscal objectives of Laughlin Constable
- Market analyzation of benefit options

Strategy Throughout the Year






The R&R Insurance Report Card

Just Like **Laughlin Constable**, **R&R Insurance** Exceeds Expectations

Commitment to Education	A+
Self-Funding Expertise	A+
Analytical capabilities and claim review	A+
Communication and educational skills	A+
Controlling health care costs	A+
Effective wellbeing program creation	A+
Short and long term goal setting & delivery	A+
Capacity to benchmark benefit programs	A+
Problem solving	A+
Providing comprehensive compliance guidance	A+
Creative plan design and review	A+
Responsiveness to client needs	A+

2022 Report Card
the knowledge brokersSM




99%
Overall Score



“
What Our
Clients are
Saying . . .
”



Public Community College in Illinois

*From the President of the College: " That was the **best employee benefits meeting** that I have ever watched."*

*From the Executive Director of Human Resources: "I just wanted to thank you again for attending our Finance Committee meeting this afternoon and for all the **time and effort you and your team put in to prepare for it.** It was comprehensive and informative and well-received by the attendees."*



Client in Southeastern WI

*"The team of professionals that led R&R's presentation impressed the committee, particularly their **professionalism with humility.**"*

*"They appear to know the strength of their internal resources and expertise and worked well together. Our team felt that R&R would **provide access to the right person at the right time** to meet the District's needs."*

*"They were the only firm that made **wellness** a significant component of their presentation. They shared examples of the types of **data reporting** that would be provided and used **to make informed decisions** regarding health and other benefits, as well as **innovative ideas** to potentially improve our health program."*



Client in Northern WI

"You are amazing! We have dealt with this issue forever and you took care of it for us like a champ. We should have been working with you years ago!"

Supporting Our Communities



www.myknowledgebroker.com



Board of Directors



Make it in NorthEast Wisconsin
Supporter – K12 Partnership Taskforce



Committee Member



BOY SCOUTS OF AMERICA®
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Board of Directors



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Board of Director / Committee Member



LA CASA DE ESPERANZA
HOPE • HELP • OPPORTUNITY

Supporter



ADVOCATE / DEVELOP / ENGAGE / GROW

Steering Committee Member

THANK YOU!

Let's Continue The Conversation!

Knowledge Is Potential!

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**LAUGHLIN
CONSTABLE**