



# 2023 REQUEST FOR PROPOSAL

## PREPARED BY

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# Executive Summary

As the consulting team dedicated to Wellpoint Care Network, we understand the organization needs a partner who has the expertise, experience, and services to design, implement, and administer a benefit program that is both fiscally sound and comprehensive for employees. We know that a robust benefits package attracts and retains the best talent which helps make Wellpoint Care Network a “Best in Class” organization to work for and achieve its important mission **“to help children and families thrive by restoring connections that promote equity, learning, healing and wellness”**.

R&R Insurance Services, Inc. (R&R Insurance) is genuinely engaged in collaborating with Wisconsin community-facing organizations. Selecting the right consulting partner is pivotal to the success of Wellpoint Care Network’s administrative team and its employees. R&R Insurance offers a unique combination of expertise, resources as well as a commitment to service with a personal touch. Our team is comprised of talented associates with in-depth benefit and consulting knowledge, experience, and analytical expertise. This experience allows Wellpoint Care Network to make informed, evidence-based decisions in the constantly changing world of healthcare and benefits.

We communicate at a level that makes sense not only for decision-makers, but also for the end-users of your benefits program. Capturing all that we do and what sets us apart from our competition, is difficult to present on paper. We appreciate the opportunity to build a long-term and mutually successful relationship with Wellpoint Care Network. We look forward to continued discussions and the opportunity to help you realize your strategic vision.

Our team is ready to partner with you!



## FIRM HISTORY & EXPERIENCE

**a) Provide a brief history of your firm including size, volume of business, locations, number of years in business, and business philosophy.**

R&R Insurance was established in 1975 and is approaching half a century of experience partnering with non-profits, professional firms, educational institutions, manufacturers and other employers across the country for their long-term employee benefits needs and more.

Our team of nearly 200 insurance professionals has helped us grow and become one of the larger and **fiercely independent** agencies in the Midwest. We are not beholden to shareholders or venture capital firms but to our customers.

Our goal is to promote a customer-focused culture while supporting the communities in which we serve, live and work. R&R operates as a full-service agency with comprehensive, strategic business units:

- Employee Benefits
- Property & Casualty
- Cyber Security
- Bonding
- Wealth Management
- Personal Lines

We serve close to 20,000 customers including 1,000 Employee Benefits group clients from our locations in Pewaukee, Neenah, West Bend and Madison. Our size allows us the ability to remain responsive to technology, utilize innovative solution-based resources, and consistently do what is necessary to retain customers while helping them optimize their benefits programs.

Additionally, R&R Insurance is a member of Assurex Global™, which is a consortium of 52 of the largest independent brokers across the U.S. Our partnership provides expansive local and regional market intelligence, cost information, and availability of additional physical presence if ever needed. R&R Insurance is an independent broker and is not affiliated with or owned by any insurance company, third party administrative agency or provider network.

Our business philosophy is simple – We are here to help! We are focused on you and your team. We want to make your life easier, provide value, do what we say we are going to do and make sure your employees understand their benefits so that they can maximize them.

In our industry, “**a benefit not understood is a benefit not appreciated.**” It is vital to our customer service model that our clients and employees understand their benefit package. We assist our clients and their employees with benefits questions and claim issues that arise throughout the year. We act as an extension of our client’s HR Department.

Lastly, our business philosophy is to give back to the communities we serve as well as our employees. R&R Insurance would not be as successful if it did not have true partnerships with the customers it serves as well as our employees that serve the customers. **Giving back is part of who we are.** It is the right thing to do.



**b) Describe the visibility and influence of your firm in the employee benefits field.**

R&R Insurance is very visible and influential in the employee benefits field.

This stems from both the volume of business we have with the carriers as well as our practice to **treat everyone with respect**. This includes carrier partners. Our level headed approach of treating carriers as a partner has benefited our clients immensely. Carriers recognize that while we work for you the client, R&R Insurance values them as well. Due to this mutual respect, we find carrier partners are more open during negotiations.

We represent the interests of Wellpoint Care Network in all on-going interactions and negotiations with carriers and vendors. Your dedicated R&R Insurance service team will be your advocate and will handle issues directly with the service provider. R&R Insurance will attend and lead scheduled vendor meetings and will make vendor performance an agenda topic in our meetings.

Vendor Management Services

- Execution of plan and vendor implementation.
- Claim issue resolution.
- Billing and eligibility issue resolution.
- Contract and amendment review and problem resolution.
- Ongoing vendor management – day-to-day interface and issues management.

Because of our approach with carriers, they will often reach out to us for input on new plans or programs they are considering or provide advanced analytical data on trends they are seeing in the marketplace.

In addition, R&R Insurance has earned the designation of being a **premier/high performance agency** with the various insurance carriers and TPAs in our marketplace. These designations, typically are representative of only the top 1% of agencies nationwide, and are awarded based on our proven performance client commitment. Premier agency status gives us access to a number of resources not available to non-premier brokers:

- Dedicated high-level claims support.
- Dedicated underwriting and renewal support.
- Enhanced claim experience reporting for large groups.

The image that follows illustrates of a few of our recognitions with various carriers.





In addition to those found above, we also have high-level relationships with multiple ancillary and Captive vendors.

**Medical Third-Party Administrators**

Security Health  
Allied  
Various Captives

**Ancillary Products**

Hartford  
UNUM  
Guardian  
MetLife  
Principal  
Symetra  
Cigna  
Reliance Standard

In addition, there are other ways we are visible in the benefits industry.

- We are a trusted source for conducting educational seminars on various benefit topics including sessions for SHRM accredited credits. The process to ensure our seminars are eligible for SHRM credits takes work, but as **The Knowledge Brokers** we are dedicated to excellence and providing value to clients and other employers. In 2022 we provided education on Pharmacy Cost Control measures, Mental Health & Wellbeing, Medicare, funding mechanisms and more. In addition to our webinars and seminars, the consulting team dedicated to Wellpoint Care Network has presented throughout the state, including SHRM conferences, etc.
- We are also leading the way with our much-acclaimed Wellbeing programs, created and customized by our own internal Wellbeing unit. Years ago, R&R Insurance recognized the wellbeing of employees as a key to not only controlling rising health care costs but also essential to the financial success of our partners. We made a significant investment in our Wellbeing unit to assist employers with developing effective and measurable Wellbeing programs.
- Our agency also invested in technology to create customized videos. As a leader, we take education for employees very seriously. For example, we've created a video for employees to understand how to navigate the complicated world of hospital pricing. Personalized, step-by-step education for employees to comprehend the process to check pricing in an effort to save money for themselves and their health plan overall. Additional videos on HSAs, HRAs, Medicare and benefit program functions all demonstrate our dedication to education.
- Furthermore, our Benefits Division leads the way in educating employers on self-funding programming and Direct Primary Care Contracts that have resulted in sustainable savings, without leaving employees "on the hook" for potential balance billing. It's all about clear communication, education, and strategic processes.
- We also fully support the participation in key industry groups as a Practice and at the individual level. This includes membership in the Independent Insurance Agents of Wisconsin (Wisconsin Big I), National Association of Benefits and Insurance Professionals (NABIP), National Association of Insurance and Financial Advisors (NAIFA), Wisconsin Manufacturers & Commerce (WMC), Waukesha County Business Alliance, and numerous others. Over the years we have maintained leadership and Board positions in several of these organizations.

- a) **Provide an overview of the account team that would be assigned to Wellpoint Care Network. For each member of the team, provide highlights outlining qualifications and experience.**

Wellpoint Care Network will have a robust team to partner with. At R&R, we will assign two consultants and client service manager to “quarterback” your account. These individuals are supported by a number of specialists who are available to work with Wellpoint Care Network’s administrative team and employees throughout the relationship. Patty Frett and Chris Kramer will be your primary partners.



**Chris Kramer | Employee Benefits Consultant**

**Qualifications:** Bachelor of Science, Economics & an International Marketing Certificate

**Experience:** Chris is approaching 30-years of experience in the group benefits industry. Chris guides employers through the benefits review process and provides effective strategies and input on best practices. He utilizes his Economics background to offer insightful analysis of benefit programs while exceling at making complex benefit topics understandable. He is also an expert with over 20 years of experience in tax-free accounts such as HSAs and FSAs.



**Patty Frett, CEBS, GBA, RPA | Employee Benefits Consultant**

**Qualifications:** Master of Business Administration | Bachelor of Business Administration

**Experience:** Patty has over 12-years of employee benefits experience coupled with 18 years of experience working with HR/Consulting firms such as Accenture and Hewitt Associates. Patty uniquely understands the challenges employers face with choosing the right insurance plan and appreciates the value that a knowledgeable broker brings to your organization. Patty’s knowledge and communication skills make her a key resource for presenting benefit options to employers and explaining implemented plans to employees.



**Ellen Dunn | Manager of Client Services**

**Qualifications:** Bachelor of Science, Business Administration

**Experience:** Having more than 25-years of experience, Ellen provides benefits evaluations, support, and services to existing clients. She assists clients and acts as a technical resource to identify existing client's needs and issues making recommendations for product and service solutions.



**Taylor Hahn, CHES | Strategic Wellbeing Consultant**

**Qualifications:** Master of Health Education | B.S. Health & Wellness

**Experience:** Taylor brings over 4-years of knowledge in the health and wellness industry and is dedicated to the resources that will determine the needs of your institution as well as defining the strategies and tactics to achieve the goals of your wellness program.





**Molly Flynn-Johns | Manager, Analytics & Data Strategy**

**Qualifications:** Bachelor of Arts, Communication

**Experience:** Molly has extensive experience on the insurance carrier side of the business with over two decades of experience working with complex clients in various industries. Molly also has years of expertise in analyzing claims as well as negotiating with insurance carriers.



**Liz Johnson, MBA | Medicare Specialist**

**Qualifications:** Master of Business Administration Healthcare | Bachelor of Science

**Experience:** Liz has over 16-years of experience in the health insurance industry. Liz helps Medicare eligible employees review and evaluate their options when it comes to enrolling in Medicare or remaining on the group plan. She helps individuals understand the "Alphabet Soup" that is Medicare and what timelines and penalties they need to be aware of.

There are other team members that will work with Wellpoint Care Network at certain points. Whether an associate from our **Marketing/Communication team** to our **Compliance department** to our Benefits Practice group, our client partners find that we can provide the right person at the right time for the right situation.

**b) Provide a summary of roles and distribution of responsibilities.**

Below is a summary of the main team that will work with Wellpoint Care Network. There are many others, at different points in time, that will also support your team and employees.

Patty and Chris' role as your Employee Benefits Consultants is to serve as the "quarterbacks" of the team, overseeing all aspects of your benefit plan. They will collaborate with Wellpoint Care Network to ensure that your program best serves the objectives of both Wellpoint Care Network while meeting the needs of your family members. Whether it be reviewing the contribution strategies of the medical plan and other lines of coverage or evaluating provider networks to ensure appropriate coverage for family members in all locations, Patty and Chris will research options and offer recommendations that will best meet your needs and optimize your overall spend. They will review the network, plan documents and overall costs as mentioned.

In addition, they would review the plans offered to ensure they meet the Workforce Objectives and Employee Benefit Goals outlined in the RFP. Patty and Chris' role includes communicating new programs, educating clients and family members and keeping clients ahead of the constantly changing insurance marketplace.

Ellen's role and that of other Client Service Managers that may assist is to support the functions of Patty and Chris. She will also work directly with Wellpoint Care Network on the day-to-day functionality of the benefit programs, act as a technical resource, coordinate responses to any client and/or employee's issues, partner with our Compliance team for guidance when needed and act as a liaison between Wellpoint Care Network and the carrier partners.

Taylor's role as a Strategic Wellbeing Consultant is to assist with maximizing current wellbeing initiatives and value-added benefits that are in place at Wellpoint Care Network. Her goal is to help make sure employees understand the importance of wellness and the resources available from your offerings such as your health plans and EAP. In addition, Taylor can provide guidance on helping further develop holistic Wellbeing plans and foster a culture of wellness at Wellpoint Care Network. She works with clients to identify opportunities for the greatest impact on behavioral change and population health improvement.

Molly's role is to work with Patty and Chris to sort, analyze and communicate the data from your benefit programs to help assure decisions are supported by facts. She and her team will use R&R Insurance's robust analytical tools to show the impact of plan design changes, premium modifications, as well as trends in claims data when available to help with decision making. Molly will help make the complex understandable.

Liz is part of the Medicare team at R&R Insurance. Her role is to assist employees and their families as they approach Medicare eligibility or those currently enrolled in Medicare. She is there to help employees understand the ABCs of Medicare and the various options. Should employees or their family members need assistance with Medicare, Liz can provide coverage solutions.



**c) Describe your approach to the ongoing training of your staff.**

We continue to make significant investments in our talent and training remains at the forefront of this. As **The Knowledge Brokers™** we recognize the need for our team to be experts in our industry and to stay current with the ever-changing benefits world for our client partners. We provide numerous educational sessions on a myriad of topics such as COBRA, Health Savings Accounts, Medicare, Impacts of Stress on Claims, stop-loss coverage, and many others. A driving force at R&R is our dedication to being an industry leader and educational resource to our customers.

As our environment becomes increasingly complex, we train and educate our staff members to be positive representatives of the insurance industry. This is a required commitment to be part of the knowledge broker team. We require licensing for each team member within our Practice, and along with it, the necessary continuing education credits to remain in full and complete compliance. This contributes to our having more licensed professionals than any other agency domiciled in the state of Wisconsin.

Our Employee Benefits division has developed customized training modules surrounding specific benefit topics such as the ones mentioned earlier. The training provides basic content knowledge followed by an interactive quiz. Passing the quiz allows the member to attend the hands-on training. During the training session, attendees apply what they have learned. Eleven modules are available with several filed and approved by the State of Wisconsin as accredited for state licensing continued education requirements. In addition, these training modules are used with clients that have a desire to learn more about any of these specific topics.

Our firm encourages employee development by covering the cost of courses that lead to specific insurance designations and then providing an incentive bonus to those that have achieved a designation. Our position as **The Knowledge Brokers™** is supported by the emphasis we place in continuing education and delivering the training in a manner, which yields applying what has been learned.

In addition, our Benefits practice holds **weekly ‘collaboration’ meetings**. These learning sessions allow team members to discuss topics that can benefit all and share experiences they had, and knowledge gained. As an example, one recent discussion focused on near-site clinics. Another discussed educating employees on being good consumers. Sharing experiences helps consultants learn from each other which in turn benefits our client partners.



**a) Describe at least two innovative strategic solutions you have implemented for clients similar to Wellpoint Care Network that highlight your benefits consulting expertise.**

R&R Insurance has always been at the forefront of offering clients innovative and leading-trend solutions. We are confident that with our expertise and communication, the solutions we implement will be successful.

One example of this is a recent wellbeing program and consumer driven health plan introduced to a school district in the southern part of the state. The District was facing a significant cost increase and did not have a wellbeing program. In addition, the District felt the ideas brought forth by the former broker were lacking. Our first step was to gather the facts on their current situation and solidify both short- and longer-term goals with the District. Leveraging the fact that employees were currently using a Health Reimbursement Arrangement (HRA), we implemented a new insurance plan design – an HDHP. We maintained a form of an HRA while introducing HSAs (which included a District contribution). In short, this made the premium costs more affordable. We also layered in a proprietary wellbeing program that was tied to future premium and HSA contributions. Was it successful? Yes, it was as measured by both the District's short- and longer-term goals. As important, there was significant staff buy in on the Wellbeing concept.

Their level of understanding that wellness is directly connected to helping control longer term healthcare costs began. So much so that a group of teachers formed a walking club before and after school. There is more to do but the foundation was laid. We learned that communication is the key. Employees are receptive to change when it is communicated properly and repetitively. When they know that you are truly trying to implement programs that have their best interests in mind, employees are more open to participating.

Another example of innovative programming our benefits team has implemented includes the use of direct contracting and direct primary care. Using both incentives and cost-sharing strategies, employees from a partner client were encouraged to utilize specific providers that guaranteed quality of care at significantly reduced prices.

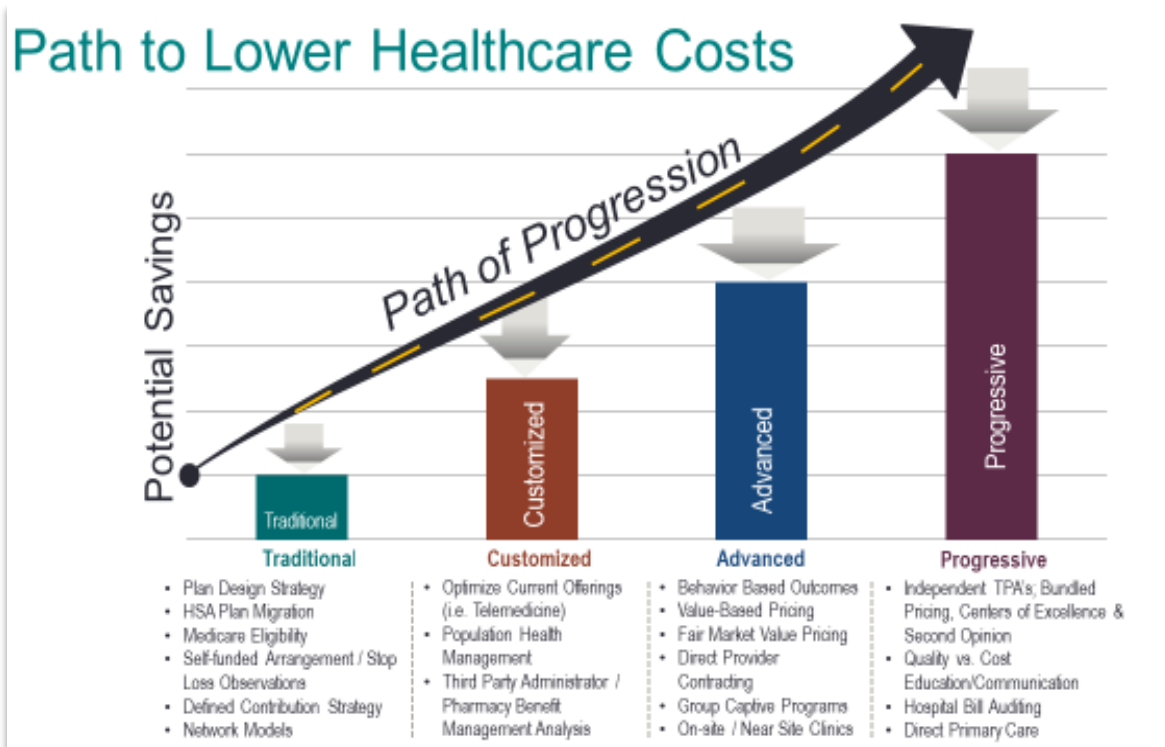
It was critical for the team to provide quality employee education to help employees feel comfortable with the options. As employees began to feel comfortable with the plan options, participation grew. In the end, the client saved tens of thousands of dollars in claims in the first year due to programming the benefits team put in place. Employees were also excited as the quality of care was high and their out-of-pocket costs were lower.



There are numerous strategies we have employed from plan design modifications to funding mechanism solutions to options like the following.

- **Bundled Pricing Arrangements/Direct Provider Contracting:** Transparency in pricing provides a great opportunity for savings and cost containment.
- **Prescription Drug Carve-out Arrangements:** Often times, it is cost advantageous to implement a PBM arrangement separate from the TPA that administers the medical claims. Carve out arrangements provide more competitive contractual terms.
- **Wellness Programs that include Behavior Based Outcomes:** Outcomes-based programs are a more aggressive approach to Wellness. Healthy employees are rewarded for being and staying healthy. Research shows that this model is effective at making people improve their health. It can also help accelerate a healthy cultural shift within the organization.
- **Group Captive Arrangements:** A group captive is an insurance company owned and operated by captive members, strictly for the benefit of those members. It enables middle-market employers to increase their underwriting credibility through the benefits of collective purchasing power.
- **Clinics:** Whether near-site or onsite, subscription based or fee for service, providing employees with clinic care options reduces claims accumulating against the group plan.
- **Tiered plan designs:** Providing incentives and/or premium differential helps to encourage effective providers for savings.
- **Premiums based on income:** Providing premium schedules based upon earnings at a client partner.

Regardless of which innovative method is used, our analytic tools demonstrate the potential savings as well as “risks” that accompany change. Our goal is to provide solutions and alternatives that fit Wellpoint Care Network’s mission and tolerance for risk and funding capabilities.



**b) Describe your internal mechanism for ensuring customer satisfaction with your services.**

R&R Insurance measures our quality of service in several ways; customer satisfaction, testimonials, referrals, and retention. It is this last point that provides the truest gauge of satisfaction. Our executive team monitors client retention throughout the year. Our 97% retention rate is high for a firm our size. In addition, the overwhelming majority of the 3% that left were due to mergers/acquisitions or by new management that has a previous relationship with another firm. In addition, our managers will randomly select clients for a service call to verify their satisfaction with R&R Insurance and the consulting team.

While we can tell you a lot about what we can do for your organization and your staff and their families, our best testament to this comes from the clients directly. Below is a sampling of unsolicited compliments we have received recently:

**Employees we assisted with benefit questions:**

- *"As I indicated, I am very impressed with your knowledge and ability to guide me in my decision making."*
- *"You're always extremely responsive and helpful. Lord knows I need all the help and guidance I can get!"*
- *"I REALLY appreciate all the help!! It's been a stressful time with all of this when it should really just be happy. I can't tell you how much I appreciate your assistance and the efforts you put in to help."*
- *"You are amazing!!! Thank you so much... again! I really appreciate all of your help. Thank you. Thank you. Thank you."*

**Employer Group HR Contacts commenting on the assistance of their Service Team Members:**

- *"You are the absolute BEST!!!! The epitome of amazing customer service. What a help you have been during all the changes this year. "*
- *"Our Client Service Manager is responsive, polite, and very thorough in his answers to my questions. He appears, to me, to be very patient – he might be screaming inside at my question 😊 – but he's always helpful, professional and is definitely a subject matter expert. I shared with him today that I appreciate having his expertise so readily available. You guys are the best!"*
- *"Thank you very much for this; it was extremely helpful to us. We continue to experience great things from your organization and just wanted to let you know that it is appreciated."*
- *"She is right on top of any question I ask. If she doesn't know the answer, she is always ready to "dig" into it and get me the correct answer, and in a timely manner. Her professionalism, organization, and her willingness to help in all areas have been extremely top-notch! She is truly an asset to your organization! My experience with R&R so far has been exemplary!! I look forward to a long-lasting working relationship!"*

- c) **Provide contact names and phone numbers of at least two (2) client references that are currently receiving your services.**

**United Community Center**

Lukischa Ramos | Chief Operating Officer

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*\*Please contact Sheilla Morales if you would like to schedule time with Lukischa to discuss the reference. Her information is below.*

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## a) Provide an overview of your approach to strategic planning.

We take the Strategic Benefits Planning Process very seriously. To facilitate this, we will use a combination of well-designed strategic business plans and regularly scheduled stewardship meetings with our clients.

If selected to partner with Wellpoint Care Network, R&R Insurance will utilize our proprietary Onboarding Process to transition your account. We use the '**Reading, Writing and Arithmetic**' approach. It sets the stage of our relationship, strategic planning, and service plan development.

After submitting Agent of Record transfer letters to the carriers, the **Reading** begins. We will gain access to all the plan documents, benefit summaries, stop-loss contracts, plan reports, etc. for our benefits team to review and begin building a clear understanding of your current benefits and goals.

The next phase is the **Writing** phase. We will hold an onboarding session with your team members involved with benefits. During this session we will take notes on your goals with benefits, gather feedback on what is working well/needs improvement and future objectives. This Writing phase also helps ensure all plan information is documented and we understand how you view your program as part of your overall total compensation approach. In addition, we will discuss the aspects of a S.W.O.T assessment. We examine what you see as your strengths, weaknesses, opportunities and threats as these will play a critical role in the plan we develop together.

From here, the **Arithmetic** phase begins. We begin benchmarking and plan analysis working with our Analytics team. They help us map out a viable benefit strategy that is supported by objective measures. Whenever possible we use data to help guide the decision-making process.

The transition process we use is all-inclusive and will provide an in-depth look at the full benefit program offered. We have found that over time, portions of benefit programs are forgotten or have become unclear and investing time upfront, with deliberate onboarding, cleans the slate for all involved. This will ensure that your employee benefits program is coordinated with your long-term objectives. We work together to create a Service Plan that lays out your goals. The Service Plan is the backbone of our consistent delivery and communication. As your partner, we will establish specific goals, both short-term and long-term, develop methods for implementing these strategies, measure the goals and adjust them as needed.



Our focus is on the relationship, needs, and complexity of each client and we provide resources designed to exceed your needs and expectations. We pride ourselves in our capability to sit down with a client to understand their business challenges and how those challenges affect their overall ability to attract and retain talent. We review and evaluate what the benefits program contributes to the overall offerings of the organization – **tying back to your objectives:**

- Offering benefits that are affordable and sustainable
- Offering equitable benefits across employee demographics
- Increasing employee understanding of benefits and maximizing their value
- Incorporating Wellbeing to improve health outcomes
- Exploring voluntary, customizable plan options
- Exploring salary-based contribution modeling

Our proven success with client meetings comes first by acknowledging that no one likes to have a meeting to just have a meeting. It is our belief that meetings must add value, be relevant, and be concise. To accomplish this, we have set interactions with our clients allowing items to stay top of mind, so all involved parties remain aware of active and upcoming projects as they develop.

We've developed a process for scheduled meetings to bring up new topics or product suggestions and provide a high-level overview to discuss and determine if it makes sense to advance the conversation further with a deeper dive on the topic.

1. Outstanding project status, next steps, and ownership
2. Company updates (from both sides, as relevant)
3. Review any recent items and feedback for you/your team
4. Review relevant Legislative Updates
5. Align on upcoming meetings, projects or goals
6. Agree on key milestones to accomplish prior to next meeting

While our focus never deviates from the strategic, multi-year planning, our coordinated meetings will focus on shorter term objectives which lead to longer term strategies being achieved.

**b) Provide an overview of your account support and administration services, including enrollment coordination and ongoing support for Wellpoint Care Network employees.**

The R&R Insurance motto is **"We are here to help"**. This includes open enrolment as well as ongoing throughout the year. We collaborate to develop a member communication strategy that will best meet the needs of your family members. Ongoing support will come not only through email or phone contact but with video education and regularly scheduled meetings during the plan year. From a member-centric support perspective, we make available to you an "Insurance Concierge Team" sheet that provides R&R contact information for the family members and their enrolled dependents to reach out should they have a benefits question or concern.

Direct access to R&R throughout the year and not just at Open Enrollment is the goal of providing the 'Concierge' document. If a family member has a claim problem they cannot resolve, we work on their behalf to reach a resolution. We work directly with the member which is important so that the Human Resource Department can be involved as little or as much as they would want.



### Wellpoint Care Network

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



the knowledge brokers™



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### Your Concierge Team



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**Open Enrollment Coordination:** The creation of the Open Enrollment meeting content is truly a collaborative effort. We discuss with our clients the items they want us to highlight, the amount of time we may have, and what scheduling works best to get the most participation. We do recommend with the investment that is made in benefits that it is a good idea to conduct meetings annually even if not a lot may be changing on the plans. This is an excellent opportunity to remind employees about how best to use their plans and educate them on new programs or changes to existing programs.

The focus of our **Open Enrollment meetings** is on education. These can be **in-person, virtual, pre-recorded** or a combination of the above. We recognize that we need to provide examples that people can relate to when it comes to making benefit decisions. It is not uncommon for us to use our own personal claim examples to showcase exactly how a plan works. When more than one health plan is offered, it is important to highlight what something would cost if I chose one plan versus the other. We provide tools to help employees determine what is right for them

Our staff will stay after enrollment meetings to give the opportunity for employees to ask additional questions as needed. The goal is for employees to understand the benefits and the value of those benefits. We provide the employees with an “Insurance Contacts Concierge” sheet that provides R&R contact information for the employee and their enrolled dependents to reach out to, should they have a benefits question or concern. Direct access to R&R throughout the year and not just at Open Enrollment is the goal of providing the ‘Concierge’ document.

If in the future you decide to offer more than one medical plan, our newest partnership with ALEX® could prove very beneficial. ALEX® is a program, developed by video gamers, that engages members in a personalized, real-time virtual conversation about their benefit usage and helps members decide which plan is the best fit for them and their family. Through the members’ responses, they are guided to the best option based on their specific needs.

The goal of the Open Enrollment meetings again is to educate the employees on the value of the benefits offered and provide them with the tools to be the best consumer of health care and enable them to make informed benefit decisions. We distribute at the Open Enrollment meetings a **personalized Benefit & Enrollment Guide**. We embed into this document **custom videos** that help further explain programs that the member may want to learn more about.

The video also is helpful for them to share the information they learned in the meeting with their spouse/ dependents on the plan. If you are interested, R&R will help construct an annual employee survey to receive feedback from the employees regarding perceptions of their current benefit offerings.

**Ongoing Support for Wellpoint Care Network Employees:** Our consultative approach allows us to support the short and long-term goals of our partners.

To begin, our approach starts with optimizing current offerings in place. Too often we find that employers and employees are not made aware of the resources already embedded in their current programs. You are spending a lot of money on benefits. Part of R&R Insurance’s role is to assure you and your employees get the most out of them.

As an example, one new client told us they had several employees come to them with various stresses (financial, legal, mental health). We reviewed their benefit program as part of the onboarding process and discovered they had a very low utilization rate for their Employee Assistance Program. We reached out to the EAP representative to learn more about the services. We arranged an onsite EAP presentation for the department manager heads (as the client said employees often turned to them with issues first) to review the many ways people could use the EAP. Our team provided the managers with information on the EAP to distribute along with a short video that all new hires could watch on the EAP resources. The department managers told Human Resources how many employees thanked them for the resource and felt the employer cared. It did not cost anything additional other than time, highlighting a benefit already being paid for by the client. We also support the programs with open enrollment meetings (onsite, virtual, recorded), ongoing sessions, a customized Benefit and Enrollment Guide with QR code, videos, assistance with benefit and/or wellness committees, and a dedicated Concierge team to help employees and HR with questions.

In addition, we strive to enhance the benefits being offered by educating employees on the value-added services providers offer such as health reward type programs. We also support them by having focused training sessions on areas that employees indicate they need assistance. One example is a school district customer implemented a Health Reimbursement Arrangement (HRA) and a wellbeing program. Both were communicated at open enrollment along with other benefits. As these two benefits were new, we suggested coming back to hold a focused learning session on just these two benefits. It was a huge success as numerous employees said it was good to hear the new programs again. The session was recorded as well.

We also support the programs by making proactive communications such as how to file a claim from an Accident plan when you have your routine physical, made a video on how to use the hospital pricing tools to save money, preparing an information sheet on prescription drug cost savings companies, a quick overview of the importance, health wise, of teeth cleaning and more.

## HSA/HRA/WELLNESS PROCESS

VOLUNTARY LEARNING SESSION

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

The following will 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



### R&R Insurance Webinar: Ergonomics and Wellbeing - Working Smarter Not Harder

R&R Insurance Services, Inc.

## WEBINAR PROGRAM

**TAYLOR HAHN, CHES**  
Strategic Wellbeing Consultant

**28th MARCH 11AM - 12PM** **REGISTER HERE**

**LORI WILKOM, MPT**  
Health & Safety Consultant

## ERGONOMICS & WELLBEING

WORK SMARTER NOT HARDER

**SRM RE-CERTIFICATION PROVIDER**

### 34 Mental Health

- STATEWIDE Content & Courses**
- ✓ Well Badger Resource Center
  - ✓ Resilient Wisconsin
  - ✓ Access
  - ✓ Wisconsin's Family Caregiver Support Programs
  - ✓ 211 Wisconsin
  - ✓ Wisconsin Help for Homeowners
  - ✓ UWI Extension
  - ✓ Coping with Stress - CDC
  - ✓ Lifesaver Wellbeing Series

#### RESOURCES TO CONTACT

- ✓ National Mental Health Hotline  
Press & conferencing  
800.825.5273 or text NAMI to 741741
- ✓ Local WI NAMI Chapter  
608.288.9330  
www.namimadison.org
- ✓ Mental Health-Related Distress  
Call or Text: 888  
Chat 888Helpline.org
- ✓ National Suicide Prevention  
Hours: Available 24hrs.  
Languages: English/Spanish  
800.273.8255
- ✓ Prevent Suicide Wisconsin
- ✓ Wisconsin 211  
(Free Helpline)  
Dial 211 from any phone
- ✓ HOPELINE  
Text HOPELINE to 741741
- ✓ Aging & Disability Resource Center

## 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.






**c) Describe your capabilities in ongoing plan performance monitoring, plan performance forecasting, claims experience analysis, benchmarking, and reporting.**

R&R has a suite of analytical tools and resources available to help Wellpoint Care Network manage its benefits program costs and services. These tools coupled with our talented analytical team will provide Wellpoint Care Network with a rigorous review of your programs.

We have been able to successfully implement and effectively administer comprehensive plan designs and funding mechanisms that have resulted in significant cost savings for our clients. To accomplish this, we collaborate strategically with clients to ensure fiscal responsibility as well as work with carriers to review plan utilization and monitor claims. Our analytics allow us to evaluate plan design impacts and alternate design solutions. Additionally, our benchmarking tool allows us to examine and measure how Wellpoint Care Network measures up to other groups' benefit offerings. This provides Wellpoint Care Network with the ability to offer competitive employee benefit programming that will aid recruitment and retention.

Our consultative approach allows us to design benefit plans and select insurance partners that meet the short and long-term goals of the clients we partner with. By utilizing our analytic tools, we can show, in real time, the potential impacts plan design changes can have on cost. We believe that claims data is a key source of insight for care patterns, cost drivers and strategic direction that will be most beneficial to Wellpoint Care Network's overall costs of benefits.

**Monthly / Quarterly Carrier Claims Reporting:**

- All major carriers provide online access to various levels of claims data; R&R has access to information made available by the carrier via our Premier Agency Status
- R&R employs full-time Financial Analysts within the Professional Services Team who have spent many years working for a medical carrier reviewing and analyzing medical claims data
- Review annual costs to assist in developing a renewal strategy
- Provide recommendations to accommodate ever-changing claims utilization and costs
- Use software solutions to review plan design and claims utilization to ensure the design is effective and efficient

**Applied Benefits Designer™:**

- Interactively evaluate health insurance plan design options in minutes
- Guide you through complex and tough decisions due to rising costs, tighter budgets and consumer-driven healthcare—all in real time
- Dynamically and interactively fine-tune plans to meet your goals
- Gain consensus on plan design sooner by answering questions on the spot

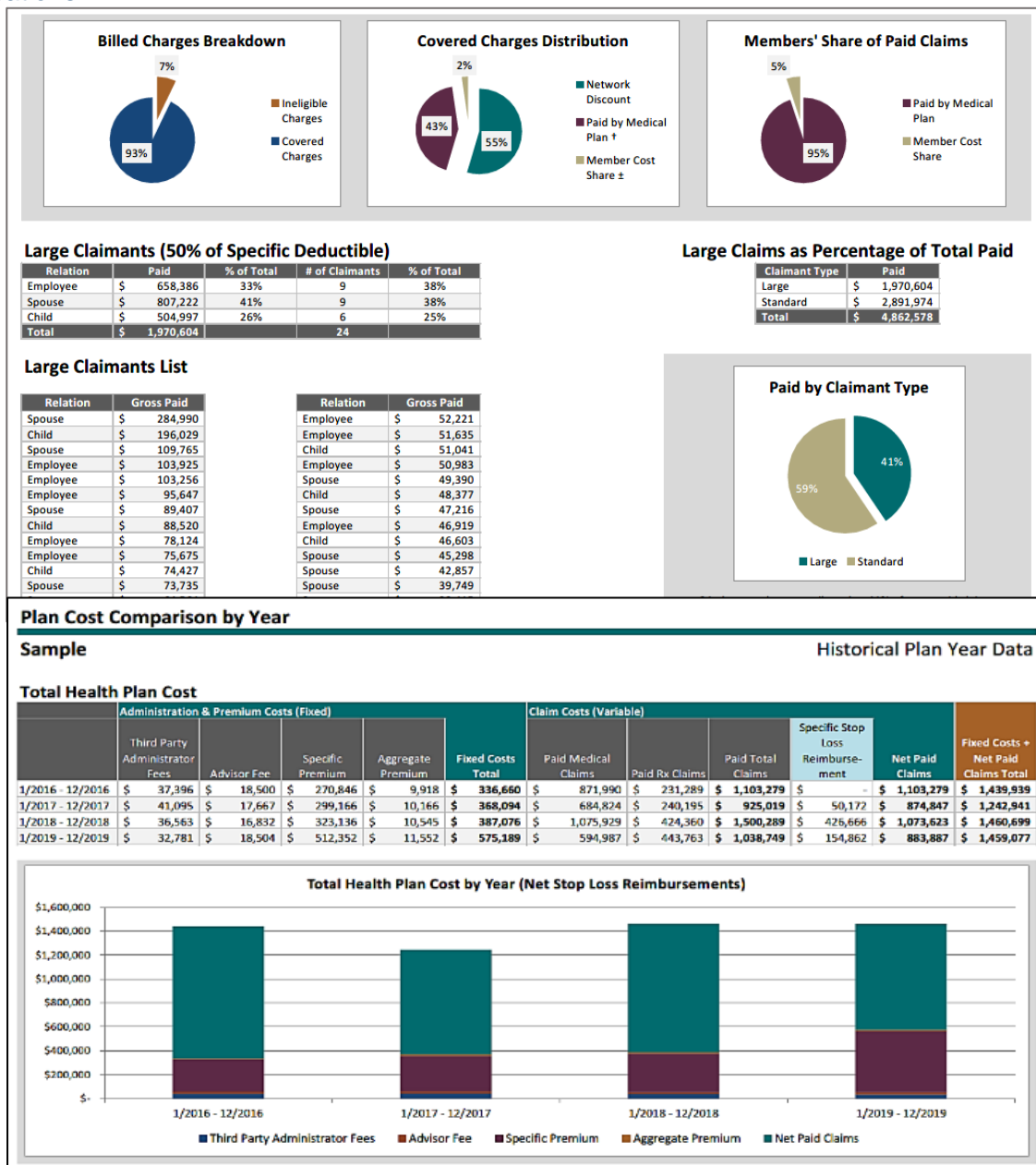
**Claros™ Analytics:**

- Analyze multiple factors directly impacting medical benefits
- Analyze the decision between Self-Funded and Fully Insured plan costs
- Run/test multiple stop loss scenarios to find the optimal outcome based on risk tolerances
- Provide guidelines to future costs based on projected plan changes

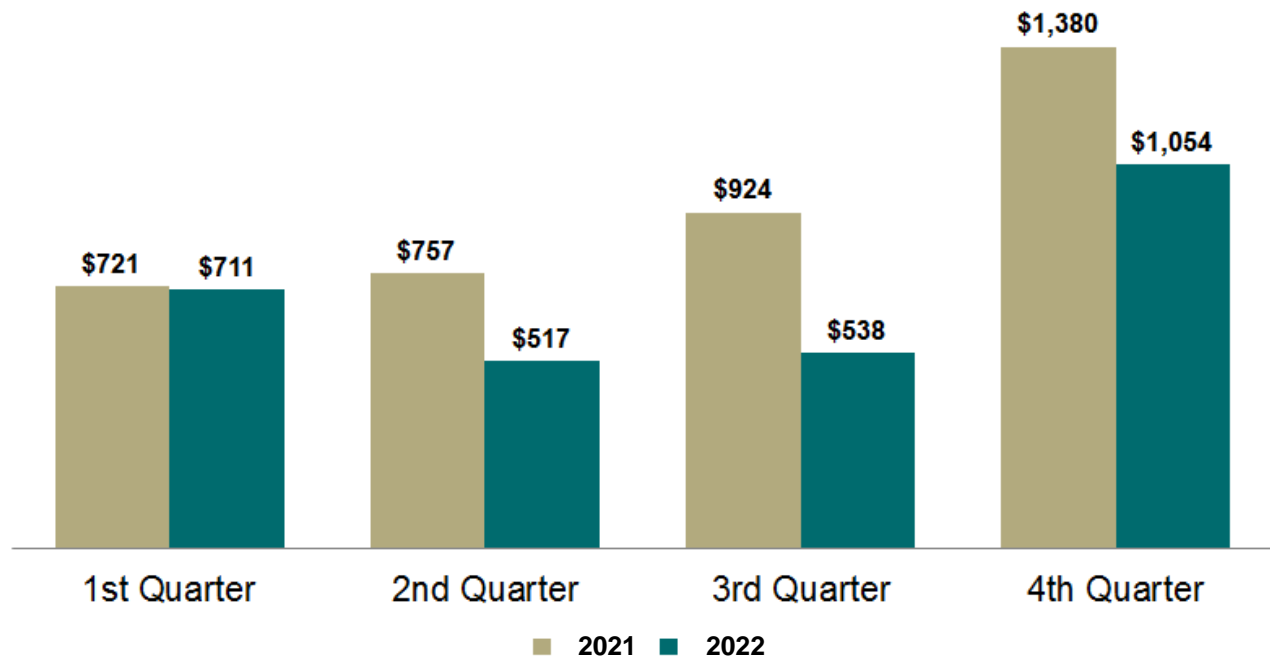
## Decision Master® Warehouse (DMW):

- Eliminates potential problems, determines the underlying causes, and develops effective solutions
- Offers over 70 management exhibits that are easy-to-use and understand to detect problems with your medical utilization or plan cost by comparing your costs to national norms of similar employers
- Analyzes critical components of your data in multiple ways

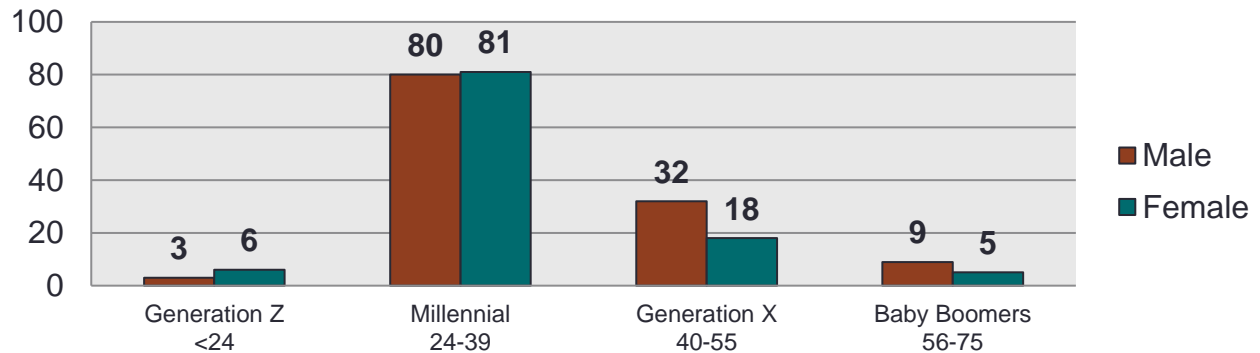
To provide a snapshot of our analytic capabilities, the graphics below show a variety of reports and assessments our team can provide. We have the systems in place to breakdown spending and prescription utilization and use this information to educate staff and to consider plan modifications.



## Quarterly Claims Breakdown - \$ PEPM



## 2022 Eligible Employees – 234 Total



R&R has multiple resources that enable us to furnish our clients with the most accurate and timely **Benchmarking data**. With our data we will drill to National, Region, State, Industry as well as group size. Our resources are as follows:

- R&R Insurance Services block of business
- “Companies Like Me”. Using Companies Like Me we have access to over 650 organizations, 192,757 covered members and 702 benefit plans. These statistics are for the Manufacturing industry alone.

In addition, R&R also utilizes MRA and The Kaiser Foundation benchmarking data. These tools allow us to examine and measure how your benefits measure up to other organization’s benefit offerings. This provides Wellpoint Care Network with the ability to offer competitive employee benefit programming that will aid recruitment and retention.

**d) Describe your capabilities in employee communications.**

We recognize that employee communication is an ongoing commitment and not something that starts and ends with open enrollment. R&R Insurance uses its **internal Communication and Marketing team** to help with this. We work collaboratively with our clients to determine their needs as it relates to benefit communication throughout the year. This is done by simplifying written and verbal communication and providing video content to clearly explain the intended messages and serve as an extension of your benefits department. We will deliver on this commitment through the following approaches of promoting, educating, and advocating:

- Conduct employee educational meetings to increase consumer awareness in their healthcare choices as well as assist with enrollment meetings.
- Assist, create and coordinate employee communications further to educate staff & faculty in understanding the full value and benefits of the plans offered.
- Proactively provide ongoing information on benefit trends and changes in the industry and promote consumerism with better education and resources for employees.
- Provide direct service staff to assist employees/dependents of Wellpoint Care Network in resolving claims/eligibility issues as well as answering general benefits questions.

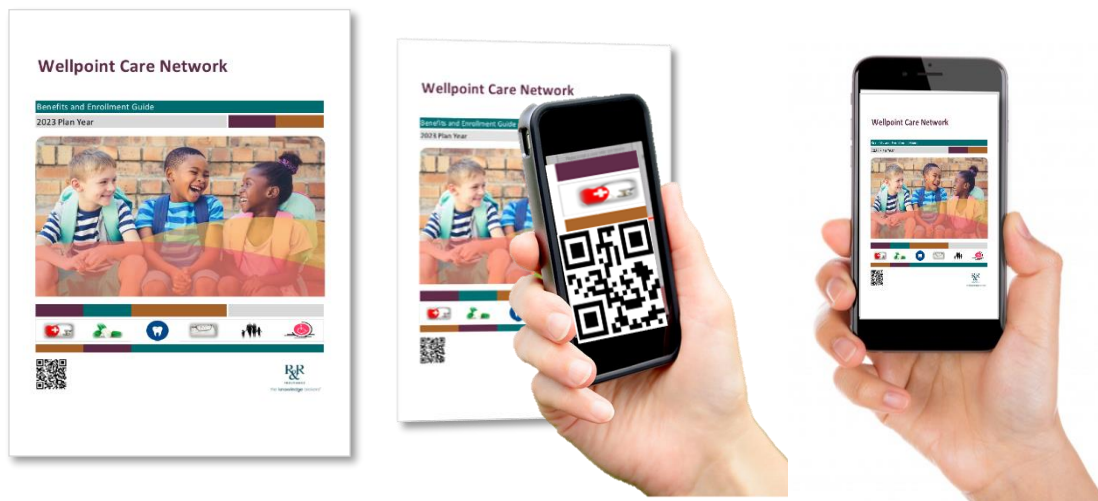
Also knowing how important it is to attract talent, our Employee Benefits Marketing Coordinator can work with you to develop a one page "**recruiting benefits summary**." The purpose of this document is to highlight the benefits that are offered in addition to the culture of your organization. It serves as an excellent document to email a candidate prior to a phone interview.



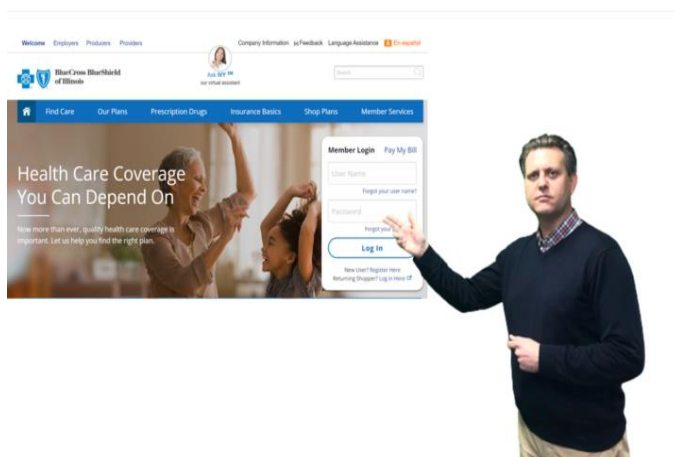
A nice way of marketing all that you have to offer to generate and create excitement about your organization while promoting the value you place on the benefits offered.

Our service platform is based on personalized, hands-on support and consultation utilizing an in-house resource team. Core Wellpoint Care Network communication and collaboration avenues are list below:

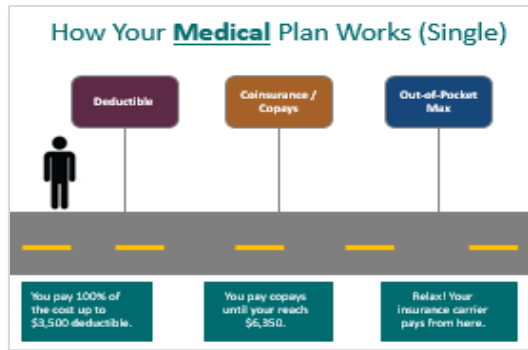
- **Benefit & Enrollment Guide / QR Codes:** we develop a personalized guide and incorporate video elements to assist with educating employees. Mobile accessible via QR code makes our communications more accessible to employees and their families. Below is a snapshot of our communication Guide.



- **Video Capabilities:** we record communication messages on a host of topics to enable clients to share information to employees via the web. This capability allows a greater reach, especially for clients with multiple locations, varying hours, etc. The video content also allows us to reach enrolled spouses and covered dependents.



- **Presentation Style:** an attribute is our keen awareness to the style and delivery of benefits communication. With understanding that adults tend to be more visual with their learning, we cater our content to be more simplified to process, yet convey a strong message.



Face-to-Face  
Employee Meetings



Embedded Video Education

- **Mid-year Employee Learning Sessions:** Employee benefits can be tough to understand at times. At Open Enrollment employees have a lot of information to sort through. Not all of it will be retained. We have found it helpful, based on employee feedback to have targeted Learning Sessions on specific topics. They range from valued added services the health plan offers, to HSAs-101 sessions to How to create online accounts. Below is a sample Learning Session.

**HSA/HRA/Wellness Process**

VOLUNTARY LEARNING SESSION

✓ MAY 31ST ⌚ 3:45 PM JOIN US


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
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  - How HRAs work and integrate with the HSA
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- Awareness to Wellness**
  - How it works and impacts the employee share of premiums for the 7/1/23-6/30/24 period

CHRIS KRAMER  
MANAGEMENT SERVICES, INC.

- **E-Communications / E-Newsletters:** monthly electronic newsletters are emailed to clients providing trending topics; R&R Insurance also has a presence on most major social media platforms (LinkedIn, Facebook, Twitter, YouTube, and a Blog). Learn more at [www.myknowledgebroker.com](http://www.myknowledgebroker.com).
- **Seminars/Webinars:** free to attend, monthly webinars address the latest trends in Employee Benefits; in-person seminars provide interactive training in Medicare, HSA/HRA, Prescription Drugs, etc.
- **R&R Insurance/Zywave Client Portal:** web-based client portal which allows you to receive information from our agency online and you're able to participate in Employee Benefits surveys to find out how you compare to others from around the country.

## R&R / Zywave Client Portal



- Find What you are looking for - FAST
- Access Workplace Policies & Forms
- ACA Reporting – Generate Forms 1094/1095
- Multistate Law Comparison Tool
- HR Self-Assessment Tool
- Salary Benchmarking Tool
- Sample Job Descriptions
- Total Compensation Statements

R&R Insurance specializes in employee communication services. We see our primary audiences as:

- Wellpoint Care Network employees, their families, and leadership/administrative staff.

**e) Describe your consulting and educational services in the area of legal compliance.**

R&R Insurance made a business decision early in the process to establish an in-house expert and resources to be available to our partners as Healthcare Reform moved from concept to reality.

Within our Practice, Pete Frittitta, Manager of Client Strategic Services, is responsible for consultations on health and welfare compliance. Pete is a past President of Wisconsin's state chapter of the National Association of Benefits and Insurance Professionals (NABIP) and is an active member on the speaking circuit as a healthcare reform expert. He taught "*Employee Benefit System*" at both the Graduate and Undergraduate levels as an Adjunct Faculty Instructor at Marquette University.

His team's guidance has been phenomenal. For example, Pete helped one of our clients that was facing a **\$560k IRS penalty for ACA filings (before they worked with us)**. With his expertise, Pete identified the errors, assisted with the refiling and the **penalty was reduced to \$11,000**.

In addition, we help ensure our client partners stay compliant via a number of resources including but not limited to:

- Zywave compliance attorneys (Legislative Briefs, Compliance Alerts & Webinars, Compliance Checklists, etc.)
- Association newsletters & updates
- BenefitPoint Compliance Library™ powered by HR360©
- HR & Benefits Library™ powered by KPA & Ford Harrison
- Assurex Global™/Benefit Comply Compliance Resource Library
- Active memberships in NAIFA (National Association of Insurance and Financial Advisors) NABIP (National Association of Benefits and Insurance Professionals), and the IFEBP (International Foundation of Employee Benefit Plans)
- Various trade subscriptions



## Sample Compliance Communications

**Complimentary**

**WEBINAR**

**REGULATORY UPDATE**

**MARCH 23, 2023**

There will be a lot of regulatory ground to review by the end of the first quarter, including transparency requirements and the impact of the recent fix to the so-called "Family Glitch." Join us for this webinar as we cover these and other important regulatory news that impacts employee benefits.

Click the "Register Now" button to reserve your seat now!

the knowledge brokers™

Click here to unsubscribe or to change your Subscription Preferences.  
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N14 W23900 Stone Ridge Drive, Waukesha, WI 53188 | 262.574.7000



**REGISTER NOW**

INDICATE "R&R INSURANCE" AS THE THAT INVITED YOU!

THURSDAY, MARCH 23, 2023  
2:00PM - 3:00PM (CST)

\*If you have any questions after attending the webinar, please contact your Employer Benefits Consultant or Account Manager.

myknowledgebrokers.com

**How the End of the COVID-19 Public Emergency Period Will Impact Your Health Plan**

The Biden Administration has announced its plan to end the COVID-19 national emergency and public health emergency (PHE) on May 11, 2023. At that time, certain health plan coverage rules related to the COVID-19 pandemic will no longer apply.

Various deadlines related to employer-sponsored group health plans are extended during the COVID-19 "outbreak period." The outbreak period began in March 2020, and it will continue until 60 days after the end of the COVID-19 national emergency. Under this timeline of the COVID-19 national emergency ending on May 11, 2023, the "outbreak period" will end on July 10, 2023.

During the outbreak period, some key deadlines for employee benefit plans and participants are extended. The following deadlines, below, were extended during the outbreak period:

- **HIPAA Special Enrollment** - The 30-day period (or 60-day period, if applicable) to request special enrollment.
- **COBRA Notice and Premium Payment Deadlines** - The 60-day period to elect COBRA coverage, the date for making COBRA premium payments (generally at least 45 days after the day of the initial COBRA election, with a grace period of at least 30 days for subsequent premium payments), and the date for individuals to notify the plan of a qualifying event or disability determination (generally 60 days from the date of the event, loss of coverage or disability determination).
- **Claims and Appeals Deadlines** - The deadlines to file a benefit claim, file an appeal of an adverse benefit determination or request an external review of a claim under the plan's claims and appeals procedures.

Under the relief, the extensions that applied to the above deadlines end when the outbreak period is over or, earlier, if after an individual has been eligible for a specific deadline extension for one year.

**Available Resources**

Washington Department of Health Services COVID-19 PHE Unwinding Manual Communication Timeline

DOL FAQ Includes HIPAA Special Enrollment Opportunities

UPDATED: Presidential Duty Date Collection/RODQ/Rescission Guide

WEBINAR: Trends & Presidential Duties 3/14

WEBINAR: Economics & Wellbeing

The Ins and Outs of Preventive Care



Pre-Deductible Telehealth Coverage



Medicaid Redetermination and HIPAA Special Enrollment Requests

**LEGAL UPDATE**

**R&R INSURANCE**

**ACA Pay or Play Penalties Will Increase for 2024**

On March 8, 2023, the IRS issued updated penalty amounts for 2024 related to the employer shared responsibility (pay or play) rules under the Affordable Care Act (ACA). For calendar year 2024, the adjusted \$3,600 penalty amount is \$3,670 and the adjusted \$3,000 penalty amount is \$3,060.

**Pay or Play Penalty Calculations**

Under the pay or play rules, an applicable large employer (ALE) is only liable for a penalty if at least one full-time employee receives a subsidy for Exchange coverage. Employers who are not affordable, minimum value (MV) coverage are generally not eligible for these Exchange subsidies.

Depending on the circumstances, one of two penalties may apply under the pay or play rules—the **49805(a) penalty** or the **49805(b) penalty**.

**IMPORTANT DATES**

Aug. 15, 2023  
The IRS released updated pay or play penalty amounts for 2023.

March 9, 2023  
The IRS released updated pay or play penalty amounts for 2024.

2024 Calendar Year  
The 2024 penalty amounts apply for failures to offer affordable, minimum value coverage during the 2024 calendar year.

**ACA Pay or Play Penalty Resources**

The IRS provides a variety of resources on the pay or play provisions, which provide more information on calculating the penalty. Employers can use the following key IRS resources for more details.

- Under Section 49805(a), an ALE that offers coverage to substantially all full-time employees (and dependents) may still be subject to a penalty if at least one full-time employee obtains a subsidy through an Exchange because the ALE did not offer coverage to all full-time employees, or the ALE's coverage is unaffordable or does not provide MV. The resulting penalty assessed on an ALE for each full-time employee who receives a subsidy is 50% of \$3,600 (or adjusted for any applicable month fraction). However, the total penalty for an ALE is limited to the 49805(a) penalty amount.
- Under Section 49805(b), an ALE that offers coverage to substantially all full-time employees (and dependents) may still be subject to a penalty if at least one full-time employee obtains a subsidy through an Exchange because the ALE did not offer coverage to all full-time employees, or the ALE's coverage is unaffordable or does not provide MV. The resulting penalty assessed on an ALE for each full-time employee who receives a subsidy is 50% of \$3,000 (or adjusted for any applicable month fraction). However, the total penalty for an ALE is limited to the 49805(b) penalty amount.

**COMPLIANCE OVERVIEW**

**Annual Compliance Deadlines for Health Plans**

Employers that provide group health plan coverage to their employees are subject to numerous compliance requirements throughout the year, such as requirements for reporting, participant disclosure and certain fee payments. For example, employers with group health plans may be required to:

- File a Form 5500 by the last day of the seventh month following the end of the plan year (or request a filing extension).
- Provide Medicare Part D enrollment coverage disclosures to plan participants by Oct. 15 of each year; and
- Pay Patient-Centered Outcomes Research Institute (PCORI) fees by July 31 of each year.

This Compliance Overview contains a high-level summary of the various compliance requirements and associated deadlines that health plan sponsors should be aware of throughout the year. It also summarizes annual notice requirements for group health plans. Please note that certain deadlines for non-calendar year plans may vary from what is outlined below.

**CALENDAR YEAR DEADLINES**

This chart only addresses recurring calendar year compliance deadlines. The chart does not include other requirements that are not based on the calendar year. For example, a plan administrator must provide a COBRA election notice to a qualified beneficiary after a qualifying event occurs. This type of notice requirement is not addressed in the chart below. Also, state laws may impose additional obligations. Users of this chart should refer to the specific federal or state law at issue for complete information.

**Annual Deadlines**

- Employers that sponsor group health plans are subject to numerous compliance requirements throughout the year.
- Not all of these compliance requirements will apply to every employer.
- For example, only employers with self-insured health plans are required to pay PCORI fees.

**Action Steps**

- Health plan sponsors should work with their advisors to determine which recurring deadlines apply to them.
- In addition to the compliance requirements described in this chart, it's important for plan sponsors to monitor legislative and regulatory developments.

R&R Insurance also has retained the services of von Briesen & Roper, S.C. for the expertise they provide in Employee Benefits/HR compliance and Labor Law issues. von Briesen & Roper provides experience advising clients on a wide range of employee benefits, labor, and employment law issues. This experience enables R&R Insurance to advise clients on human resources (HR) law issues taking into consideration all areas of opportunity and vulnerability, including the litigation of HR law-based claims. They have extensive experience in advising employers in Employee Benefit plan design, issues associated with ill and injured workers, labor negotiations, and multi-employer health and welfare plan and pension plan vulnerability, ERISA compliance, and fiduciary matters.

**von Briesen**

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

**f) Describe your use of technology to support online employee services and education.**

R&R Insurance uses technology to enhance the employee experience as discussed in the communication section of this RFP. In addition, we offer an easy-to-use benefit enrollment platform that employees can access throughout the year on their computer, mobile phone or tablet.

R&R Insurance is an authorized licensor of Employee Navigator, which we have found to be an excellent fit for many of our clients. The Employee Navigator platform centralizes your HR records online and syncs your employee data across multiple systems, including benefits administration, payroll, and time-off tracking. There is a cost for Employee Navigator (\$1,250 initial set up by our Analytic Team and \$500 each year after for renewal and reconfiguration of plans as they change). Employee Navigator is mobile friendly, available in Spanish, and very easy to use.

We train employees on how to utilize the platform and access their benefit data throughout the year. The system also has numerous file feeds to the various provider partners.



We also have Internet-based employee communication tools and have invested in an interactive software program called ALEX® to help employees make smarter choices about important life events, from selecting a health insurance plan and saving for retirement to managing finances or a leave of absence. By walking employees through complicated decisions, ALEX's interactive SaaS employee communication software also saves HR leaders time, money, and headaches.

Customers of ALEX hail from a wide range of industries and include companies with as few as 100 and as many as 1,000,000 eligible employees—including 114 of the Fortune 500 and 2 in 5 of the country's largest companies.

ALEX is available online and to employees of multiple locations, which allows employees to have personalized benefit conversations at their own convenience.



**Benefit & Enrollment Guide / QR Codes** we develop a personalized guide and incorporate video elements to assist with educating employees. Mobile accessible via QR code makes our communications more accessible to employees and their families. Below is a snapshot of our communication Guide. R&R Insurance prides itself on our commitment to investing in technology and systems designed to improve client delivery and the end user service experience. Our ownership structure as a family-owned company allows us to take a long-term view of our investments. This enables us to capitalize technology that can be measured by the value it brings externally to our customers and internally to our team members. In this vein we are committed to continuous improvement in our technology space.

R&R Insurance Services' clients utilize *InsurLink™*, a web-based application giving you secure, digital access and control over your insurance needs. *InsurLink™* allows R&R Insurance Services and its clients to securely share files, uploading and downloading documents quickly and safely at any time with round-the-clock 24/7 access.

One key challenge is **Recruiting & Retaining Top Talent**: In recent years, the labor market has contracted as the job market has widened. As a result, employers in search of the most qualified workers are facing greater competition and less loyalty from employees than compared to the past. In addition, many companies are struggling to retain employees once they are hired and not lose them to other companies after only a year or two.

To combat turnover, R&R Insurance is directly working with employers to provide creative resources to aid with attracting and keeping employees engaged. We utilize a tool to help find innovative benefits to offer employees:

- **Benefits Pitch** – Resource from Assurex that provides a library of unique benefits from around the country for employers to consider offering.

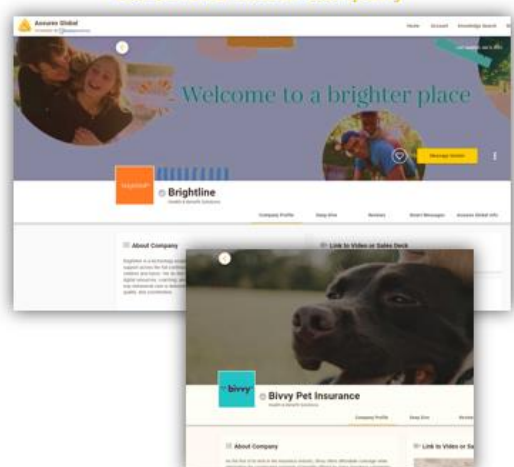


**Provides:**

- 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**



**g) Describe any additional service options that may be of interest to Wellpoint Care Network.**

**Wellbeing Team:** R&R provides clients with up-to-date wellness communications/services including benchmarking and surveys, vendor management, biometrics scheduling, and reporting. Our dedicated Strategic Wellbeing Consultant, Taylor Hahn, is available to assist with the creation and implementation of a wellness program.

R&R monitors utilization of multiple wellness related claims through the course of the year. Using this data, R&R will make recommendations to help determine/establish wellness programs that will pinpoint tactics and opportunities designed to have the greatest impact on behavioral change and population health improvement. We are able to do webinars and create videos when applicable to allow Wellpoint Care Network to be informed as necessary.

Each employee population and organization's culture are unique, and R&R recognizes the need for customization when developing a wellness strategy for each of our clients. R&R has been on the cutting edge of delivering wellness strategies to our groups. Based on our recommendation, many of our current clients have implemented multi-step wellness initiatives with measurable success in several areas.

We will support you in a variety of ways, including:

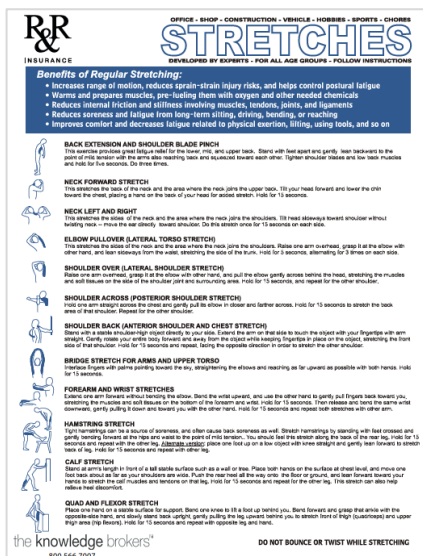
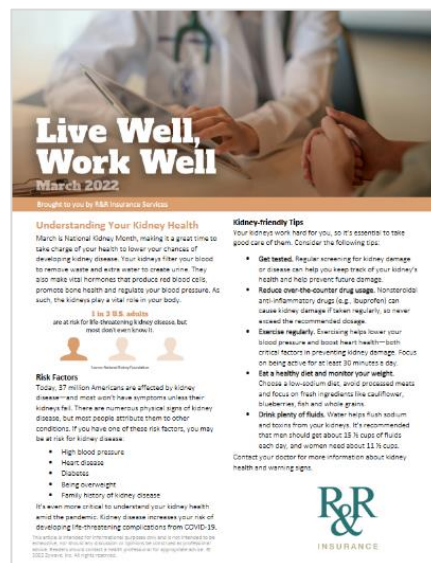
- Assessment of current wellness programs and making recommendations on how to expand and improve the programs to create a culture of health and productivity.
- Development of multi-year health and productivity strategies and budgets to achieve measurable health and productivity gains.
- Creation and implementation of data-driven health and productivity based on programs that support and enhance your multi-year health strategy.
- Identify health and productivity programs that will be put out to bid conduct RFP's, select wellness partners, negotiate, and outline scope of work along with pricing.
- Assist in developing incentive programs tied to current or future health and productivity programs that will increase participation, engage employees and encourage behavior change
- Evaluation of Employee Assistance Program (EAP) and/or clinic services

Our goal is to provide a better benefit plan experience for your employees in addition to addressing the need to control insurance costs. Through our comprehensive review of your plan and commitment to the promotion of wellness, you should realize better, long-term control over the cost of your benefit program. We have continuously developed our own program and have received awards both on a national level as well as on the local level, including the WELCOA Workplace Wellness Award, The UnitedHealthcare Wellness Award, the Go365 Inspire Health Award with Humana and Workforce Well-being Scorecard™ Recognition from the American Heart Association.



## Some of the low-cost / no-cost tools we have introduced and supported include:

- ✓ WELCOA Gold Member and a member of the Wellness Council of Wisconsin (provides R&R access to a number of resources)
- ✓ Employee needs/interest survey and culture audit
- ✓ Monthly wellness newsletter/calendar
- ✓ Employee payroll stuffers/posters
- ✓ Proprietary Awareness to Wellness Program
- ✓ Activity ideas (i.e., walking program and weight management programs)
- ✓ Environment evaluation (i.e., smoke-free environment? Healthy food alternatives?)
- ✓ Leverage carrier resources
- ✓ Multitude of community resources and vendor partnerships
- ✓ Assist with coordinating and managing onsite Wellness Fair



**Medicare:** As your employees become eligible for Medicare, they have additional options for their health coverage. R&R Insurance's Medicare Division can help them navigate the road of options and determine the best route for their future. Our Medicare team assists employers and employees in making budget conscious decisions on their Medicare options.

Our experts are available to your employees reaching Medicare eligible age, as well as employees who may have questions about their older parents' needs.

**Medicare Part D Notices:** The Centers for Medicare and Medicaid Services (CMS) require employers that offer prescription drug coverage to notify their Medicare eligible participants of the creditability status of the prescription drug coverage contained in their health plan. This notification must be provided by October 15<sup>th</sup> of each year.

As a service to help our clients comply with this employer obligation, R&R Insurance confirms with each client's insurance carrier whether their plan(s) provide(s) credible coverage or non-credible coverage. R&R Insurance also provides the appropriate Medicare Part D Notices that need to be distributed by October 15<sup>th</sup> of each year to their Medicare eligible participants as well as to newly eligible Medicare enrollees and members throughout the year.

**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?

**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 ☐

**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 Advantage Coverage

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Scan to launch digital resources!

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**Retiree Support:** In our experience, helping our clientele properly mitigate the ongoing risk of retiree medical benefits is critical to the overall financial health of the employer and benefits program. The retiree health plan is evaluated on a continuous basis, like the Active Employee health plan through various cost containment measures such as, but not limited to claims analysis, RX audits, provider disruption reports, network discount & utilization reports, claims repricing and/or 3rd party retiree healthcare vendor models available in the marketplace.

We support our client's retiree population by communicating the importance of programs targeted at their preventive care, wellness initiatives and case management through ongoing education. In addition, we have Medicare specialists on staff throughout the year, presenting at seminars or individual one-on-one meetings, to explore the optimal Medicare options for that individual. R&R's Medicare Staff not only offers help navigating retirees through the complexities of Medicare, but also alleviates the Wellpoint Care Network's future claim liability by successfully redirecting costs off the Employer sponsored health plan, onto Medicare.

**SHRM Recertification Provider:** R&R is recognized by the Society for Human Resource Management (SHRM) to offer professional development credits (PDCs) for the SHRM-CP® or SHRM-SCP®. Our in-house resources offer several compliance related PDC accredited webinars throughout the year. R&R will also be speaking at the upcoming SHRM Conference in May about *Pursuing Valuable Connections: An Outcome of the War on Talent*.

**Wealth Management:** The R&R Insurance team offers comprehensive services for our clients, and this includes retirement plans. Whether it is a 401(k), Profit Sharing plan, 403(b) or other investment program, the Wealth Management team can help you and your employees build their retiree nest egg. We provide co-fiduciary services, plan design strategy, financial wellness programs, employee training, vendor management, compliance oversight and more.

**Personal Line for Employer Groups:** The R&R insurance team offers employer groups access to a unique program designed to retain and recruit employees. We offer programs whereby employees can save money off their auto and homeowners policies by being an employee of your firm.



## Commercial Insurance



## Personal Insurance



## Employee Benefits



## Wealth Management

**h) Describe attributes that make you a valuable strategic partner to Wellpoint Care Network.**

There are many attributes that we believe make us a valuable strategic partner to Wellpoint Care Network.

- **We believe in your mission.** We believe in providing healing ultimately empowers individuals and families to enhance their ability to thrive. Wellness is the point. To help you with your mission you need employees that are focused on helping people heal and not worried or stressed about benefits. We are here to help your employees so they can do what they do best.
- **We are fiercely independent.** R&R Insurance is proud to be privately held so that our focus is solely on our client partners and not stockholders or venture capital boards. Yes, we need to work within the scope of profitability but that does not drive us – our clients do. We are large enough to offer ‘Wall Street’ resources to our clients, yet right sized to provide the ‘Main Street’ personal touch clients and employees deserve.
- **We provide the right person at the right time for the right situation.** This is how a new client recently described R&R Insurance. We have depth in our team to help Wellpoint Care Network achieve its goals.
  - Communication/Marketing
  - Compliance
  - Wellbeing
  - Analytics
  - Medicare
  - Benefit Consultants
- **We have our carrier partner’s respect.** As mentioned earlier, our philosophy is to treat everyone with respect. This included carriers. They know we work for you however they appreciate our level-headed style. This respectful relationship has paid dividends for our clients.
- **We have decades of expertise.** The team that will partner with Wellpoint Care Network has decades of experience in the benefit industry. Whether it is working as a claims adjuster for a major carrier, to having 20+ years of niche expertise in account-based plans, to having a Masters in Health Education, to being a fully insured and self-funded expert to teaching compliance classes at Marquette University, to working with non-profit employers for almost 30 years, the team assembled has probably ‘been there, done that’ when it comes to benefits. They leverage these experiences to benefit Wellpoint Care Network.



**a) Describe how you expect to be compensated for the services outlined in this proposal.**

R&R has the flexibility to engage in all forms of compensation for our services witnessed in the marketplace today. Cases of your size typically compensate on a fee for service basis, particularly for medical coverage, and we would recommend the same to best insulate you from inflationary medical premium increases that may or may not actually require more service from the broker.

Our fee for service approach to handling your account can be found at the end of this document. Additionally, we remain open to discussing and considering any other options with Wellpoint Care Network based on your wishes and objectives. In any instance that may require an offline fee, we will outline this upfront and clearly communicate scope, expectations, and cost prior to engagement to protect and promote full transparency

**b) State your philosophy of compensation disclosure.**

Our philosophy is to be **100% transparent and will disclose our compensation**. We believe the value of our services will speak for itself and any compensation that comes with it.

At R&R Insurance, we have our client's financial interest in mind by implementing full-disclosure fee models so that our clients can trust that we, as your Broker of Record, always act in a professional and ethical manner and do not make decisions based on potential commission incentives.

Furthermore, R&R will comply with the Consolidated Appropriations Act of 2021 (CAA) which created new requirements for brokers and consultants to disclose certain direct or indirect compensation they may receive for referral of services to ERISA-covered group health plan sponsors.

## Custom Landing Page

To highlight our organization's digital and past work as it applies to the services proposed within this proposal, we have constructed a custom [webpage](#) that highlights examples of how we have implemented our services and go above and beyond for our clients.

Should you be reading this document via printed form, please follow the instructions below for how to use the QR code pictured to access our portfolio of work.

**Instructions for using the QR Code pictured right:**

1. With your mobile device, open your camera app.
2. Once you have opened your camera, hover over the QR Code.
3. A drop down will appear for you to click on.
4. After clicking the drop-down box, you will be redirected to your internet browser where our portfolio of work will appear.

