



INSURANCE



REQUEST FOR PROPOSAL

2023

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Our Commitment

As the consulting team dedicated to Zero Zone, 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 Zero Zone a “Best in Class” company to work for and achieve its mission of **“listening to understand the needs of our clients and exceed expectations.”**

R&R Insurance Services, Inc. (R&R Insurance) is genuinely engaged in collaborating with Wisconsin manufacturers. Selecting the right consulting partner is pivotal to the success of the Zero Zone administrative team and its family members. 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 Zero Zone 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 Zero Zone. We look forward to continued discussions and the opportunity to help you realize your strategic vision.

Our team is ready to partner with you!



Executive Summary

R&R Insurance Services, Inc. appreciates the opportunity to participate and present our capabilities, resources, and recommendations to the Executive Team of Zero Zone.

The following document represents our response to your key and critical questions posed in the Request for Proposal (RFP) and will be supported by observations and solutions we feel best align with your stated needs. It is also our intent to focus on areas that we suggest will have the greatest impact on your employee benefits program and culture.

Specifically, we feel there is opportunity to favorably improve Zero Zone's financial and operational results to include the following:

1. Innovative, strategic solutions delivered with local and national resources
2. Trend analysis of high-cost claimant activity
3. Specific and aggregate stop loss evaluation
4. The financial impact of your aging workforce
5. Implementation of a consumer based and accountable wellbeing program
6. Creation and delivery of a customized, engaging communication plan to all locations
7. Service team to implement short-term strategies

We welcome your input and feedback and look forward to working with you to execute and optimize your employee benefits program return on investment.

We stand ready to go to work **For You!**



1. Share your approach to strategic planning, identifying challenges, goal setting, and benefit cost strategies with multiple year views, i.e., 1-, 3-, and 5-year benefit cost strategies?

R&R is dedicated to strategic planning and developing strong partnerships. We understand the need to use resources efficiently and the value of building a foundation of excellence for our customers. 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 to establish the trigger points both for financial and member satisfaction.

We pride ourselves in understanding our clients, their business challenges and how those challenges affect their overall ability to attract and retain talent. We review and evaluate how the benefits program contributes to the overall offerings of the organization— tying back to the impact on attracting and retaining talent. We utilize the plan data provided as well as reviewing benefit trends to determine the best course of action for change or addition to the benefit offerings.

Our approach to strategic planning is fluid; it is ongoing and can change as the needs of the organization change. This is why regularly scheduled stewardship meetings are of the utmost importance so we can review the plan in place and pivot as needed. 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 have developed a process for scheduled meetings to bring up new topics or product suggestions and provide a high-level overview to better get a sense of whether it makes sense to advance the conversation and to bring in a deeper dive.

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. Align on upcoming meetings, projects, or goals
5. Agree on key milestones to accomplish prior to next meeting

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

We believe the key to execution is the joint creation of accountable strategies and tactics where results are tracked, and tactics modified as needed. We will work with you to develop and support a Zero Zone benefits philosophy using a combination of benefit cost strategies, some of which can be found below.

Strategic Objectives

YEARLY STRATEGY	MEASURABLE OBJECTIVES	ACTION ITEMS	YEARLY GOAL TBD with client	YEARLY OUTCOME TBD with client
Year 1	Identify and evaluate historical information to create analytic foundation	<ul style="list-style-type: none"> ✓ Completing historical analysis of demographic workforce, plan costs drivers, and claim trends ✓ PBM Analysis ✓ Stop loss evaluation ✓ Cost containment program analysis 	Baseline: X% Moderate: X% High: X%	Baseline: X% Moderate: X% High: X%
	Implement/communicate structured wellbeing program to drive engagement and decrease population risk	<ul style="list-style-type: none"> ✓ Conduct culture assessment ✓ Jointly develop wellbeing objectives and budget ✓ Showcase senior leader support ✓ Create a supportive committee ✓ Data analytics and biometric screenings to target specific interventions/communications ✓ Implement educational wellbeing campaign 	Baseline: X%	X%
Year 3	Align and modify strategies based on continuing demographic shifts and cost trends	<ul style="list-style-type: none"> ✓ Continued monitoring of prescription drug landscape ✓ Consider strategies targeting gene therapy cost mitigation ✓ Evaluation of onsite/ near site clinics ✓ Adjust stop loss structure to accommodate inflationary and economic changes ✓ Align with any Zero Zone multi-year plan modifications 	Baseline: X%	X%
	Increase overall <u>participation</u> in the wellbeing program	<ul style="list-style-type: none"> ✓ Drive behavior through premium contribution incentives ✓ Wellbeing survey/feedback ✓ Wellness vendor seminar series ✓ Branding for visibility/excitement ✓ Consider additional incentives (PTO, gift cards, etc.) 	Baseline: X%	X%
Year 5	Given the rapidity of change within employee benefits, we suggest annual planning based on initial 3-year progress	<ul style="list-style-type: none"> ✓ Open and ongoing communication on goal setting ✓ Continuous monitoring of generational shifting in your workforce to tailor objectives and messaging ✓ By 2025, 73% of your workforce will be Millennial and Gen Z ✓ Better understanding of COVID fallout ✓ Align with any Zero Zone multi-year plan modifications 	Baseline: X%	X%
	Health/Wellness Coaching engagement	<ul style="list-style-type: none"> ✓ Add coaching as an activity within the wellness program ✓ Data analytics to target outreach ✓ Continue to maximize on all program offerings with successful communication campaigns and incentives ✓ Evaluate outcomes along with new yearly goals 	Baseline: X%	X%

2. Describe your approach to developing a Zero Zone benefits philosophy that provides an outstanding employee and patient experience, while controlling costs.

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 wellbeing 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 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 tremendous 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.

We also utilize our robust analytical tools to show, in real-time, the potential impacts plan design changes can have on cost, and we have successfully implemented programs to reduce healthcare spending. 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 the Zero Zone's overall costs of benefits. R&R Insurance believes that claims data should be looked at regularly. We take various approaches to work with your medical and pharmacy carriers to collect and analyze your claims data. This approach along with the Applied Benefits Designer™, Claros™, and Zywave analytical tools, provides you with rigorous levels of analysis and ensures there will not be any unexpected costs. R&R Insurance has vast experience in providing cost-saving strategies for our customers. In addition to wellbeing and consumerism initiatives, our agency has developed a process to provide solutions tailored to an organization's goals and culture.

At R&R Insurance, we have found that our clients often need assistance with their dependent eligibility auditing process. As a fiduciary, it is the duty of plan administrators to manage the benefit plan in accordance with plan documents, thus offering coverage to only those eligible. In a recent evaluation of a client's census, we found the plan to be paying coverage and claims for six dependents that should no longer have been on the plan. It is the responsibility of the organization to monitor and notify carriers of changes, and at R&R Insurance we can assist with this evaluation and procedural development.

Strategies can be developed for those costs that are controllable and then can be measured year-after-year to demonstrate savings.

How?

- Data mining for controllable healthcare costs.
- Implement consumer transparency tools, reducing cost trends an employee out-of-pocket expense.
- Benefit modeling of historical claims data can be performed to reduce employer-sponsored costs.
- Re-assessing employee contribution strategies.
- Design wellbeing programs aimed at reducing the Zero Zone's health risks (identified through aggregate biometric data).

Our Compliance team also supports the programs with regular updates on changes in the law and regulations. They host various webinars to help employers understand these changes. In addition, our team can help with ACA related matters and has helped them avoid potentially costly fines.



1. What insurance networks and third-party administrators are you using for the bulk of your clients?

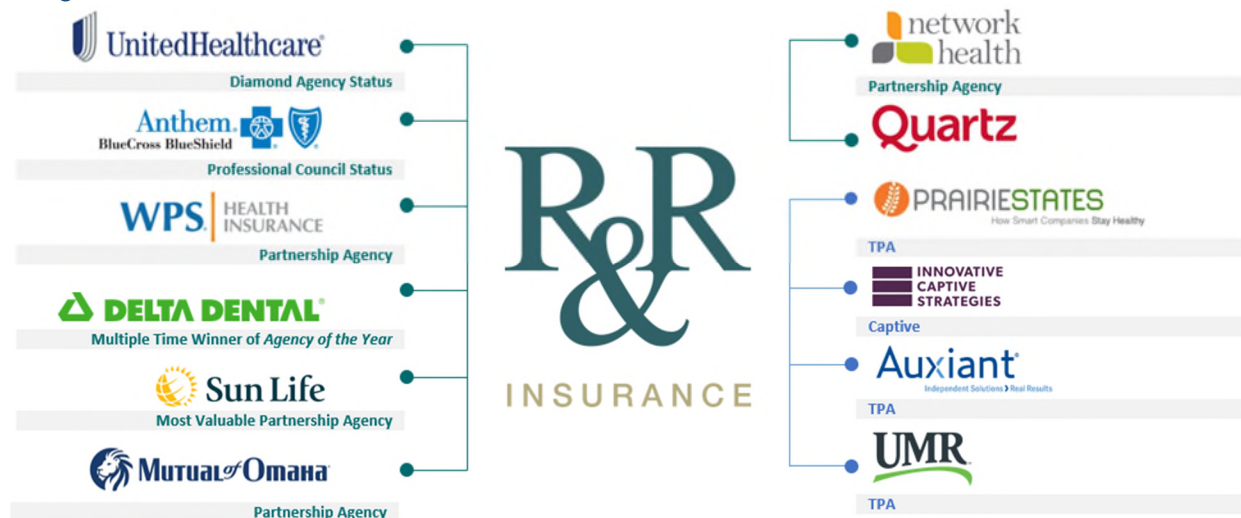
R&R Insurance has significant market leverage within both the local and national marketplace. We have thousands of clients that we service, making us one of the largest consulting firms in the local market. We have developed effective relationships with the various benefit carriers and cultivated a relationship of respect with them that benefits our clients.

One example of these relationships is that R&R Insurance was one of select number of Wisconsin based firms invited to a special health care symposium held at the headquarters of the nation's largest insurance carrier. Here we were provided with a deep dive of data regarding programming and analytics that allow us the insight to develop more impactful cost containment solutions. In addition, we are members of Assurex, which nationally is one of the biggest combined consulting consortiums. R&R Insurance is able to leverage this purchasing power for both its local and national clientele.

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 and 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.

We realize that our clients are the true beneficiaries of premier carrier status. Our agency prides itself on an efficient, high-touch service model to keep your benefits programs running smoothly. The image below shows a listing of a few of our recognitions for 2023 with various carriers. Through our participation with Assurex Global, we have access to their proprietary data. We synthesize each carrier's reports to create an overall marketplace index of your plan in relation to the offerings of similarly situated organizations based on size, industry, location, and plan design.



2. How will the insurance networks and third-party administrators align with Zero Zone's needs?

At R&R Insurance, plan evaluation happens year round so the renewal process is continually a work in progress. Our analytic team has a solid grasp of where the rates from carrier and stop loss provider *should* be prior to receiving the renewals from the vendors. At least 120 days prior to the effective date, we meet with carriers and TPAs to engage them in renewal discussions.

During this renewal period, we will evaluate the vendor services and discuss potential benefit changes. The timeline will factor in sufficient time to negotiate with the proposed vendors, market the account in the event that the requested renewal action of the vendor is not reasonable, and allow time to consider alternative vendors. The benefits team assigned to Zero Zone will lead the charge in requesting quotes and proposals from carriers and synthesize the options to show comparative data. As a Premier agency with all the carriers, we have unique negotiating opportunities and direct contact with the decision makers.

Negotiating With Vendors

Part of our philosophy is to treat everyone with respect. This includes carrier partners. 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 Zero Zone 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.
- Creation and personalization of Benefit & Enrollment Guide.
- Ongoing vendor management – day-to-day interface and issues management.

If/when the time comes to make a change in carriers or vendors; your dedicated benefits team will manage the implementation process and ensure that all the necessary paperwork and filings are taken care of.

We work together to create a **12-month Service Plan** that lays out each plan year in terms of your quarterly goals. The Annual 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, and develop methods for implementing these strategies. Additionally, a Stewardship Report, delivered annually to your Executive team, provides an annual assessment of R&R Insurance's performance and holds us accountable to the objectives outlined in your service plan.

Furthermore, we utilize our Premier Status (noted on page 6) with the carriers to get you out to market quicker. We would ensure that as we assess other carriers, network facilities, plan design offerings, and funding options that they are fully aligned. Working with Zero Zone, the team would certify that goals for the benefit plan are met while gathering the required data and information: census, summary of benefits and coverage (SBC), renewal rates, and claims data available to get the Zero Zone out to market as soon as possible.

Transition Timeline	Target Date	Responsible Party
Consultant Selection	December	Zero Zone
Agent Transfer Letters to Carrier	January	Zero Zone / R&R
Onboarding Process	January	Zero Zone / R&R
Renewal & Marketing Preparation	February	Zero Zone / R&R
Update Census	March	Zero Zone
Analyze Funding and Projected Budget	March	Zero Zone / R&R
Send RFPs to Carriers, TPAs, Stop Loss	March	R&R
Analyze RFP proposals	March / April	R&R
Present Options to Zero Zone Benefits Committee	April / May	R&R
Determine Contribution Strategy	May	R&R
Transition Meetings (Carrier, TPA, Claims, Contracts . . .), if applicable	May	R&R / Zero Zone / Carrier or TPA
Prepare Open Enrollment Materials	May	R&R
Open Enrollment	May	Zero Zone / R&R
Finalize Open Enrollment w/ Carriers, TPA	May / June	R&R
Claims Analysis	Monthly	R&R
Strategic Planning Objective Meetings	Quarterly	Zero Zone / R&R

1. Share the specifics of your technology and how you analyze data to drive plan success?

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 and utilize the following:

Applied Benefits Designed™

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

Claros™ Analytics

- Analyze multiple factors directly impacting medical benefits
- Run/test multiple Stop Loss scenarios to find the optimal outcome based on risk tolerances
- Provide guidelines for future costs based on projected plan changes
- Underwrite risk tolerance and costs for our clients
- Set reserve and IBNR
- Project employee enrollment among different plan options
- Compare actual budget performance to expected throughout the year and adjust accordingly
- Develop COBRA rates

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

Cyber/IT Defense

- Endpoint security
- MDR solution implemented
- Geographical blocking from various applications and hardware
- RMM tools
- Password complexity requirements along with scheduled changes
- Spam filtering two independent layers
- VPN when working remotely
- Multifactor Authentication (MFA) on multiple applications including sign-on

InsurLink™

- Cloud-based storage
- Online portal—access is encrypted and is HIPAA compliant (document management system)

R&R/Zywave Client Portal

- Offers employers an online portal providing them 24/7 access to important benefits information. Employers can access robust HR guidance, compliance updates, benefit benchmarking data and a host of other features.

2. What support do you provide with data interpretation for meaningful action?

R&R has a suite of analytical tools and resources available to help Zero Zone manage its benefits program costs and services. These tools coupled with our talented analytical team will provide Zero Zone with a comprehensive and 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 other 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 Zero Zone measures up to other organization's benefit offerings. This provides Zero Zone 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 the Zero Zone'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

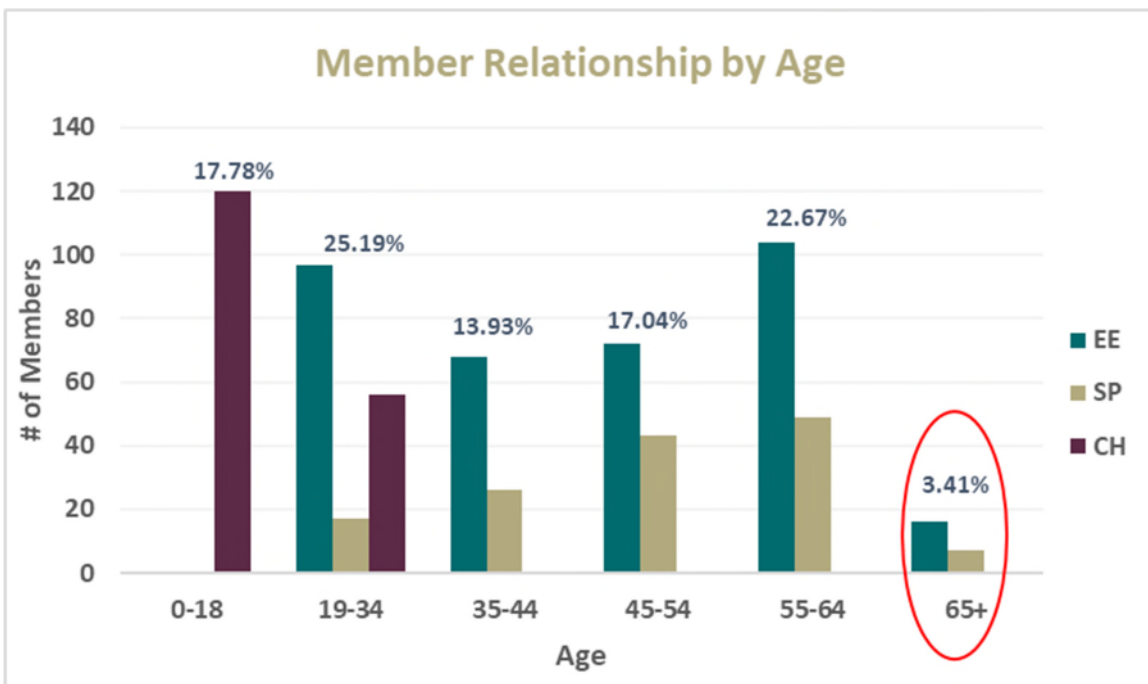
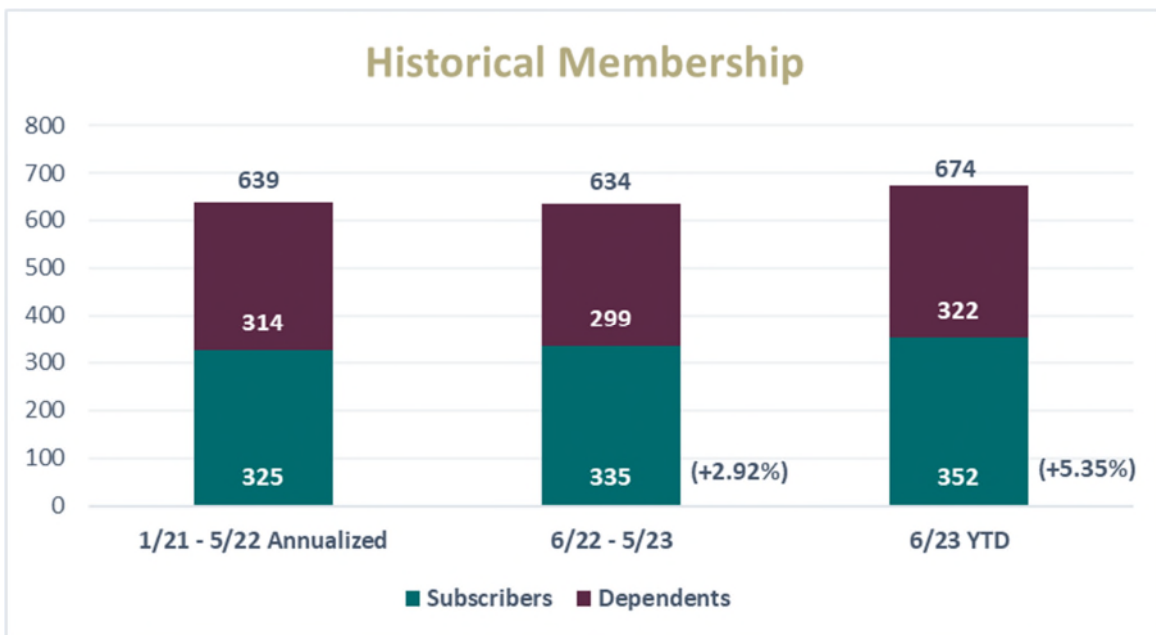
Decision Master® Warehouse (DMW):

- 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

In addition to the monthly claims reporting, projections, vendor analyses, and general analytical work R&R Insurance provides to our clients, we have included a portion of our initial findings specific to Zero Zone that we will use as the foundation of our short and long-term employee benefits strategies.

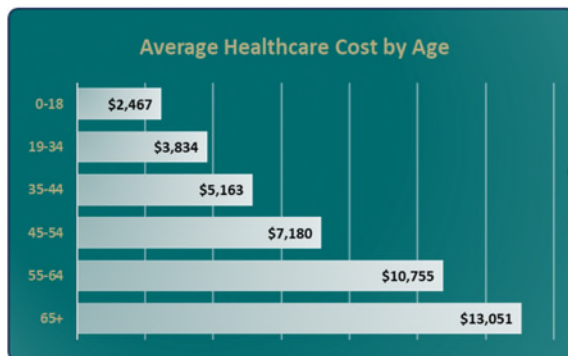
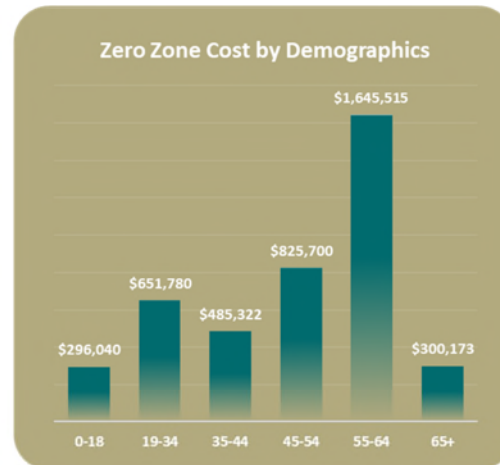
1) Demographic Analysis

Zero Zone's average enrolled subscribers have increased 8.3% from 2021 to the present day. During that same period, annualized per employee per year net plan costs have outpaced the growth in enrollment, increasing by 16.95%. **What kind of risk are we attracting to the plan and how do we mitigate excess risk?**



Member Age Stratification				%
	EE	SP	CH	
0-18	-	-	120	17.78%
19-34	97	17	56	25.19%
35-44	68	26	-	13.93%
45-54	72	43	-	17.04%
55-64	104	49	-	22.67%
65+	16	7	-	3.41%

*4 employees and 3 spouses are age 64



2) Claims Trends

23 enrolled members are age 65 or older with an additional 7 members turning 65 in the next year. In the 2022-23 plan year, 6 of the top 13 claimants fell into these age categories accounting for approximately \$669,000 in claims, \$522,000 of which were attributable to Medicare eligible members. In 2023-24, 2 of the 6 members who have already exceeded \$20,000 in claims are over the age of 65.

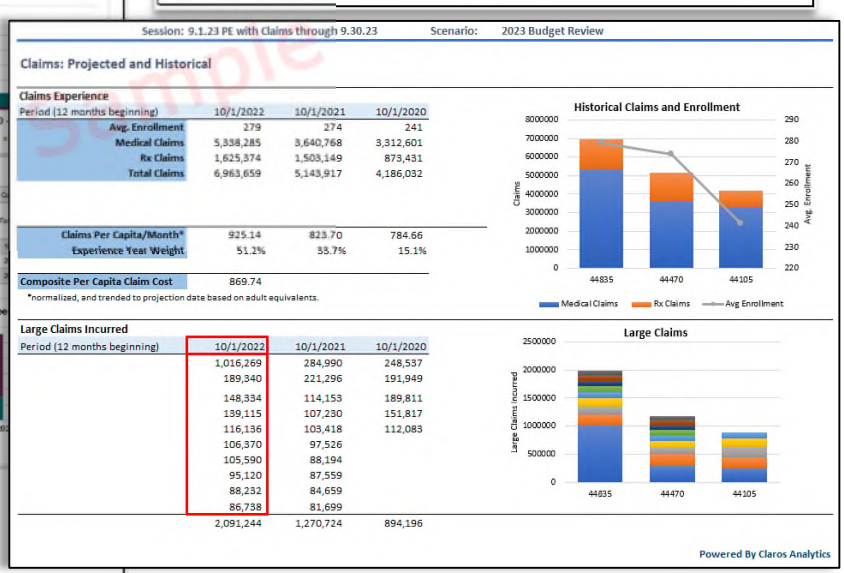
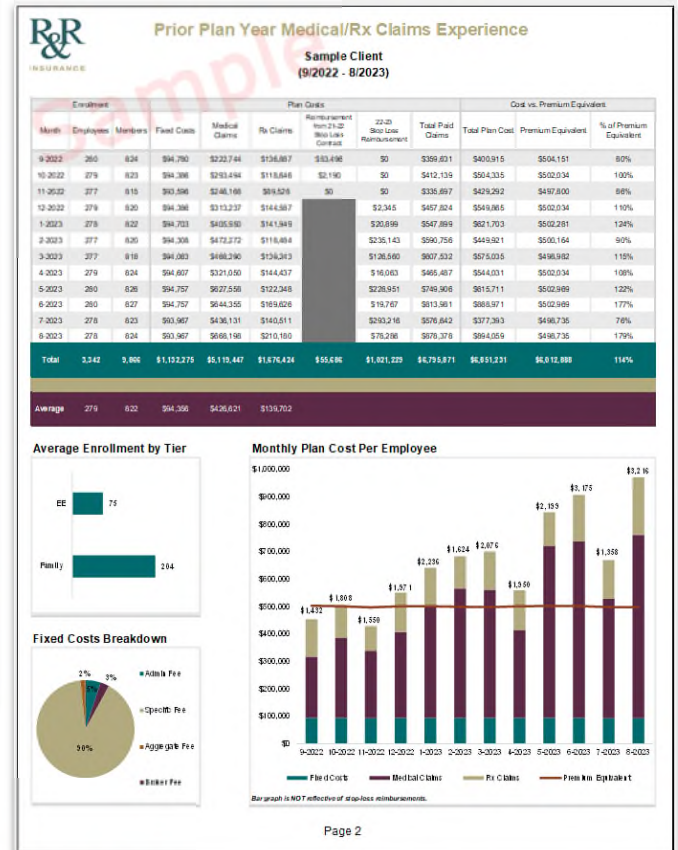
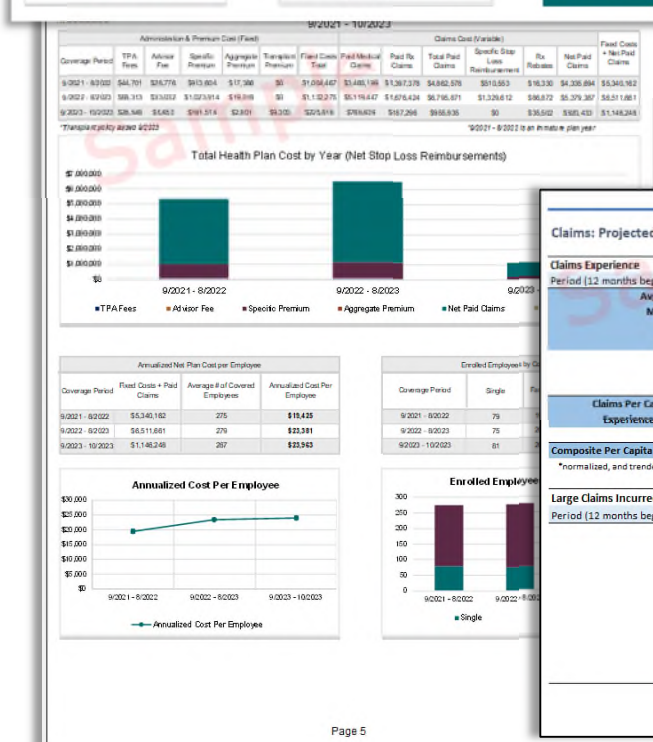
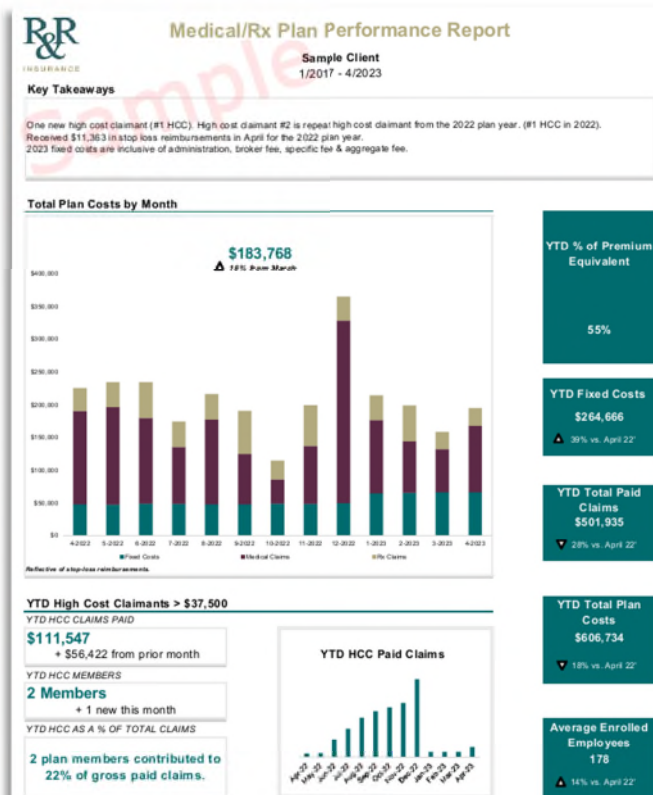
Reporting Period: (Incurred: 6/1/22 - 5/31/23, Paid: 6/1/22 - 11/30/23)

Claimant	Plan	Relationship	Age	Gender	Diagnosis	Medical Claims	Rx Claims	Total Paid Claims	Specific Deductible	Claims > Specific
#1	Low	Employee	53	Male	Cancer (Chemotherapy)	\$212,512	\$125	\$212,636	\$95,000	\$117,636
#2	High	Employee	69	Male	Cancer (Chemotherapy)	\$162,897	\$4,802	\$167,699	\$95,000	\$72,699
#3	Low	Employee	67	Male	Heart Attack	\$149,476	\$16,967	\$166,443	\$95,000	\$71,443
#4	High	Employee	62	Female	Staph Infection	\$126,606	\$7	\$126,613	\$95,000	\$31,613
#5	High	Spouse	59	Male	Prostate Cancer	\$12,000	\$105,923	\$117,923	\$95,000	\$22,923
#6	High	Employee	65	Male	Cancer (Radiation)	\$103,917	\$323	\$104,240	\$95,000	\$9,240
#7	High	Employee	64	Male	Alcohol Dependence	\$67,670	\$23,542	\$91,212	\$95,000	\$0
#8	Low	Employee	68	Male	Paroxysmal Atrial Fibrillation	\$67,555	\$16,098	\$83,653	\$95,000	\$0
#9	Low	Spouse	27	Female	Sepsis	\$61,275	\$1,302	\$62,577	\$95,000	\$0
#10	High	Employee	64	Male	Chronic Respiratory Failure	\$53,161	\$2,717	\$55,878	\$95,000	\$0
#11	Low	Employee	29	Female	Heart Defect	\$53,823	\$1,062	\$54,885	\$95,000	\$0
#12	Low	Employee	30	Female	Leg Fracture	\$52,390	\$141	\$52,531	\$95,000	\$0
#13	High	Employee	62	Female	Pulmonary Fibrosis	\$46,930	\$1,385	\$48,314	\$95,000	\$0
Total Paid Claims over 50% Spec:						\$1,344,603		Total over \$95k: \$325,554		

Reporting Period: (Incurred: 6/1/23 - 5/31/24, Paid: 6/1/23 - 11/30/24)

Claimant	Plan	Relationship	Age	Gender	Diagnosis	Medical Claims	Rx Claims	Total Paid Claims	Specific Deductible	Laser Amount	Claims > Specific
#1	Low	Employee	53	Male	Cancer (Chemotherapy)	\$82,051	\$5	\$82,056	\$95,000	Claimant Lasered	\$0
#2	Low	Employee	67	Male	Foot Injury	\$57,156	\$6,709	\$63,864	\$95,000		\$0
#3	Low	Employee	40	Male	Granulomatosis	\$38,932	\$770	\$39,702	\$95,000		\$0
#4	Low	Employee	38	Male	Alcohol Dependence	\$28,535	\$0	\$28,535	\$95,000		\$0
#5	High	Employee	69	Male	Prostatic Hyperplasia	\$20,304	\$3,143	\$23,447	\$95,000		\$0
#6	High	Spouse	59	Male	Neck/Spine Pain	\$8,142	\$14,118	\$22,260	\$95,000		\$0

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.



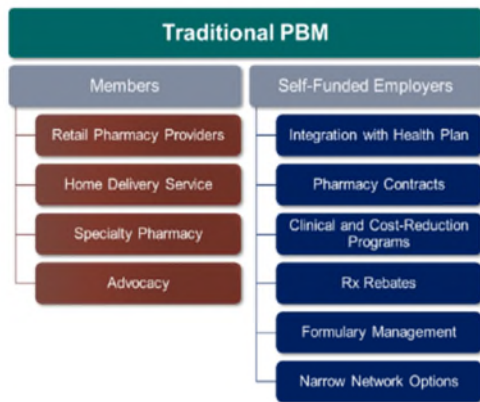
Innovation—Attacking the Cost Curve

As The Knowledge Brokers we consistently keep our clients informed of innovative solutions and build them into our multi-year strategic planning. Several of our innovative successes center on cost containment and employee consumerism.

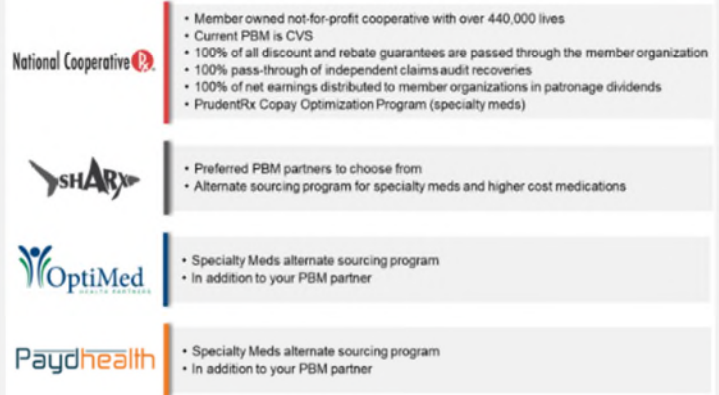
- **Group Captive Arrangements:** A Group Captive is an insurance company owned and operated by captive members, strictly for the benefit of those members. It enables middle-market employers to increase their underwriting credibility through the benefits of collective purchasing power.
- **Direct Primary Care:** A billing and payment arrangement made between patients and providers, while removing claims from the insurance. This strategy also includes an enhanced healthcare experience for each member/patient.
- **Independent Third-Party Administrators that include:**
 - Second Opinions & Quality vs. Cost Education/Communication: There is an extreme need for more transparency in healthcare. As consumers, we purchase all things based on quality and cost. The current healthcare system does not deliver this information for patients to be true consumers. There are TPA's that will provide this concierge service to patients and are proving to be successful.
 - Centers of Excellence Recommendations. Simply put, these facilities are the highest quality at the lowest cost (i.e., the best value)
- **Wellbeing Programs that include Behavior Based Outcomes:** Outcomes-based programs are a more aggressive approach to Wellbeing. 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.
- **Prescription Drug Carve-out Arrangements:** Often, 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.
- **Specialty Drug Optimization Programs:** Specialty drugs represent 2% of utilization and can account for as much as 70-80% of the pharmacy spend. Specialty drug costs increased 100% over the past 5 years. There are PBM's that include Patient Assistance Programs aimed at covering 100% of the cost of specialty medications.
- **International Drug Programs:** Access to Canadian retail pharmacy partners that provide medications directly to a member's household (including specialty and refrigerated medications) in a 90-day supply at no cost to the member results in a greatly reduced price to the plan. It is also important to note that such programs can be implemented as an incentive to members – not mandated (i.e., optional to the members).
- **Rx Co-pay Optimization Programs:** Non-specialty, high-cost drugs, create further financial challenges for plan sponsors. There are PBM's that include daily surveillance which identifies alternative reimbursement opportunities to reduce spend by utilizing available programs to substantially reduce the cost of these medications and pass the savings onto the plan.
- **JCode Contracting:** JCodes are prescriptions that are processed through an employer's medical plan vs. the Rx (PBM) plan. Such drugs are administered within a provider facility vs. a member picking up the script at a pharmacy or having it mailed to their home. Typically, hospitals do not provide any discounts on medications administered through inpatient or outpatient care. However, there are TPA/PBM relationships that have taken contractual action to achieve savings in this area.

Pharmacy Benefit Manager Evaluation

Pharmacy Benefit Management



Advocacy Programs



WELLBEING PROGRAMMING

R&R Insurance provides clients with up-to-date wellbeing communication/services including benchmarking and surveys, vendor management, biometrics scheduling, and reporting. Our dedicated Strategic Wellbeing Consultant, Taylor Hahn has a certification as a Worksite Wellbeing Specialist and is available to assist with the creation and implementation of a wellbeing program. She has vetted a number of wellbeing programs, sets up demonstrations with vendors and will partner with Zero Zone to select a carrier partner that fits the goals and needs of the organization. As an example, Taylor led a companywide Vitality Kick-Off presentation for one of our clients. She developed a BINGO challenge focused on mental health and worked with the carrier and company leaders to include a point system to increase engagement. Taylor also hosts webinars on the impacts of stress in relation to medical and pharmacy claims, mental wellbeing, and the eight dimensions of wellbeing. Most recently, Taylor has taken the lead in vet financial fitness programs for our customer base.

R&R Insurance monitors utilization of multiple wellbeing related claims throughout the course of the year. Using this data, R&R Insurance will make recommendations to help determine and establish wellbeing 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 Zero Zone to be informed as necessary and when applicable. Each employee population and institution culture is unique and R&R Insurance recognizes the need for customization when developing a wellbeing strategy for each of our clients. R&R Insurance has been on the cutting edge of delivering wellbeing strategies to our groups. Based on our recommendation, many of our current clients have implemented multi-step wellbeing initiatives with measurable success in several areas.

Mental Health continues to be a concern and your benefit team has extensive experience presenting WHY mental health matters, HOW it impacts our physical health and WHAT we can do to reduce stress and engage in healthy mental habits.

We will support Zero Zone in a variety of ways, including:

- Assessment of current wellbeing 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 programs that support and enhance Zero Zone's multi-year health strategy.
- Identify health and productivity programs that will be put out to bid conduct RFP's, select wellbeing partners, negotiate, and outline scope of work along with pricing; and
- 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.

A form of innovation and delivered results for our clients similar in size to Zero Zone is through a concentration on an employer's most controllable medical expenses. There is a plethora of contributing factors to the social determinants of a person's health.

At R&R, we have heightened our focus to the top leading causes of cost and frequency to an employer's medical cost exposure.

- Medical – Arthritis, Diabetes, Heart Disease, and High Body Mass Index
- Psychosocial – Anxiety, Depression, and High Work Stress
- Lifestyle – Alcohol Use and Tobacco Use

Specific to just one of the nine areas of concentration, we will elaborate on strategic approaches to controlling diabetes costs. Through our strategic approach, the Analytics significantly supports the need to institute programs designed to reduce the costs incurred from those with diabetes.

Through a comprehensive study, we identified that diabetics cost on average 2.64x more than non-diabetics. Given that 1 in 10 Americans have diabetes and 90% of those are classified as preventable, type-two diabetics, we have been successful with instituting diabetic management programs, which focus on getting a diabetic's A1C levels to a controllable level. Our average results for a diabetic with an A1C > or = to nine that is reduced to controlled level is equal to about \$5,244 in savings. When you multiply that times the potential 10% of employees who are diabetic, the cost savings for an employer with 400 employees is over \$208,000, and that is just one of the nine areas of R&R narrowed focus.

High Level Overview Diabetes Program Options

**Costs are estimated*

Status Quo	Local Diabetes Prevention Program	National Diabetes Prevention Program
<ul style="list-style-type: none"> ✓ Estimated yearly medical cost of a diagnosed diabetic is \$19,736 ✓ People diagnosed with diabetes, on average, have 2.6x higher medical expenses ✓ National indirect cost - disability (\$28.3 billion), presenteeism (\$35.8 billion, lost productivity/death (\$32.4 billion) 	<ul style="list-style-type: none"> ✓ 26 sessions over one year – led by a trained coach ✓ Includes a support group that offers motivation and support ✓ Cost is \$429 for complete program Diabetes Prevention Program YMCA of Greater Waukesha County (gwcymca.org) 	<ul style="list-style-type: none"> ✓ ~38 sessions over one year – led by a trained coach ✓ Includes a support group that offers motivation and support, can be virtual or in-person depending on availability ✓ Cost is ~\$500 for complete program Lifestyle Change Program Details National Diabetes Prevention Program CDC



Sample Wellbeing Communications/Activities

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
- ✓ UW Extension
- ✓ 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)
800.903.3787 or text NAMI
to 741741
- ✓ **Local WI NAMI Chapter**
608.288.8000
www.namiwisconsin.org
- ✓ **Mental Health-Related Distress**
Call or Text: 988
Chat 988lifeline.org
- ✓ **National Suicide Prevention**
Hours: Available 24hrs.
Languages: English/Spanish
800.273.8255
- ✓ **Prevent Suicide Wisconsin**
- ✓ **Wisconsin 211**
(Free Referral Helpline)
Dial 211 from any phone
- ✓ **HOPELINE**
Text HOPELINE to 741741
- ✓ **Aging & Disability Resource Center**



1. Describe the services that you provide to communicate benefit value and appreciation of the financial commitment.

We recognize that member communication is an ongoing commitment and not something that starts and ends with open enrollment. We work collaboratively with our clients to determine their needs as it relates to benefit communication throughout the year. Our responsibility is to improve the knowledge and perceived value of the plan to members. This is done by eliminating the insurance speak and presenting in clear, simple terms to relay the message as an extension of your Benefits Department. We will deliver on this commitment through the following approaches of promoting, educating, and advocating:

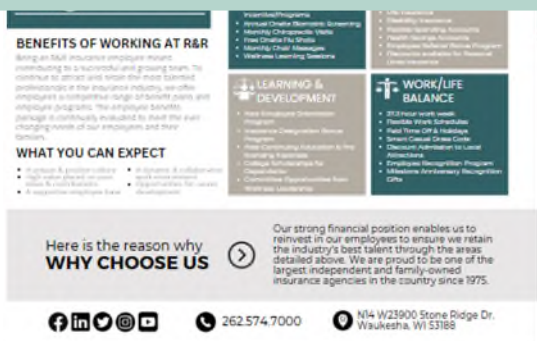
- Conduct member educational meetings to increase consumer awareness in their healthcare choices as well as assist with enrollment meetings.
- Assist, create and coordinate member communications further to educate members in understanding the full value and benefits of the plans offered.
- Proactively provide ongoing information on benefit trends and changes in the industry and promote consumerism with better education and resources for members.
- Provide direct service staff to assist members/dependents of Zero Zone 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.

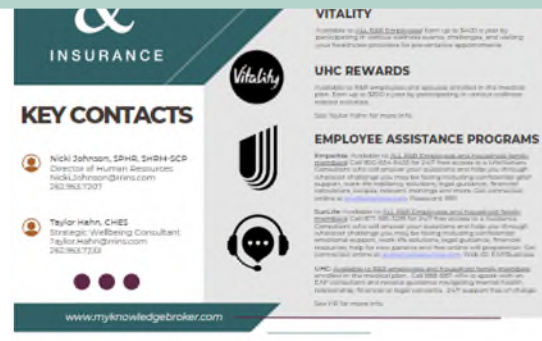
A nice way of marketing all that you have to offer to generate and create excitement about your organization while promoting the value you place on the benefits offered.



Sample Recruitment Flyer



Sample Total Rewards Flyer



2. What resources are available to support communication?

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

- Zero Zone members, their families, and leadership/administrative staff.
- The vendors providing your coverage and services.

R&R Insurance will provide feedback to Zero Zone as appropriate regarding resolution of members/dependents/service issues while protecting Personal Health Information (PHI). Our service platform is based on personalized, hands-on support and consultation utilizing an in-house resource team. Core Zero Zone communication and collaboration avenues are listed below:

- **Benefit & Enrollment Guide / QR Codes:** mobile accessible via QR code makes our communications more accessible to members and their families.

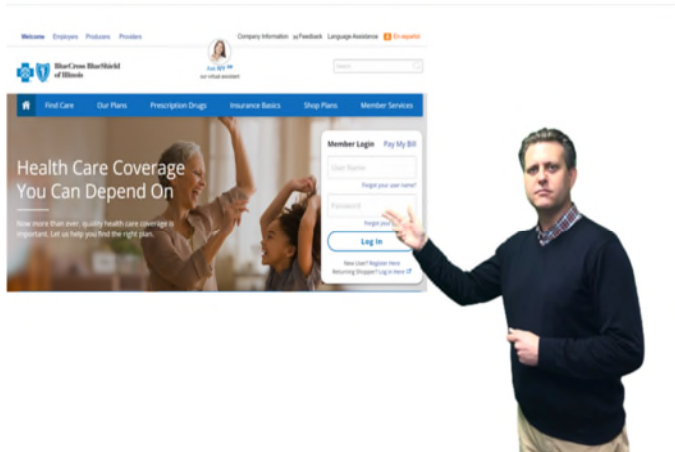
Zero Zone, Inc.

Benefits and Enrollment Guide

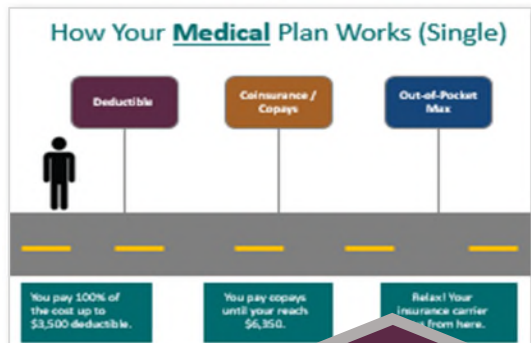
2023 Plan Year



- **Video Capabilities:** recorded communication messages on a host of topics to enable clients to share information to members. 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:** 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

- **E-Communications / E-Newsletters:** monthly electronic newsletters are emailed to clients on 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.
- **Seminars/Webinars:** monthly webinars address the latest trends in Employee Benefits and OSHA citations; in-person seminars provide interactive training in Medicare, HSA/HRA, Prescription Drugs, etc.

- **INSURLINK™**: online collaboration tool, access is encrypted and is HIPAA compliant (document management).
- **R&R Insurance/Zywave Client Portal**: web-based client portal which allows you to receive information from our agency online and participate in Employee Benefits surveys to find out how you compare to others from around the country.

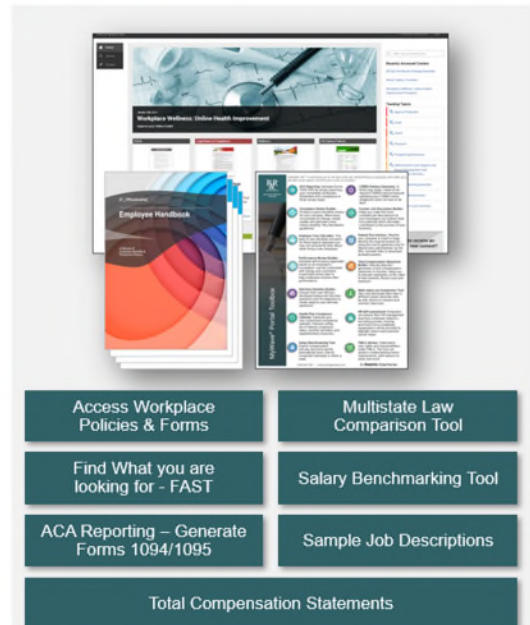
R&R / Zywave Benefit Client Portal

Client Portal delivering 24/7 expert guidance

R&R's Zywave Benefit Client Portal is an easy-to-use web-based self-service resource accessible 24/7 for clients.

Zywave allows fast and unlimited access to:

- Robust HR guidance
- Thousands of On-Demand Resource
- Employee Handbook
- Salary Benchmarking & Total Compensation Tools
- This service is 100% free for clients of R&R Insurance Services, Inc



R&R/Zywave Benefits Client Portal

Available 24/7, connecting you to services that can streamline your business and make your life that much easier—all with just a click of a button.

ACA Reporting Tool:
The ACA Reporting Tool, in conjunction with the 6055 and 6056 workbooks, is designed to help your organization fulfill the health coverage reporting requirements mandated by the Affordable Care Act.

Compliance Notice Builder:
Build customized compliance notices to meet key federal compliance deadlines associated with the health plans you provide to employees.

Multi-State Laws Comparison Tool:
The Multi-state Laws Comparison Tool will build a side-by-side comparison chart that features state labor laws that are relevant to you.

Federal Poster Advisor:
Determine which federal posters are required for your company in order to stay compliant with the Department of Labor (DOL).

FMLA Advisor:
Understand your company's rights and responsibilities under the federal Family and Medical Leave Act (FMLA).

COBRA Notices Generator:
Generate notices that will help you satisfy your COBRA notice obligations.

Health Plan Compliance Calendar:
Use the Health Plan Compliance Calendar to track key federal deadlines and access information and resources that will help you ensure compliance.

Salary Benchmarking:
The Salary Benchmarking Tool will generate a compensation report with annual or hourly compensation rates in every state for over 800 positions.

Sample Job Descriptions:
Use the Sample Job Descriptions Tool to find sample job descriptions that can help you when reviewing an employee's performance or to assist you in recruiting the best candidates.

Total Compensation Statement Builder:
The Total Compensation Statement Builder will create a personalized compensation statement for your employees using the benefit information entered.

Custom Job Description Builder:
Access a comprehensive library of job descriptions to help you attract and hire the best candidates.

Employee Cost Calculator:
Add up all of the overlooked and hidden expenses that contribute to the true cost of hiring a new employee.

HR Self-Assessment Tool:
Evaluate your company's existing HR practices and policies to identify areas for improvement.

Phone Interview Question Builder:
Build a customized set of phone interview questions to help you narrow your pool of job applicants.

In-Person Interview Question Builder:
Build a series of questions to help you learn more about a candidate during an in-person interview.

Performance Review Builder:
Create a professionally developed performance appraisal that will enable employees to achieve their potential and contribute to the success of your business.

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LEGAL UPDATE

HIGHLIGHTS

- The health FSA dollar limit increases to \$3,200 for plan years beginning in 2024.
- Employers may impose their own dollar limit on employee salary reduction contributions to health FSAs, up to the ACA's maximum.
- Employers should communicate their 2024 limit to employees as part of the open enrollment process.
- The limit on health FSA carryovers increases to \$640 for plan years beginning in 2024.

Health FSA Limit Increases for 2024

On Nov. 9, 2023, the IRS released [Revenue Procedure 2023-34](#) (Rev. Proc. 23-34), which includes the inflation-adjusted limit for 2024 on employee salary reduction contributions to health flexible spending accounts (FSAs). For plan years beginning in 2024, the adjusted dollar limit on employees' pre-tax contributions to health FSAs increases to **\$3,200**. This is a \$150 increase from the 2023 health FSA limit of \$3,050.

The Affordable Care Act (ACA) imposes a dollar limit on employees' salary reduction contributions to health FSAs. This limit started as \$2,500 for plan years beginning on or after Jan. 1, 2013, and has been adjusted for inflation for subsequent plan years. Employers should ensure that their health FSAs will not allow employees to make pre-tax contributions over \$3,200 for the 2024 plan year. Employers can impose a lower limit on employees' pre-tax contributions to a health FSA.

Employers should confirm that their health FSA contribution limit is included in the plan's documents and communicated to employees at enrollment time.

Pre-tax Contributions

The ACA's dollar limit applies only to employees' pre-tax contributions to a health FSA. Nonselective employer contributions to a health FSA (for example, matching contributions or flex credits) generally do not count toward the health FSA contribution limit. However, if employees may elect to receive the employer contributions in cash or as a taxable benefit, then the contributions must be treated as salary reductions and counted toward the health FSA contribution limit.

Per Employee Limit

The health FSA limit applies on an employee-by-employee basis. Each employee may only elect up to \$3,200 in salary reductions in 2024, regardless of whether they have family members who benefit from the funds in that FSA. However, each family member eligible to participate in their own health FSA has a separate limit. For example, a married couple who have their own health FSAs can both make salary reductions of up to \$3,200 for 2024, subject to any lower employer limits.

Health FSA Carryovers

As an exception to the use-or-lose rule, employees with health FSAs may allow employees to carry over a certain amount of funds remaining at the end of a plan year to reimburse eligible expenses incurred in the plan year immediately following. The maximum carryover amount is adjusted annually for inflation. For 2024, Rev. Proc. 23-34 increases the maximum carryover limit to \$640 (from \$630 for 2023). Employers that allow carryovers may impose their own limit that is lower than the maximum carryover limit.

1. What assistance does your team provide HR? **AND**
2. What support does your team provide our employees?

The customer service we provide to our clients is twofold; the service we provide to our Employer Group Human Resource leaders, and the services we provide to associates and their families. Initially, as part of our formal client Onboarding Process, your dedicated Employee Benefits Consultant and Service Team will work with your HR department to determine from a compliance standpoint any areas that may need attention. In addition, we will collaborate to develop an employee communication strategy that will best meet the needs of your organization. Ongoing support will come not only through email or phone contact but with regularly scheduled meetings during the plan year such as a quarterly claims review meeting with direction on potential programming or plan changes. Every year, R&R will conduct a review of the current benefits plan. The current plan offerings will be taken to market as well as obtaining alternative plan options.

Employee Education

Our employee meetings focus on benefit education. We abide by the theory that “*a benefit not understood is a benefit not appreciated.*” This is why we feel that the educational component to these meetings is essential to having employees understand and value the benefits they are offered. We assist with several different communication channels from a personalized Benefit and Enrollment Guide to customized video content and health care consumer tip sheets. Each of these documents is reviewed by your HR team prior to distribution for input.

Employee Advocacy

From an employee-centric support perspective, we make available to you an “Insurance Concierge Team” sheet that provides R&R contact information for the employee 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 an employee has a claim problem they cannot resolve, we work on their behalf to reach resolution. We work directly with the member which is important so that the Human Resource Department is not aware of any HIPAA protected private health information.

Case Study – Employee Support

Scenario: 282 employees

Member was experiencing unexplained pain and discomfort

Inpatient 4 days after having a CT Scan

Carrier denied claim as not medically necessary

Member was billed **\$43,824.45**

- R&R stepped in by contacting the carrier and the hospital billing office to put account on hold.
- Our office assisted with an appeal on behalf of the member with the carrier.
- We learned that the provider requested a retro prior authorization with the carrier.
- Our office tracked progress of the appeal and contacted the billing office and member with updates.
- Final outcome of the appeal: Carrier paid the allowed amount on the claim.

Final Member responsibility: **\$250.00 Emergency Room Copay**

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

- “Our R&R broker recently came and presented our annual benefits options to our staff. He communicates in a way that makes it **easy to understand** the material that can be complex. We **appreciate our partnership** with R&R Insurance!”
- “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!”
- “I just wanted to pass along my appreciation for my account manager during the open enrollment process. I had SO many questions for her and she was **incredibly patient and kind** each time she answered them. She was **wonderful to work with**. I was nervous about my first open enrollment process on my own and I was grateful to have my R&R service team as a resource.”
- “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 Insurance so far has been exemplary!! I look forward to a long-lasting working relationship!”
- “Please know how much we appreciated the support you provided this week regarding our employee enrollment issue. Not only were you incredibly responsive, but you did not spend time worrying about the fact that we had made the mistake and, instead, focused on putting action in place for an **expedited solution**. The employee was grateful as were we! This went **above and beyond**, and we feel lucky to have you on our team.”
- “Thank you so much for helping us meet our open enrollment deadlines AND for **supporting** our employee OE employee meeting needs so effectively this year! I have received very positive comments from employees regarding **your approachability** and the presentation quality—many noting that the information was **presented clearly/understandable**. Again, very happy that R&R Insurance is our new benefit broker partner! Talk soon!”

3. What will the broker support team look like?



Stephanie Riesch-Knapp | Employee Benefits Consultant

Stephanie is part of the third generation of the Riesch family actively involved in sales and leadership roles within R&R Insurance. Her significant experience in the property & casualty arena supports the agency's core objective to deliver Employee Benefits and Workers Compensation total risk solutions.



Ellen Dunn | Manager of Client Services

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

Taylor brings over 5-years of knowledge in the health and wellbeing 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 wellbeing program.



Pete Frittitta, MBA | Manager, Strategic Services and Compliance

Pete has more than 30-years of experience in group benefits. His value has been built on a foundation of industry experience that includes finance, operations, administration, market research, advertising, product development, and compliance.



Alyssa Bauer | Sr. Client Marketing Coordinator

Alyssa brings over 6-years of experience in the marketing industry and helps to provide clients with materials that are unique to them and in a way that they are best able to understand. This ranges from open enrollment materials, promotional flyers, email content and video content.



Molly Flynn-Johns | Director of Analytics

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.



Jedd Huntley | HR Tech & Systems Consultant

Jedd has over 19 years of professional industry experience in group benefit plan strategy and maintenance for fully insured and self-funded programs. In his role, Jedd is responsible for managing our benefit administration product suite, system builds and client transitions. He identifies and selects other technology products designed to improve client productivity and satisfaction while improving automation, operational efficiency, and productivity. His passion is technology!



Christine Krueger, HCSA | Claims Specialist

Christine brings over 34-years in health insurance industry experience and strives to develop personal relationships with your employees to help them navigate through their escalated healthcare issues. Christine is your liaison for billing questions, eligibility and enrollment questions, and benefit/policy interpretation—serving as a tremendous resource for your employees.



Liz Johnson | Medicare Specialist

Liz has over 15-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.



David Lancaster, CEBS, CLU | Executive Vice President of Employee Benefits

Dave brings more than 30-years of insurance experience in managing insurance operations, agency relationships, and team development.

R&R's Employee Benefits Practice Leader as well as our Manager of Client Services monitor the caseload of each team assigned to each client partner. They closely manage the workload of our team members to ensure exceptional, high-quality service is provided to each of our clients. Our focus is not to populate a scorecard with a certain number of clients or hours at specific levels, but instead we focus on the relationship, needs and complexity of each account.

In terms of allotted time, this varies because our method of relationship development during the Onboarding Process and renewal activity work requires more time than the continuation of plan monitoring and partner meetings during other months. As you will see in our client testimonials, high quality, high-touch service throughout the year is how we operate. Our resource team is all located within our Waukesha office bringing local service directly to the Zero Zone team and your employees. We believe that assigning a set number of hours to a client would limit our ability to provide this type of stellar service and expertise.

[illegible]

1. What is your approach to 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 Benefit 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. Pete has over 30-years of experience in the employee benefits field including management roles at UnitedHealthcare. He also supports our Client Data Analytics area which puts him in a unique position to best understand our customer's needs and what their exposure and options are in the post-reform era.

R&R Insurance can provide compliance guidance in the following legal areas with resource support as detailed:

COBRA:

R&R Insurance Proprietary Employer Guide to COBRA, Compliance Overviews, COBRA State Guidelines, COBRA Benefits Policy Template, COBRA Election Form, COBRA Notice Form, Q&A Briefs, Access to best-in-class third party COBRA administrators

HIPAA:

InsurLink Document Management System, HIPAA Privacy & Security Employer Toolkit, Compliance Overviews, Model HIPAA Notice, Q&A Briefs, "Know Your Benefits" Employer to Employee Communications

Cafeteria Plan/Section 125:

Compliance Overviews, Salary Reduction Agreement Form, Election Form, Enrollment Form, Change Request Form, Q&A Briefs, Access to best-in-class third party Section 125 administrators

ERISA:

ERISA Compliance Kit (includes Summary Plan Descriptions for each plan, ERISA Notices, and deadlines, etc.), Employer's Guide to Understanding Fiduciary Responsibilities, DOL Audit Guide, DOL Audit Checklist, Compliance Overviews, Wrap Document

FMLA:

Employer Guide to FMLA, FMLA Policy Template, DOL Poster, Notice Form, Request Form, Provider Certification Form, Sample Letters, Compliance Bulletins and Overviews, Access to best-in-class third party FMLA administrators

ACA/Healthcare Reform Law:

ACA Updates and Overviews, ACA Checklists (Various), ACA Guides (Various), "Know Your Benefits" Employer to Employees Communications, FAQ Briefs, Form 1094-C/1095-C Employer Reporting Tools (training video, tracking tool, and report generation for paper filing with IRS), Proprietary "Affordability" Safe Harbor Analyzer, Various Other ACA Calculators, Analysis/Response assistance with IRS Letter 226-J proposed ACA employer penalties (ESRP)

Within our Practice, Pete Frittitta, Manager of Client Strategic Services, is responsible for consultations on health and welfare compliance. His experience and guidance have proven invaluable to our clients when it comes to navigating the challenges of health care reform.

Case Study – Compliance Support

Scenario: 1,157 employees

Employer facing a \$560k IRS penalty for ACA filings

Assisted employer prior to R&R being their broker

- R&R stepped in by identifying the errors
- Incorrect codes submitted by third party reporting
- Incorrect allocations across aggregated control groups by the IRS
- Other IRS errors for "reasons unknown"
- Our compliance team assisted with the refileing

Final Employer responsibility: Penalty was reduced to \$11,000

2 IRS L226-J & L5699 – Client Assistance

Date Completed	Client	Tax Year	Penalty Type	Original Fine	Final Outcome	R&R Value	% Savings
12/6/2017	Client #1 (Restaurants)	2015	\$4980H	\$ 62,227	\$ 1,300	\$ 60,927	98%
2017 TOTAL SAVINGS				\$ 62,227	\$ 1,300	\$ 60,927	98%
3/28/2018	Client #2 (Mfg. Sector - Leather Tannery)	2015	\$4980H	\$ 118,213	\$ -	\$ 118,213	100%
5/23/2018	Client #3 (Bus. Svc. Sector - Temporary Staffing)	2015	\$4980H	\$ 83,373	\$ 3,467	\$ 79,906	96%
11/2/2018	Client #2 (Mfg. Sector - Leather Tannery)	2016	\$4980H	\$ 136,080	\$ -	\$ 136,080	100%
11/19/2018	Client #4 (Sporting Goods)	2016	\$4980H	\$ 32,940	\$ -	\$ 32,940	100%
2018 TOTAL SAVINGS				\$ 370,606	\$ 3,467	\$ 367,139	99%
1/8/2019	Client #5 (Public Schools K-12)	2016	\$4980H	\$ 571,860	\$ 11,610	\$ 560,250	98%
5/23/2019	Client #6; 2 units (Assisted Living Facilities)	2016	\$4980H	\$ 41,040	\$ 24,120	\$ 16,920	41%
11/4/2019	Client #7 (Landscape Contractor)	2017	\$4980H	\$ 18,080	\$ -	\$ 18,080	100%
11/5/2019	Client #8 (Nonresidential Building Construction)	2017	\$4980H	\$ 124,300	\$ -	\$ 124,300	100%
11/20/2019	Client #2 (Mfg. Sector - Leather Tannery)	2017	\$4980H	\$ 133,340	\$ -	\$ 133,340	100%
12/9/2019	Client #9 (Landscape Contractor)	2017	\$4980H	\$ 75,710	\$ -	\$ 75,710	100%
12/16/2019	Client #10 (Education & Training Services)	2017	\$4980H	\$ 122,040	\$ 12,995	\$ 109,045	89%
2019 TOTAL SAVINGS				\$ 1,086,370	\$ 48,725	\$ 1,037,645	96%
4/1/2020	Client #11; 2 Units (Hospital)	2017	\$4980H	\$ 98,781	\$ 4,803	\$ 93,978	95%
7/30/2020	Client #12; 3 Units (Auto Dealerships)	2017	\$4980H	\$ 12,430	\$ 7,628	\$ 4,803	39%
6/24/2021	Client #13; 4 Units (Restaurants)	2017	\$4980H	\$ 401,715	\$ -	\$ 401,715	100%
2020 TOTAL SAVINGS				\$ 512,026	\$ 12,431	\$ 500,496	98%
4/21/2021	Client #11; 2 Units (Hospital)	2018	\$4980H	\$ 235,283	\$ 3,480	\$ 231,803	99%
5/3/2021	Client #14 (Mfg. Sector - Plastics)	2018	\$4980H	\$ 155,437	\$ -	\$ 155,437	100%
6/17/2021	Client #15 (Commercial Printing)	2018	\$4980H	\$ 113,678	\$ 3,480	\$ 110,198	97%
8/23/2021	Client #12; 2 Units (Auto Dealership)	2018	\$4980H	\$ 17,690	\$ 8,990	\$ 8,700	49%
9/10/2021	Client #13; 3 Units (Restaurants)	2018	\$6721&2	\$ 798,930	\$ -	\$ 798,930	100%
2021 TOTAL SAVINGS				\$ 1,321,018	\$ 15,950	\$ 1,305,068	99%
1/11/2022	Client #16 (Mfg. Precision Machine Parts)	2019	\$4980H	\$ 32,916	\$ -	\$ 32,916	100.0%
1/18/2022	Client #17 (Restaurants)	2019	\$4980H	\$ 103,748	\$ -	\$ 103,748	100.0%
2/4/2022	Client #18 (Personnel Services)	2019	\$4980H	\$ 23,750	\$ -	\$ 23,750	100.0%
2/4/2022	Client #19 (Transportation Services)	2019	\$4980H	\$ 1,757,472	\$ -	\$ 1,757,472	100.0%
3/1/2022	Client #11; 2 Units (Hospital)	2019	\$4980H	\$ 186,247	\$ 3,750	\$ 182,497	98.0%
4/12/2022	Client #20 (Food/Beverage Products)	2019	\$4980H	\$ 847,486	\$ -	\$ 847,486	100.0%
6/2/2022	Client #10 (Education & Training Services)	2019	\$4980H	\$ 5,938	\$ 5,938	\$ -	0.0%
10/25/2022	Client #21 (Child Day Care Services)	2019	\$4980H	\$ 5,313	\$ -	\$ 5,313	100.0%
11/18/2022	Client #22 (Residential Care Services)	2020	\$4980H	\$ 965,264	\$ -	\$ 965,264	100.0%
12/19/2022	Client #19 (Transportation Services)	2020	\$4980H	\$ 1,554,874	\$ -	\$ 1,554,874	100.0%
2022 TOTAL SAVINGS				\$ 5,483,008	\$ 9,688	\$ 5,473,320	99.8%
1/12/2023	Client #20 (Food/Beverage Products)	2020	\$4980H	\$ 881,524	\$ 1,930	\$ 879,594	99.8%
1/18/2023	Client #21 (Child Day Care Services)	2020	\$4980H	\$ 12,867	\$ -	\$ 12,867	100.0%
3/3/2023	Client #13; 1 Unit (Restaurants)	2020	\$4980H	\$ 5,468	\$ 5,468	\$ -	0.0%
2023 TOTAL SAVINGS TO DATE				\$ 899,859	\$ 7,398	\$ 892,461	99.2%
TOTAL SAVINGS ACCOMPLISHED TO DATE (Excludes "In Progress")				\$ 9,736,014	\$ 98,958	\$ 9,637,056	99.0%

The things we find for our clients...

Peace of mind?...Priceless!

\$ 9,637,056

Client Communication Example:

R&R clients received the Compliance Alert pictured below with a downloadable guide that easily lays out the pertinent information around the information required for the Prescription Drug Data Collection (RxDC) Reporting. The embedded guide is updated regularly upon receiving new information and deadlines.



Prescription Drug Data Collection (RxDC) Reporting

You may have received a request from either your insurance carrier or your third party administrator (TPA) regarding information that is required for the Prescription Drug Data Collection (RxDC) Reporting. Before you consider stopping to read the rest of this article, please note that the RxDC Reporting compliance requirements applies to **all** employer-sponsored medical plans, regardless of employer size and regardless of funding. This means fully-insured, level-funded, self-funded, and ASO (Administrative Services Only).

This will continue to be annual compliance requirement.

While we communicated details last October regarding this new annual requirement, following are some key points and updates that are outlined in this, [easy-to-follow guide](#).

Available Resources

[CMS Prescription Drug Data Collection \(RxDC\) Reporting Instructions](#)

[Quick Reference Guide](#)
Includes information on how to register with HIOS

[CMS Prescription Drug Data Collection \(RxDC\)](#)

[WEBINAR: Trends & Prescription Drugs \(3/14\)](#)

[The Advantages of Combining Ergonomics & Wellbeing](#)

[Prioritizing Mental Health](#)

DOWNLOAD NOW!

Prescription Drug Data Collection (RxDC) Reporting

INSURANCE

Deadline	Method/Process
10/1/2023	Employer needs to complete survey and submit to Assurex by 10/1/23. They will submit data to CMS for full-report and deliver. Self-funded (ASO) clients need to submit the data to CMS directly by 10/1/23 through HIOS portal.
N/A	They will submit premium data and report to CMS for full-report and deliver. Self-funded (ASO) clients need to submit the data to CMS directly by 10/1/23 through HIOS portal.
N/A	They will aggregate and report data to CMS via Assurex on an ongoing data gathering method.
N/A	N/A

2. What does your compliance support calendar look like?

An HR compliance calendar is a valuable tool to help your business stay on track with key employment-related deadlines throughout the year. Our clients have several resources at their disposal to help plan and administer different time-sensitive compliance deadlines. Our ERISA Compliance Kit provides deadlines and linked documents related to initial and annual notice requirements.

Initial and Annual Employer Compliance Notices					
	Summary Plan Description (SPD)	Summary of Benefits and Coverage (SBC)	Women's Health & Cancer Rights Act (WHCRA) Annual Notification	Medicare Part D Notice (Creditable or Non-Creditable Coverage)	Initial COBRA Notice
What to Distribute					
Notice descriptions and templates	Contact your R&R Client Service Manager for additional information	Provided by insurance company or administrator	WHCRA Model Notice	Model Notice of Creditable Part D Coverage (PDF) Model Notice of Non-Creditable Part D Coverage (PDF)	Model Initial COBRA Notice (MS Word)
Criteria					
Plan sponsorship	Any group plan subject to ERISA *	Group health plan or health reimbursement arrangement (HRA) plan	Group health plan	Group health plan	Group health, health reimbursement arrangement (HRA), dental, vision or flexible spending account plan
Who Receives It					
Notice is provided to:	Enrolled employees	Employees Eligible for the health plan	Enrolled employees	Medicare-eligible employees enrolled in the health plan **	Enrolled employees and dependents
When to Distribute					
To newly-hired employee:	-	-	-	-	-
To newly-eligible Employee:	Within 90 days of enrollment	By eligibility date Within 90 days of enrollment	Upon enrollment	Upon enrollment	Within 90 days of enrollment
Annually:	Within 30 days of plan renewal ***	Within 30 days of plan renewal, not to exceed 7 days after the renewal date	Within 30 days of plan renewal	Prior to October 15th (Medicare Part D Annual Election Period)	-
Upon Request:	Within 30 days	Within 7 days	-	As soon as possible	-
Additional Times:	• Within 120 days of new plan implementation • Within 230 days after end of plan year in which Material Modification occurred • Within 60 days of adoption of implementation of reduction in benefits	• Within 60 days prior to the effective date in which Material Modification occurred (only applies for mid-plan year changes) • Within 7 days after the effective date of plan change or carrier change	-	Immediately, when the employer no longer offers prescription drug coverage, or the creditable/non-creditable status changes.	-

* Employer-sponsored plans subject to ERISA include health, health reimbursement arrangements (HRA), dental, vision, life, accidental death & dismemberment (AD&D), disability, critical illness, accident, flexible spending accounts, and pre-tax premium plans.
** Distribution to all enrolled employees is recommended.
*** Recommended but not required.

(SEE LEGAL DISCLAIMER ON PAGE 2)

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Initial and Annual Employer Compliance Notices					
	Children's Health Insurance Program (CHIP) Annual Notification	Special Enrollment Notice/ HIPAA Special Enrollment Rights Notice	Newborns' Act Disclosure	Wellness Program Notice	Health Insurance Marketplace/ FLSA Notice
What to Distribute					
Notice descriptions and templates	CHIPRA Model Notice (PDF)	HIPAA Special Enrollment Model Notice	Newborns' Act Model Notice Disclosure	Wellness Program Model Notice	FLSA Model Notice for Employers that Sponsor a Health Plan (MS Word) FLSA Model Notice for Employers that do NOT Sponsor a Health Plan (MS Word)
Criteria					
Plan sponsorship	Group health plan	Group health plan	Group health plan	Wellness program (requiring an individual to satisfy a health factor standard)	No specific plan sponsorship applies, but employer is subject to the Fair Labor Standards Act (FLSA)
Who Receives It					
Notice is provided to:	Every employee	Employees Eligible for the health plan	Enrolled Employees	Enrolled Employees	Every employee
When to Distribute					
To New Hire:	Upon new hire start date	-	-	-	Within 14 days of new hire start date
To newly-eligible Employee:	-	On or before the date employee is offered coverage	-	-	-
To Newly-enrolled Employee:	-	-	Upon enrollment	Prior to employee participation in Wellness Program Within 30 days of plan renewal	-
Annually:	During the medical plan renewal	During the medical plan renewal	Within 30 days of plan renewal	-	-
Upon Request:	-	-	-	-	-
Additional Times:	-	-	-	-	-

Disclaimer: The content in this chart and any hyperlinked documents are not intended to be exhaustive. They are intended to be used for informational purposes only and do not constitute legal, tax, accounting or other professional advice, opinions or services. When needed, contact your legal counsel or other service professional for assistance and clarifications.

R&R has provided certain hyperlinks for your convenience but does not control the third party websites and is not responsible for the content, links, privacy policy, or security policy of other websites. The user specifically acknowledges that R&R is not liable for any damages that result from accessing these websites. Since R&R is not responsible for the availability of these outside resources or their contents, you should direct any concerns regarding any external link to its site administrator or Webmaster.

R&R Insurance Services, Inc. / 2023

Page 2

Our R&R/Zywave Client Portal includes several apps including a “*Health Plan Compliance Calendar*” build and track customized plan year-based deadlines and federal deadlines.

Health Plan Compliance Calendar

Use the Health Plan Compliance Calendar to track key federal deadlines and access information and resources that will help you ensure compliance.

Launch

Upcoming compliance deadlines

Manage your compliance deadline reminders and create compliance notices.

Month	Day	Deadline	Mark complete	Create notice
DEC	28	Summary of Material Modifications - No Material Reductions 2023 - 2024 Plan Year	<input checked="" type="checkbox"/>	Create notice
DEC	31	Gag Clause Attestation 2023 - 2024 Plan Year	<input checked="" type="checkbox"/>	Create notice
JAN	31	Form W-2 (Including Health Plan Costs) 2023 - 2024 Plan Year	<input checked="" type="checkbox"/>	Create notice
FEB	28	Section 6055/6056 Reporting (Paper Filing Deadline) 2023 - 2024 Plan Year	<input checked="" type="checkbox"/>	Create notice
MAR	01	Section 6055/6056 Individual Statements 2023 - 2024 Plan Year	<input checked="" type="checkbox"/>	Create notice

Previous deadline

Next deadline

Create compliance notices

Create compliance notice packet

December 2023

Sun	Mon	Tue	Wed	Thu	Fri	Sat
26	27	28	29	30	1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31	1	2	3	4	5	6

Additionally, our R&R/Zywave Client Portal includes several “Content on Command” compliance tools such as an “*HR Compliance Calendar*.” The calendar features a month-by-month summary of key compliance deadlines and helpful reminders for compliance tasks to complete throughout the year. It also describes dynamic compliance tasks, which only occur when certain events happen, to help you anticipate those deadlines.

While the sample below shows only the month of January for a calendar-year plan, R&R can customize this document for Zero Zone based on its June 1st Plan Year.

January 2024

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

KEY DEADLINES:

A Jan. 31, 2024—File and Furnish Forms W-2
File [Form W-2](#) with the IRS by Jan. 31, 2024. If your company made payments totaling \$600 or more for services performed by nonemployees, such as independent contractors, in 2023, a 30-day filing extension may be requested by using [Form 8879](#), but extensions will only be granted in limited cases for extraordinary circumstances or catastrophes. Forms W-2 must also be furnished to employees on or before Jan. 31, 2024.

B Jan. 31, 2024—File and Furnish Forms 1099-NEC, Nonemployee Compensation
File [Form 1099-NEC](#) with the IRS by Jan. 31, 2024, if your company made payments totaling \$600 or more for services performed by nonemployees, such as independent contractors, in 2023. A 30-day filing extension may be requested by using [Form 8879](#), but extensions will only be granted in limited cases for extraordinary circumstances or catastrophes. Companies must also furnish statements to the nonemployees on or before Jan. 31, 2024.

C Jan. 31, 2024—File Form 941, Employer's Quarterly Federal Tax Return
File [Form 941](#) with the IRS by Jan. 31, 2024, to report the federal income tax, social security tax and Medicare tax you withheld from your employees' pay during the fourth quarter of 2023 (October, November and December). If your company timely deposited all taxes when they were due, the filing deadline is extended to Feb. 10, 2024. However, since Feb. 10, 2024, is a Saturday, the extended deadline is the next business day, which is Feb. 12, 2024.

D Jan. 31, 2024—File Form 940, Employer's Annual Federal Unemployment (FUTA) Tax Return
File [Form 940](#) with the IRS by Jan. 31, 2024, to report taxable FUTA wages paid in 2023. If your company deposited all its FUTA tax when it was due, the filing deadline is extended to Feb. 10, 2024. However, since Feb. 10, 2024, is a Saturday, the extended deadline is the next business day, which is Feb. 12, 2024.

COMPLIANCE REMINDERS
As 2024 begins, review your company's compliance with federal, state and local employment laws, including any new requirements. This review should include:

- Checking that workplace posters are up to date.
- Verifying minimum wage and overtime requirements and updating the wage base limit for withholding.
- Reviewing procedures for completing Form I-9 (Employment Eligibility Verification).
- Confirming employee leave policies are consistent with federal, state and local leave requirements.
- Reviewing any new fair employment law protections and incorporating changes into employee training.
- Updating the employee handbook and employment policies as necessary.
- Making a schedule for any required workplace training, such as sexual harassment training.
- Reviewing recruitment and compensation practices to ensure they are consistent with any applicable pay transparency laws.

Presented by R&R Insurance Services

Our clients experience several advantages partnering with R&R over our competitors. They include but are not limited to the following:

- Industry expertise. The Benefit Team assigned to Zero Zone has decades of experience helping organizations navigate the complicated world of healthcare and employee benefits.
- Second to none, education, and communication skills. Including a customized Benefit and Enrollment Guide that is mobile friendly with valuable links to educational videos, carrier materials and R&R Insurance service team contacts.
- Consistent communication with Zero Zone via regular meetings, reports, and other updates.
- Dedicated Concierge Team for employees to reach out to directly for benefit assistance.
- Internal, online benefit enrollment platform and expertise with Employee Navigator enrollment platform.
- Access to our internal Communication and Marketing team to assist with creating customized communication materials.
- Internal Medicare unit to assist employees and/or spouses or parents as they approach Medicare age.
- Access to our Wellbeing unit to help create, implement, and assist in managing effective wellbeing programs.
- Interaction with our internal Analytics team; monthly reporting, quarterly data analysis, Board ready materials, and funding analysis.
- Green room technology – Communication is key to understanding benefits. R&R Insurance has invested in video creation capabilities which allow us to customize videos for clients. In addition, our internal marketing team can help create education materials crafted to Zero Zone's needs.
- Local presence – R&R Insurance invests, works, and plays in the communities we serve. We have a vested interest in the success of Zero Zone.
- Privately held/third generation – Quick and nimble decision making – We are not beholden to shareholders.
- Trusted source for conducting educational seminars on various benefit topics including sessions for SHRM accredited credits. In 2023, we provided education on Pharmacy Cost Control measures, Mental Health & Wellbeing, Medicare, funding mechanisms and more.
- 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.

As previously mentioned, at R&R we see our role as a trusted advisor and extension of the Zero Zone team. The services we would provide as either a broker or consultant are the same as represented in our attached Scope of Services in our Service Agreement. To recap some of our differentiating services we can provide are as follows:

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 15th 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 15th 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

Liz Johnson
Medicare Specialist
Liz.Johnson@rrins.com
262.696.5077

Scan to launch digital resources!

NIA W23900 Stone Ridge Drive
Waukesha, WI 53188
MyKnowledgeBroker.com | 800.566.7077

R&R
INSURANCE
The knowledge brokers™



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 third-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, wellbeing 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 Zero Zone's future claim liability by successfully redirecting costs off the Employer sponsored health plan, onto Medicare.

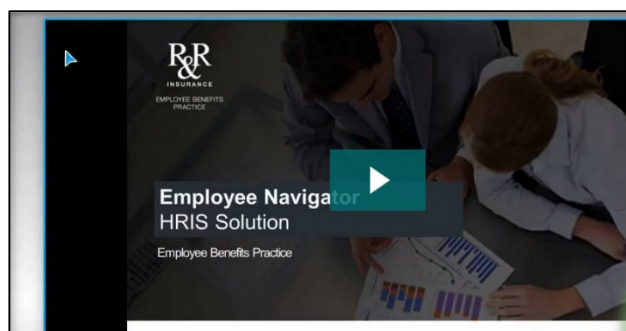
SHRM Recertification Provider: R&R is recognized by the Society for Human Resource Management (SHRM) to offer professional development credits (PDCs) for the SHRM-CP® or SHRM-SCP®. Our in-house resources offer several compliances related PDC accredited webinars throughout the year. R&R will also be speaking 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 wellbeing 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.

Employee Navigator/ALEX®: 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.



Carrier Integration: By capitalizing on our technology expertise and carrier relationships, our Benefit Systems Manager, Jedd Huntley, helps coordinate EDI feeds and carrier integration tools to reduce and often eliminate manual entries on carrier portals and Employee Navigator. This not only saves time, but it reduces enrollment and payroll deduction errors.

Onsite/Near-site Clinics: Our Strategic Wellbeing Consultant, Taylor Hahn, has extensive experience working with organizations on a multitude of levels from the very basic to robust, onsite clinics with claim data coordination. Taylor has assisted with selection of vendors, designed challenges, and participated on wellbeing committees. We have implemented direct billing at discounted rates to reduce claims for a self-funded partner, as well as bundled pricing for certain procedures.

FEE STRUCTURE

1. What is your fee design and how is it structured?

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.

Additionally, we remain open to discussing and considering any other options with Zero Zone 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.

2. How are you compensated for additional and/or innovative services, i.e., Open Enrollment Support, Wellness and other benefit related programming, employee cost reduction programs?

R&R Insurance does not have any charge for conducting employee meetings and/or enrollment meetings. Any services and/or costs not included in the fee are footnoted therein. 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. R&R's consulting services contract is priced on an annual fee basis and is payable in monthly installments.

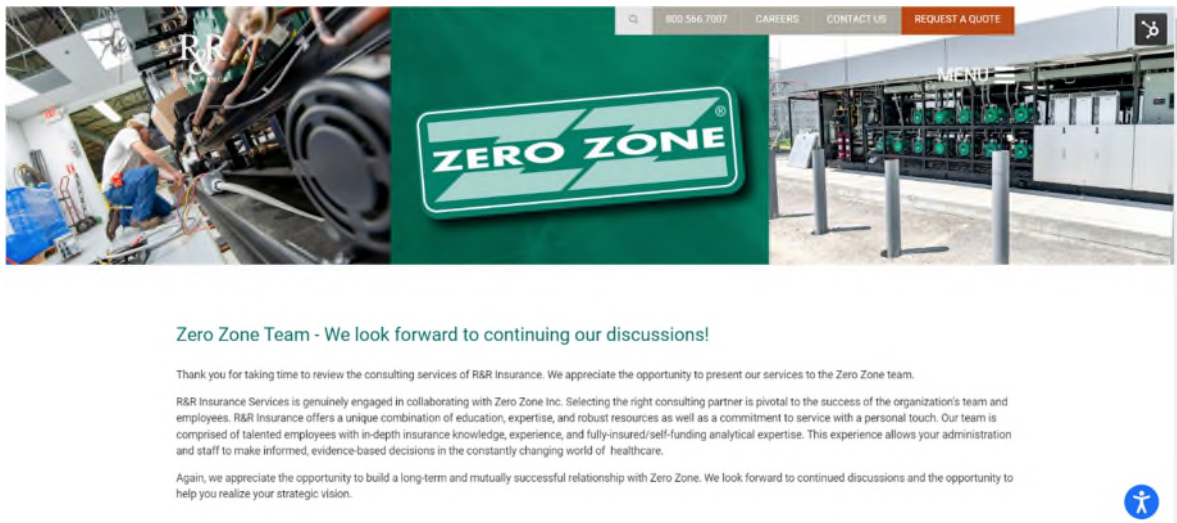
At R&R Insurance, we have our client's financial interest in mind by implementing full-disclosure commission or fee models so that our clients can trust that we, as your Broker of Record, always act in a professional and ethical manner and do not make decisions based on potential commission incentives.

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.



Bringing Value to Zero Zone Inc. - Examples

 <p>Wellness</p> <p>Healthy Eating - Wellbeing Videos Taylor Hahn</p>	 <p>Virtual Open Enrollment Options</p> <p>Learn the ins and outs of your benefits program via your laptop or mobile device with our virtual open enrollment videos.</p>	 <p>Employee Navigator</p> <p>Learn more about how Employee Navigator has all your benefit administration needs in one place.</p>
 <p>Compliance Overview</p> <p>R&R made a business decision early on in the process to establish an in-house expert and resource to be available to our partners as Healthcare Reform moved from concept to reality. Within our Practice, Pete Priftita, Manager of Client Strategic Service & Compliance is responsible for consultations on health and welfare compliance. Watch this short video to learn more about Pete and how helps our clients stay compliant.</p>	<p>Green Screen Technology</p> 	
 <p>Hospital Price Transparency</p> <p>Hospital price transparency helps Americans know the cost of a hospital service before receiving it. Each hospital operating in the U.S. is required to provide clear, accessible pricing information online about the items and services they provide.</p> <p>Watch the video pictured left to learn more information.</p>		<p>Do you know how to use your benefit program to attract and retain your employees?</p> <p>we know</p>

Trace-A-Matic

Shari Skopek | Senior Human Resource Manager

P: 262-641-6713

E: sskopek@traceamatic.com

Full Time Employees: 288

Wellpoint Care Network

Sonja Williams, MS, PHR, SHRM-CP | Vice President of Human Resources

414-465-1351

sonja.williams@wellpointcare.org

Full Time Employees: 334

New client effective 8/1/2023

School District of Kettle Moraine

John Stellmacher | Chief Financial Officer

P: 262-968-6300 Ext. 5303

E: StellmacherJ@KMSD.edu

Full Time Employees: 423

