

2024 – WAUWATOSA SCHOOL DISTRICT

REQUEST FOR PROPOSAL



WAUWATOSA SCHOOL DISTRICT
Your Educational Community



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Executive Summary

As the consulting team dedicated to the Wauwatosa School District, we understand the District 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 the Wauwatosa School District a “Best in Class” district to teach in and achieve its mission to **“Serve as active advocates to promote equitable access to excellent academic, co-curricular, and social-emotional learning opportunities that empower every student to thrive.”**

R&R Insurance Services, Inc. (R&R Insurance) is genuinely engaged in collaborating with Wisconsin schools. Selecting the right consulting partner is pivotal to the success of the Wauwatosa School District administrative team, School Board, and employees. R&R Insurance offers a unique combination of expertise, and 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 the Wauwatosa School District 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 the Wauwatosa School District. We look forward to continued discussions and the opportunity to help you realize your strategic vision.

Based on your experiences of working with Paul Lessila and his service team regarding the District’s property and casualty insurance, it’s evident that R&R provides top-quality resources and expertise. You’ll find that our Benefits Division and the team assigned to the Wauwatosa School District follow the same structure: We are school industry experts, specializing in self-funded programs, helping districts offer sustainable benefit packages that are fiscally responsible, and we are ready to partner with you!



1. Provide a brief history, including the number of years of experience your firm has in providing health and welfare services.

R&R was established in 1975 with five original owners. After 48 years in business, R&R Insurance continues to grow under the leadership of Ken Riesch. A third generation of owners is furthering perpetuation plans and continuing its commitment to the future of our organization. R&R is fiercely independent and we're not for sale. Our growth model is focused on organic growth and community partnerships. This is unlike many other agencies in the state. Our corporate headquarters, located in Pewaukee, features state-of-the-art technology, a training facility, and contemporary amenities. This office space has provided enhanced collaboration amongst employees while supporting R&R Insurance's already high-quality standards of service. In addition, we have offices located in West Bend and Neenah.

Our goal is to promote a customer-focused culture while growing profitably and supporting the communities in which we serve, live and work.

R&R operates as a full-service agency with five comprehensive, strategic business units:

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

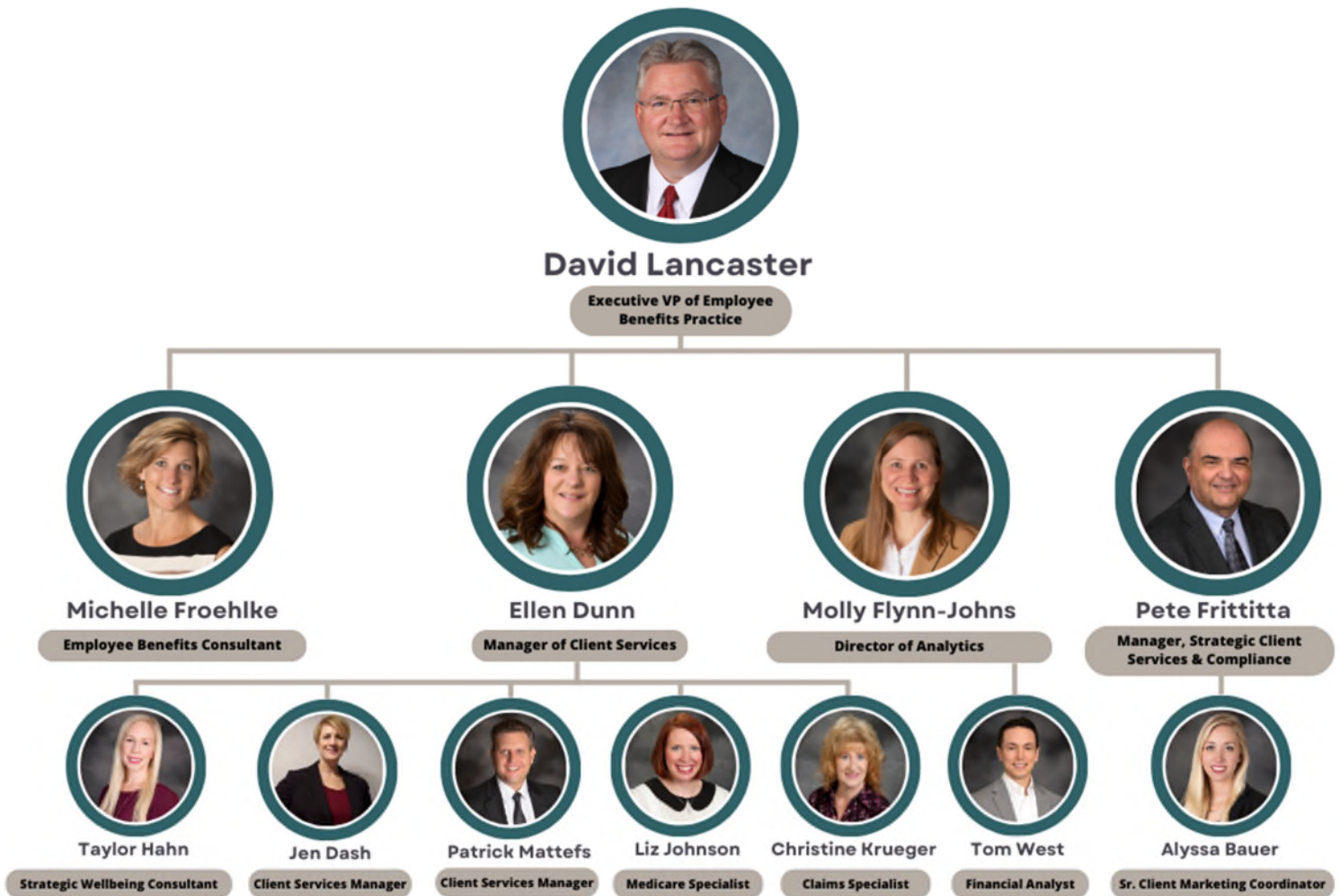
Our team of nearly 215 insurance professionals has helped us grow and become the largest independent agency in Wisconsin, as well as one of the largest agencies serving the needs of businesses and individuals in the Midwest. *R&R is an organization dedicated to giving superior service to our customers. By building and valuing a team based on honesty and respect, all customers, internal and external, will be rewarded with peace of mind- our final product.* Like the Wauwatosa School District, R&R believes in "collective excellence."

We are committed to the managed expansion of the agency through continuous quality improvement, by using the collective talents of our employees, and all of the Company's resources as an independent insurance agency. With this as an agency focus, we will provide the continued profitable growth of the agency and enjoy the satisfaction that comes with successful careers in professional service to our customers.

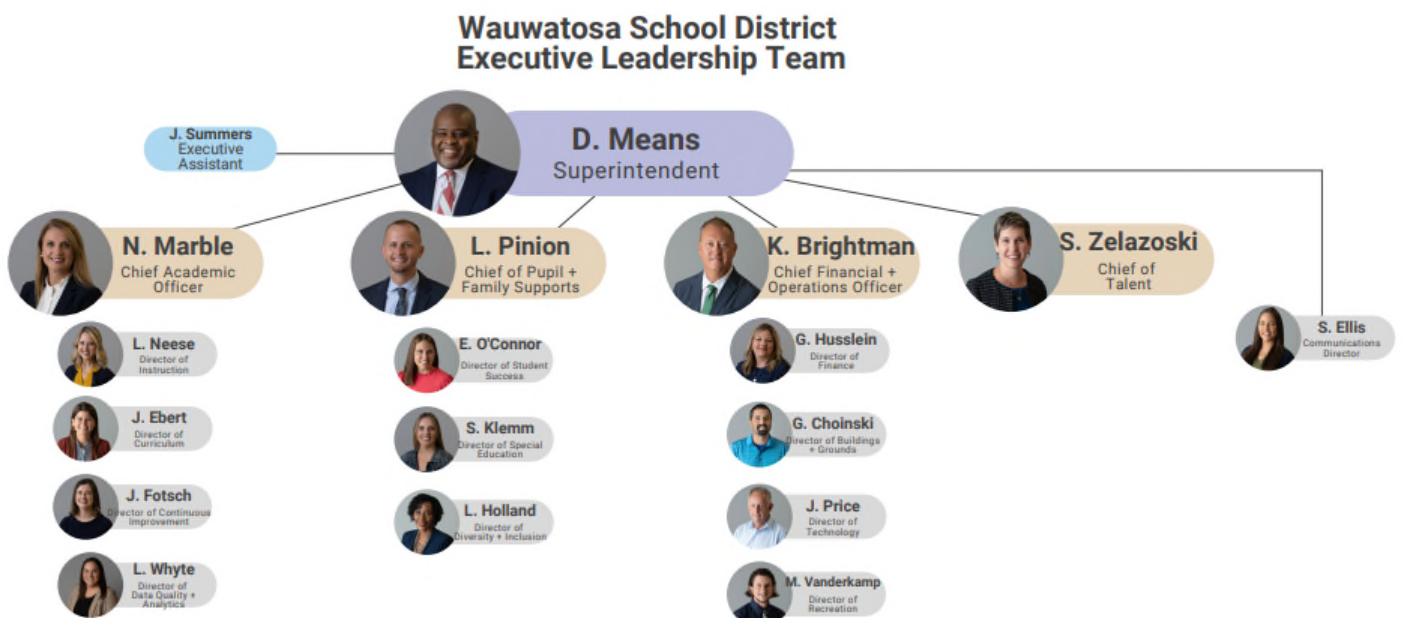
We are also one of the largest agencies serving the needs of school districts, businesses, and individuals in the Midwest. We serve close to 20,000 customers including over 60 school districts and 1,000 Employee Benefits group clients. Our size allows us the ability to remain responsive to technology, utilize innovative solution-based resources, and consistently do what is necessary to obtain and retain customers while helping them optimize their benefits programs.

Additionally, R&R Insurance is a member of Assurex Global™, which is a consortium of 100 of the largest independent brokers across the world. Our partnership provides expansive local and regional market intelligence, cost information, and availability of additional physical presence if ever needed. Being part of Assurex Global Education Practice Group provides extensive insight into trends and best practices in education. Our status of being the largest independent insurance agency in the state, with offices in southeast Wisconsin, the Fox Valley, and Green Bay along with being part of Assurex Global™, positions R&R Insurance as a local firm with national clout. ***R&R Insurance is an independent broker and is not affiliated with or owned by any insurance company, third party administrative agency or provider network and we are not for sale!***

Wauwatosa School District Employee Benefits Organizational Chart



Wauwatosa Leadership Team



2. Provide the total number of employees directly involved in providing health and welfare services.

R&R has a team of 215 insurance professionals that have helped us grow to become the largest independent agency in Wisconsin, as well as one of the largest agencies serving the needs of businesses and individuals in the Midwest.

The **Employee Benefits Practice** has been a major part of our Agency since its inception in 1975; We are approaching 50 highly experienced and licensed Benefits professionals with a proven track record of exceeding the needs of our customers.

We continue to make significant investments in talent, technology and training to remain at the forefront of change within the increasingly complex environment of Employee Benefits. We ensure customer satisfaction by providing our clients with dedicated licensed representatives who understand the intricacies of their specific employee benefit plans.

3. Provide a description of your firm's service philosophy.

R&R Insurance Services, Inc. is an organization dedicated to giving superior service to our customers. By building and valuing a team based on honesty and respect, all customers, internal and external, will be rewarded with peace of mind - our final product. Our service philosophy is completely engineered to make administering your benefits an easier process. We do this by providing consultants who educate clients on the marketplace and innovative trends to assist them with their benefit planning efforts. We have a high-touch service philosophy, acting as an extension of your leadership, HR, and benefits team.

R&R Insurance philosophy is to do what we say we are going to do and provide excellent customer service. We know that you entrust us to take care of your teachers and staff. R&R Insurance takes that trust seriously. It starts with our client management team. They act as an advocate for employees in the event that a claim is not being processed accordingly. Should an employee need assistance with a claim appeal, we also have in-house experts who have successfully won hundreds of appeals.

Perhaps the most important function of the client service team is to respond to employer and employee questions about the plan, then escalate and resolve administrative and claims issues as they arise. Our client service structure reflects that importance, and a dedicated resource will be assigned to provide the WSD with these specific services. Each member of your client service team is capable of resolving an issue and will take ownership of the task at hand.

In addition, as we map out short and long-term strategies with the WSD leadership team, our philosophy is to continually monitor the strategies to make sure they are accomplishing what they are supposed to do. It is a critical part of our philosophy as this helps us provide the quality assurance that the District expects from its partners.



Wauwatosa School District

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

Your Patient Advocate Team will work directly with you to:

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

Call or email us for help with any of your insurance questions. We are happy to help!



the knowledge brokers®



Your Patient Advocate Team



Michelle Froehke, CSFS, WELCOA
Employee Benefit Consultant
Michelle.Froehke@rrins.com
Phone & Fax: 920.931.3262



Jen Dash
Client Service Manager
Jen.Dash@rrins.com
Phone & Fax: 920.931.3266



Christine Krueger, HCSA
Claim Specialist
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4. Provide the total number of companies for which your firm is the lead consultant and broker in regard to health and welfare plans and services.

As an agency, R&R has over 1,000 employee benefits customers and Michelle is the lead consulting partner on 25 districts, non-profits, counties, and private sectors employers. At R&R, we are strategically focused on aligning our customers with industry specialists.

The **Employee Benefits Consultant** that will be leading the R&R team is a seasoned veteran in the education space:

- Michelle is a **Certified Self-funded Specialist** and has a certification in **Worksite Wellness** from WELCOA. Prior to her career in employee benefits, Michelle taught social studies for 20 years in the Appleton Area School District. In her role as a benefit consultant, she continues to **teach** and serve districts, and other employers, in their strategic benefit planning and employee education. She currently serves on the **WASBO** Fall planning committee, **K12 Task force** for the Northeast Wisconsin Manufacturing and Education Alliance and serves on the Board of Progress Lakeshore for economic development in Manitowoc County. Her experience and expertise include consulting, analyzing, and strategizing comprehensive benefit packages for School Districts in Wisconsin.
- Michelle has conducted hundreds of employee benefit communication meetings and excels at presentations.
- Michelle has been asked to present on benefits at organizations such as WASBO and LAHRA (Lakeshore Area, Human Resources Association)

We find great value in being able to bring multi-industry experience to school districts because school districts do more than teach kids: Districts have extensive fiscal responsibilities with limited budgets, they employ transportation and food services, purchase and manage technology, maintain buildings and grounds, all while recruiting and retaining talent. At R&R we have experience in all these industries allowing us to assist at a higher level.

Our agency is expanding our footprint in the public-school arena as our benefits team has evolved. Furthermore, we have noticed a growing trend in district dissatisfaction with agencies that have large books of business related to schools, because some have become complacent and overpriced.

5. Provide a summary of the support, research, compliance assistance, and technical services your company makes available to your (a) employees and (b) to your health and welfare clients at no additional costs. Provide samples if available. Indicate if there are any charges for these services we would incur as your client.

We view our role as *consultants or trusted advisors* vs. brokers. The services we provide are extensive and will support the Wauwatosa School District in a number of facets. As noted in the following outline of the services we'll provide the Wauwatosa School District and its employees, you'll see that what we deliver is proactive, transformational services.



Communication Tools for Employers and Employees

- Customized benefit and enrollment guides that are mobile friendly
- Dedicated patient advocate support for employees and their families
- Personalized videos for open/annual enrollment for employees to share with significant others or review after benefits meetings
- Educational videos on HSAs and consumerism topics
- Customized benefits meetings that fit your employment practices and audience i.e., multiple schools, early mornings, lunch/learns, various committees, Board member presentations
- Online benefit enrollment and Employee Navigator
- Online, interactive program to assist employees in selecting their benefits – EP6ix.
- Medicare education from our Medicare Specialists for eligible employees, spouses, or family members

Compliance Services

- Employer Compliance Kit including Deadlines and creation of notices for annual compliance i.e., Medicare Part D letters, online CMS directions for Medicare compliance, Women's Health, Children's Health, and Marketplace notices
- Health plan(s) testing for creditable or non-creditable coverage as well as providing the required Medicare Part D notice for employees
- 1095 reporting coding question support
- Monthly compliance webinars for our client partners
- HIPAA compliant document sharing system-InsurLink
- On staff Compliance Director
- Online HR services

Analytic Tools

- Benchmarking; plan designs, cost, premiums, employee contributions, HSA funding, etc.
- Monthly reporting for self-funded programs
- Quarterly IBNR review
- Plan performance review monthly with deep dive annually
- Renewal projection tool
- Analytic system to demonstrate real-time premium savings opportunities with modifications to plan designs
- Program to provide contribution strategy solutions and reserve funding analysis
- Tools to create three-year strategic plans for self-funded programs

Wellness Programming

- Dedicated Strategic Wellbeing consultant on-staff that can work with your District to enhance any program already in place or establish a new one
- Extensive experience with establishing and supporting onsite and near-site clinics.
- Vetting and demos of wellness programs that fit a variety of budgets
- Engagement in wellness programming, biometric screenings, wellness fairs and committees
- Coordinate solutions to reduce medical and work comp claims

We know that selecting benefits is just the beginning of the process. Benefits are not valuable if they are not effectively communicated and understood by the audience. As a result, we develop a personalized benefit and enrollment guide and incorporate video elements to assist with educating staff and faculty on how to be a good consumer of healthcare and to truly understand their benefits. In our industry, ***“a benefit not understood is a benefit not appreciated.”*** It is vital to our customer service model that our clients understand and can effectively communicate their benefit package to current and future Wauwatosa School District staff and faculty.

Beyond the benefit renewal process, we assist our clients, staff and faculty and their families with benefit questions and claims issues that arise throughout the year. We act as an extension of our clients' HR department to assist with research in areas ranging from health claims processing to billing issues, plus many areas in between.

With over 100 years of combined experience working with educational entities, R&R Insurance has a dedicated **‘Education Practice Group (EPG)’** providing in-house, full-service capability for school districts, universities, and other educational institutions. As a partner with dozens of education customers for benefits and property & casualty insurance, R&R Insurance is committed to education. Our EPG is dedicated to helping the Wauwatosa School District achieve their goals. When enhancing your employee benefits platform, our team will follow a collaborative process, designed with you, to develop a quality lesson plan:

- Identify the needs and goals of Wauwatosa School District.
- Develop solutions to move toward the goals.
- Implement the strategic plan and monitor progress.
- Make adjustments as needed to ensure success.

In addition, the Education Practice Group has specific training in employee benefits, wellness, coverages, analytical claim review, and benefit communication. While constantly communicating the group formally convenes monthly to share information and best practices. We include speakers from a variety of sources including Governmental, Legal, School Associations, Insurance carriers and others.

Team Specialists Serving the Wauwatosa School District



Taylor Hahn, CHES | Strategic Wellbeing Consultant

Taylor brings over 5-years of knowledge in the health and wellness industry and is dedicated to the resources that will determine the needs of your institution as well as defining the strategies and tactics to achieve the goals of your wellness program. Taylor can help consult on employee assistance programs, wellness committee implementation, flu shot clinics, biometrics and more.



Pete Frittitta, MBA | Manager, Strategic Client Services & 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, sales management, and compliance. He is the Past-President of the Wisconsin Association of Health Underwriters (WAHU). Pete is a subject matter expert in Health Care Reform and is an active participant on the speaking circuit.



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. This unique perspective allows her to understand all facets of her client's insurance programs that in turn, enables her to provide additional negotiating power with carriers. Molly also has years of expertise in analyzing claims as well as negotiating with insurance carriers.



Tom West | Financial Analyst

Tom ensures that all analytical projects are completed timely and accurately. He works closely with our carrier partners and software developers to continually enhance R&R's reporting capabilities.



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!

6. Provide your client retention rate.

One measure of our customer satisfaction is a review of our retention. The team dedicated to the Wauwatosa School District has a 97% retention rate, largely due to the exceptional customer service they provide to both the organizations they work with and the employees.

Additionally, we ask our customers for feedback on how we are delivering on what we outlined. This "report card" provides both validation as well as opportunities for growth. The customer service model we follow is twofold; we provide services for leadership and we supply direct services to employees and their families.

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

- *"Michelle & her team (Jen) have been an amazing asset to our organization. They have assisted in enhancing our overall benefit package by providing many options and suggestions for us as well as educating our employees. They have top-notch customer service with timely responses and guidance when needed. If anyone is looking for a change, I would highly recommend R&R (Michelle & Team)."*
- *"I am so happy working with Michelle and the R&R Team! I get my questions answered in a very timely manner. Michelle goes above and beyond with her involvement in our company. She is always willing to look into new things for us and get us all the facts she can. I love the fact that I can get all my insurance benefits answered and that R&R offers resources for compliance and HR questions. It is a "one-stop" shop!! I refer Michelle to any company that I have a chance to. Thanks for working so hard for us!"*
- *"You are the absolute BEST!!!! The epitome of amazing customer service. What a help you have been during all the changes this year. "*
- *"Our Client Service Manager is responsive, polite and very thorough in his answers to my questions. He appears, to me, to be very patient – he might be screaming inside at my question 😊 – but he's always helpful, professional and is definitely a subject matter expert. I shared with him today that I appreciate having his expertise so readily available. You guys are the best!"*
- *"Thank you very much for this; it was extremely helpful to us. We continue to experience great things from your organization and just wanted to let you know that it is appreciated."*
- *"She is right on top of any question I ask. If she doesn't know the answer, she is always ready to "dig" into it and get me the correct answer, and in a timely manner. Her professionalism, organization, and her willingness to help in all areas have been extremely top-notch! She is truly an asset to your organization! My experience with R&R Insurance so far has been exemplary!! I look forward to a long-lasting working relationship!"*
- *"I REALLY appreciate all the help!! It's been a stressful time with all of this when it should really just be happy. I can't tell you how much I appreciate your assistance and the efforts you put in to help."*
- *"You are amazing!!! Thank you so much... again! I really appreciate all of your help. Thank you. Thank you. Thank you."*

7. Provide specific accomplishments or key strategies that this individual and/or team has successfully implemented with direct clients in the area of health and welfare over the past two years.

The team working with the Wauwatosa School District has a number of recent accomplishments and cost containment strategy success stories.

Accomplishments:

- Michelle was selected to speak at the 2023 Spring WASBO conference with Jonathan Mitchell from the Greendale School District on the topic of self-funded health plans. After receiving extremely positive feedback, the two were invited back in Fall to conduct a “Self-funding Part 2” educational session.
- The expertise of the benefit team assigned to the WSD has also led to growth in our agency school district book of business. In the last 18 months, R&R has added 5 new district benefit partners to our portfolio.
- Taylor, our Strategic Wellbeing Consultant, has obtained continuing education credentials by completing the National Society for Health Coaching certificate.
- R&R has obtained Gold status level for the American Heart Association Workplace Wellness Award.
- Launched this year, *Taylor Talks* is a wellbeing campaign that educates employees regarding various health topics on a monthly basis.
- Taylor has successfully launched and transitioned over eight, (100+ employee) client groups into new wellbeing vendor programs on 1/1/2024.
- R&R’s Wellbeing Committee successfully lead by Taylor includes sixteen members that provide clients with challenges, events, etc. they can replicate around wellbeing.
- During the last two years, Pete has worked on 14 employer ACA penalty cases initiated by the IRS that resulted in saving our clients a total of \$6.4 million. Since the implementation of the first ACA Employer Shared Responsibility Payments in 2015, Pete has worked on over 40 cases saving clients a total of over \$9.6 million in proposed penalties (see graphic on following page).

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				\$ 512,926	\$ 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%
1/16/2022	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%
6/16/2023	Client #13; 1 Unit (Restaurants)	2020	\$4980H	\$ 2,252	\$ 965	\$ 1,287	57.2%
2023 TOTAL SAVINGS				\$ 902,111	\$ 8,363	\$ 893,748	99.1%
1/5/2024	Client #10 (Education & Training Services)	2021	\$4980H	\$ 14,210	\$ 14,210	\$ -	0.0%
2024 TOTAL SAVINGS TO DATE				\$ 14,210	\$ 14,210	\$ -	0.0%
TOTAL SAVINGS ACCOMPLISHED TO DATE (Excludes "In Progress")				\$ 9,752,476	\$ 114,133	\$ 9,638,343	98.8%

Key Strategies:

Based on the information Cindy provided in the RFP, in 2022-2023 the Wauwatosa School District saw a shift in health insurance utilization and increased costs. We recognize the importance of partnering with an experienced consulting team that can provide proven cost containment strategies, and as a self-funded employer, the District has an opportunity to implement a number of ways to “move the needle,” in terms of reducing healthcare spend.

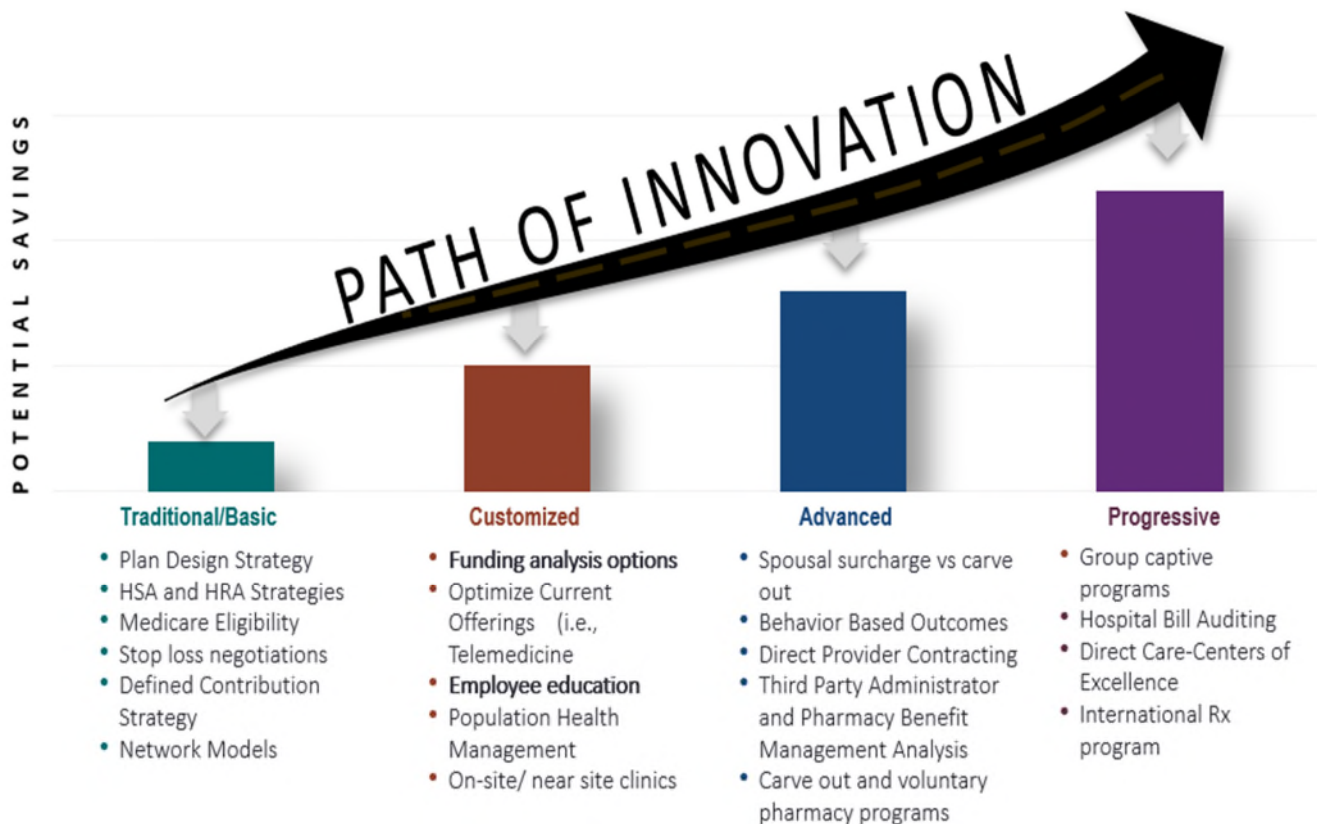
- Implementing **onsite and near-site clinics** through Aurora, Froedtert, ProHealth, Anovia, and Solstice Health (to name a few), has resulted in significant plan savings for partner groups. Clinic data is reviewed monthly (or quarterly depending on the vendor) and educational campaigns have been developed to increase utilization. We can measure the success of these clinics not only through employee satisfaction surveys but through the data that demonstrates the savings to the Districts.
- Another example of innovative programming our benefits team has implemented includes the use of **direct contracting**. Using both incentives and cost-sharing strategies, employees from a partner district were encouraged to utilize specific providers for physical therapy and imaging that guaranteed quality of care at significantly reduced prices. It was critical for the team to provide quality employee education to help employees feel comfortable with the options. After a year, the district saved over \$50,000 due to programming the benefits team put in place.
- **Evaluating Pharmacy Benefit Programs** is another important strategy in the list of services this benefit team excels at. PBMs are not all created equally, they offer different rebate programs and have different fee structures, so it is essential to partner with a consulting team that has experience in this arena. As an example, one of our District partners is expected to reduce their pharmacy spend by \$589k with a change in their pharmacy benefit manager.

Expected Costs

PBM	PBM (A)	PBM (B)	PBM (C)
Annual Cost with Discounts	\$1,515,921	\$1,515,921	\$1,382,320
Rebate Guarantee		\$394,798	\$570,071
Rebate Credit	Yes	Yes	No
Copay Assistance Program	No	No	No
Preferred TPA Partner	Yes	Yes	Yes
Drug Spend after Discount and Rebates	\$1,515,921	\$1,121,123	\$812,249
TPA Admin Fee	\$0.00	\$0.00	\$3.00
# Enrolled	280	280	280
Monthly Cost	\$0	\$0	\$840
Loss of Rebate Credit	\$0.00	\$0.00	\$28.00
# Enrolled	280	280	280
Monthly Cost	\$0	\$0	\$7,840
Monthly Admin Cost	\$0	\$0	\$8,680
Annual Admin Cost Change	\$0	\$0	\$104,160
Annual Total Cost (Estimated)	\$1,515,921	\$1,121,123	\$916,409
<i>Increase from Current</i>	-	-26.0%	-39.5%
File feed transition cost			\$10,500.00
Implementation fee	No	No	Yes
Annual Total Cost with Files	\$1,515,921	\$1,121,123	\$926,909

Regardless of which innovative method is used, our analytic tools demonstrate the potential savings as well as “risks” that accompany change. Our goal is to provide solutions and alternatives that fit the district mission and tolerance for risk and funding capabilities, as well as provide the necessary employee education to ensure that any programs implemented are clearly understood and valued.

Cost Containment Strategies



8. Describe your service philosophy and approach used by the team leader and the team (if appropriate) that your firm would like to assign to our account.

Similar to what Dr. Demond Means mentioned in his Monthly Video Series, our service model follows the philosophy of the “*Fierce Urgency of Now*”. We take quality service to a new level so we can ensure our partners have exceptional benefit experiences. We take this approach because we believe that a **benefit not understood is a benefit wasted**, and knowing the WSD spends approximately 5% of its \$18 million budget on health insurance, we need to safeguard this investment, by following a strategic approach.

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

Our proven success with client meetings comes first by acknowledging that no one likes to have a meeting to just have a meeting. It is our belief that meetings must add value, be relevant, and be concise. To accomplish this, we have set interactions with our clients allowing items to stay top of mind, so all involved parties remain aware of active and upcoming projects as they develop. We’ve developed a process for scheduled meetings to bring up new topics or product suggestions and provide a high-level overview to 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 have monthly meetings with the carriers to discuss trends and services they have available. As the market fluctuates, we evaluate what is best for our customers and act accordingly.

One of our goals is to minimize disruption for the employees. Changing networks and plan designs annually can result in anxiety and may affect recruitment and retention. At the same time, we are aware of the need to evaluate benefit solutions. We see it as our responsibility to help you evaluate the pros and cons of marketing to carriers. The carriers that we have Premier/Elite status with want long-term relationships with their customers and we are able to capitalize on our relationships with the carriers to help maintain stability.

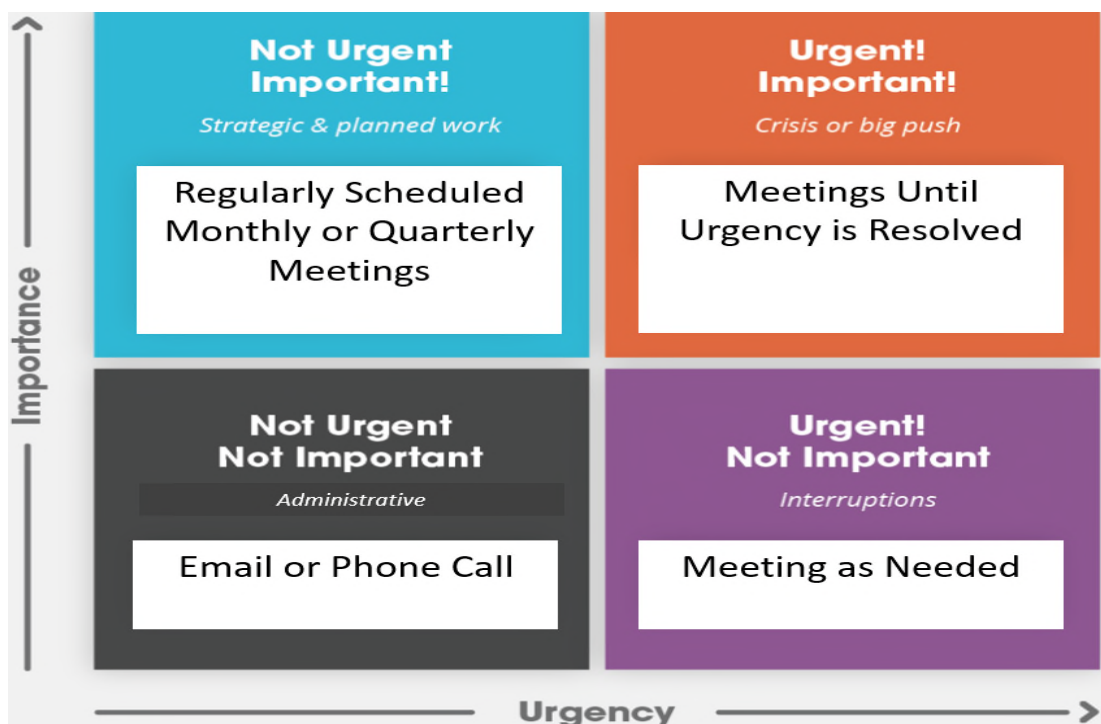
We only recommend vendors whose products and services have the broadest and most effective range of options. The financial stability of our vendors is also very important.

We will only recommend vendors that have a minimum A- (Excellent) rating from A.M. Best. We closely monitor our vendors' financial stability throughout the year and quickly communicate if a potential change might affect your program.

It is our expectation that the R&R team will build a level of trust with the Wauwatosa School District to the point of being viewed as an extension of your employee benefits team. That level of partnership is supported by a fully engaged client staff and continued commitment to supporting our client's needs. To ensure a successful start to our new relationship, participation in our comprehensive onboarding process is critical and sets in motion the information we will need to understand where the benefit programs stand today and co-develop a strategy for the future of the Wauwatosa School District. In understanding the unique administrative framework for each of our clients, we would welcome inclusion to the various management, and/or meetings you feel would be beneficial to informing/educating various Wauwatosa School District stakeholders regarding the benefits program.

As the plan year progresses, monthly/quarterly claim report meetings (virtual or in-person) are recommended to ensure claim cost, guaranteed performance-based service and discount metrics are being met by the various vendor partners of the Wauwatosa School District. These regularly scheduled meetings are many times in addition to the participation involved for potential on-going projects such as, but not limited to, vendor changes, technology implementation, wellness initiatives, employee benefits audits, employee education/training and/or open enrollment meetings.

We assist our clients and their employees with benefit questions and claim issues that arise throughout the year. We act as an extension of our client's HR Department and assist with research in areas ranging from health claims processing to billing issues, plus many other areas in between. The Wauwatosa School District will have a dedicated Patient Advocate Team for your HR team and employees to contact (detailed on page 6).



Our Aligned Missions



R&R Insurance Services, Inc. is an organization dedicated to giving superior service to our customers. By building and valuing a team based on honesty and respect, all customers, internal and external, will be rewarded with peace of mind - our final product.

- Acquire, develop, and retain talent
- Aggressively grow all strategic business units while enhancing the customer experience
- Invest in efficiencies for profitable growth
- Return a profit for the company and its employees

- Accountable
- High achieving
- Respectful
- Knowledgeable
- Trustworthy
- Customer focused
- Loyal
- Innovative



WAUWATOSA
SCHOOL DISTRICT
• Your Educational Community •

As a connected, inclusive community of learners, we serve as active advocates to provide equitable access to excellent academic, co-curricular, and social-emotional learning opportunities that empower every student to thrive as passionate, productive, and creative citizens.

- Ensure an Exceptional Student Experience
- Eradicate Inequity
- Eliminate Disproportionality
- Exceed Proficiency for All

- All students can learn and excel
- We respect and promote diversity, equity, inclusion and accessibility
- We pursue continuous growth and improvement
- Healthy relationships are a foundation of successful schools
- Everyone has the right to psychological and physical safety
- Thriving students are encouraged to pursue their interests and talents by engaging in co-curricular and elective course offerings
- A thriving school district is transparent and trustworthy
- All community stakeholder input and engagement is valuable
- We believe in collective excellence

9. Provide references from three companies that your recommended service leader is the lead health and welfare consultant/broker for that we may contact.

Greendale Schools

Jonathon Mitchell | Director of Business Services
Johnathon.Mitchell@greendaleschools.org
414.423.2705

Julie Grotophorst | Director of Human Resources
JulieGrotophorst@greendaleschools.org
414.423.2703

Germantown School District

Brittany Altendorf | Director of Business & Auxiliary Services
baltendorf@gsdwi.org
262.253.3908

Michael A. Nowak | Director of Human Resources
mnowak@gsdwi.org
262.253.3922

Oconomowoc Area School District

Beth Sheridan | Assistant Superintendent of Finance & Operations
sheridanb@oasd.org
262.560.2119

Kettle Moraine School District

John Stellmacher | Chief Financial Officer
stellmacherj@kmsd.edu
262.968.6300 ext. 5303



"We've been with R&R since January 2020. They have provided high quality service for all four years. I can be a bit of a strong personality, they do a nice job answering the questions asked, and have also done a nice job offering alternatives, even if that wasn't the original objective of some of our ideas. For example, we recently switched our pharmacy benefit manager (PBM) after receiving underwhelming rebates from OptumRx. R&R just helped us transition from Go365 to Vitality, PBMs, and helped us find the right TPM for health claims (We're self-insured) and stop-loss carrier.

Our district has done significantly better with our benefit designs the past 4 years (as compared to the previous 5 years with the prior consultant). In that time, we've switched to self-insurance for health and dental, we've significantly reduced our renewals, we've re-established a wellness program, and we've significantly improved the benefit for our employees. R&R has played a key role in achieving all those objectives.

They are highly responsive. Our main contact, Cindy Algiers, very often responds within the same day. They've provided high quality assistance when unique situations have come about and have been proactive in working with us to make sure our plan is well designed/maintained to achieve the districts objectives.

Overall, I'd highly recommend R&R." – John Stellmacher

10. Describe, in general terms, how your firm can assist us in reaching and communicating with our benefit eligible employees. Use examples of how you have approached this situation and have provided assistance with similar clients.

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

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

Our communication plan is designed *with* District stakeholders. We meet with some of our partners monthly to review claims reports and work towards their organization goals. Other partners choose to meet bi-monthly, using emails for interim communications. Prior to renewals meetings tend to ramp up to execute strategies we've discussed throughout the year and to share updates with insurance committees or Boards. There is not a set playbook, but rather proactive guidelines we suggest and work from based on each group's goals and needs because we follow the formula of being transformational vs transactional.

For example, Michelle currently leads the insurance committee meetings for the Unified School District of Antigo, Oconomowoc's Benefit Task Force and Greendale's bi-annual insurance meetings. The R&R Insurance team addresses a myriad of topics such as monthly claim reports and data evaluations, employee education topics such as "*How Insurance Works 101*," tips for saving, funding strategy options - notably self-funding, pharmacy trends, and wellness programming. Agendas for each meeting are provided by the R&R Insurance team, and District wide recordings are developed to communicate each subject matter deemed essential by the committee and District administration.

Additionally, Michelle presents with members of the insurance committee at District in-service meetings to demonstrate the cohesive nature of the relationship between the staff, administration, and insurance agency. Upon renewal, sharing sessions focus on budgetary planning for the next fiscal year and typically increase in frequency. There is a strong relationship and trust. Michelle and her teamwork with the District administration to coordinate meeting topics and develop presentations for the committee and District staff as a whole.

As an example, upon meeting with District leadership and analyzing claims data as well as clinic data, Michelle created an employee-facing communication aimed to increase clinic utilization in an effort to reduce claims tracking toward the District plan. At the beginning of the 2023-2024 school year, the union representative who meets with District leadership requested Michelle speak again to educate and engage the staff to re-commit to cost savings measures.

Understanding that the Wauwatosa School District had a 98% fill rate for positions this year and hired 100 new staff, we know 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 Benefits Total Rewards Flyer for a Client

INNOVATIVE SERVICES, INC.

TOTAL REWARDS

HELLO,

at Innovative Services, we make healthy living a priority. See the list below for the programs and benefits you have access to and start earning those rewards!

WELLBEING PROGRAMS

WELLNESS & YMCA MEMBERSHIP
Innovative Services encourages healthy lifestyle choices. Full-time and part-time employees who complete their introductory periods are eligible for the YMCA corporate membership discount available in their respective areas. Each YMCA offers a discount exclusive to their region of coverage.
These employees who do not have access to a local YMCA are eligible to receive reimbursement for an approved fitness facility membership up to a \$25 per fee and half the monthly membership with a maximum payment of \$4.50 monthly.

KEY CONTACT
Cory Hoffmann
Sr. Human Resources Specialist
Benefits@isinc.org
920.431.0962

EMPLOYEE ASSISTANCE PROGRAMS
EAP Available to all Innovative Services employees. Call 800-222-8500 for 24/7 free access to a counselor who will answer your questions and help you through whatever challenge you may be facing including confidential grief support, work life balance solutions, financial help and more. Get connected online at isinc.com/eap.
UHC Available to Innovative Services employees enrolled in the medical plan. Call 888-687-4174 to speak with an EAP consultant and receive guidance navigating mental health, relationship, financial or legal concerns. 24/7 support line of change.
See link for more info.
Sanvello Behavioral Health App offered with your plans behavioral health benefits. Access free digital techniques for symptoms of stress, anxiety and depression. Includes:
• Daily mood tracking
• Guided journeys for long-term skills
• Self-assessment
• Community support
To get started, download the app today at sanvello.com

LOOK AT ALL THESE PERKS!

As an employee of Innovative Services, you will enjoy many of the following benefits:

CELL PHONE DISCOUNTS
Employees of Innovative Services are eligible for discounts on qualifying personal cell phone accounts at US Cellular and Verizon.

TUITION DISCOUNTS
Tuition discount for all IS employees and immediate family members through Ballouman and Lakeland Universities. We also offer individualized educational support.

FLEXIBLE DRESS CODE
Employees represent the company and the individuals we serve; however, we want you to be comfortable at work and therefore allow you to wear casual street clothes. We do not require you to wear/purchase any uniforms.

MEDICAL INSURANCE
Medical coverage is provided through UnitedHealthcare and includes coverage for services like preventive care, office visits, surgery, and prescription drugs.

DENTAL INSURANCE
Dental coverage is provided through Delta Dental and includes coverage for exams, cleanings, and restorative services.

VISION INSURANCE
Vision coverage is provided through UnitedHealthcare. The vision care network consists of private practicing optometrists, ophthalmologists, opticians, and optical retailers.

SHORT-TERM & LONG-TERM DISABILITY
Disability Protection is provided through UnitedHealthcare. This type of insurance provides income protection in the event you become disabled and are unable to work for an extended period of time.

VOLUNTARY LIFE INSURANCE
You have the option to purchase additional life insurance with UnitedHealthcare on yourself, spouse, and child(ren).

LIFE/AD&D INSURANCE
Our company sponsors group life coverage through UnitedHealthcare. This basic coverage is provided to you at no cost.

RETIREMENT PLAN
We offer a 401k retirement plan to all employees who have completed one year of service, worked 1020 hours, and are at least 21 years of age.

HEALTH SAVINGS ACCOUNT
If you are enrolled in an HSA-qualified health plan, you are eligible to receive HSA contributions from Innovative Services Inc. These contributions will be deposited directly into your health savings account (HSA).

PAID DAYS LEAVE
We believe that employees should have opportunities to enjoy time away from work to balance their lives. Paid days leave (PDL) includes time off for vacation, sick leave, appointments, funeral leave not covered by our company funeral leave benefits, emergencies, or other events that require time off from work. Part-time employees also receive 24 hours of paid days leave.

FAMILY FUNERAL LEAVE
Full-time employees who complete their introductory period are allowed to take up to two days with pay when there is a death in the employee's immediate family.

PAID HOLIDAYS
Full-time employees are eligible for holiday pay after their 90-day introductory period is complete. The following qualify for holiday pay:
• New Year's Day
• Memorial Day
• Independence Day
• Labor Day
• Thanksgiving Day
• Christmas Eve
• Christmas Day

www.isinc.org

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

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

Wauwatosa School District

Benefits and Enrollment Guide

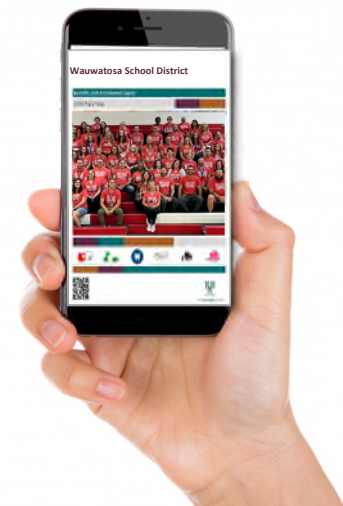
2024 Plan Year



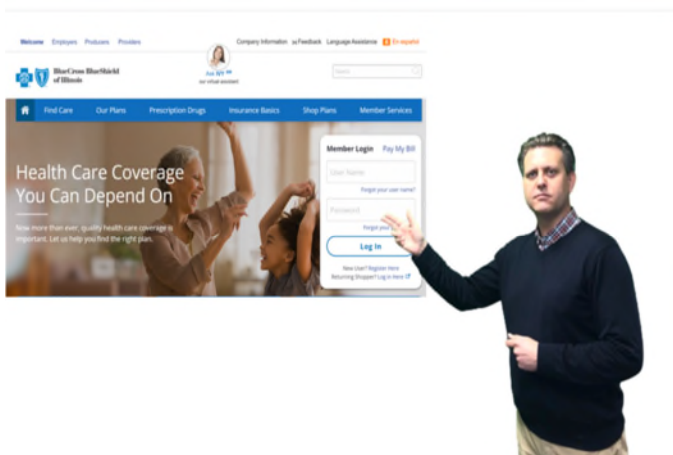
R&R
INSURANCE
the knowledge brokers™

Wauwatosa School District

Benefits and Enrollment Guide 2023 Plan Year



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



- **Presentation Style:** an attribute is our keen awareness to the style and delivery of benefits communication. With understanding that adults tend to be more visual with their learning, we cate 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 providing trending topics; R&R Insurance also has a presence on most major social media platforms (LinkedIn, Facebook, Twitter, YouTube, and a Blog). Learn more at www.myknowledgebroker.com.
- **Seminars/Webinars:** free to attend, 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.

11. Describe the firm's Errors and Omissions (E&O Limits) and provide evidence that your company carries all applicable insurance coverages and licenses.

R&R Insurance Services operates in a very heavily regulated industry in Wisconsin. The Wisconsin Office of the Commissioner of Insurance (OCI) is responsible for overseeing the operations and marketing of insurance companies and agents in Wisconsin. Any forfeitures paid by insurance companies or agents as a result of administrative actions taken by OCI are deposited in the Common School Fund which is administered by the Board of Commissioners of Public Lands. The earnings from this fund are distributed to all public K-12 schools in Wisconsin and are used by school libraries to purchase books.

R&R Insurance carries Professional Liability Insurance with First Specialty Insurance Group with a limit of Liability of \$15,000,000. Proof of liability can be found at the end of our proposal.

12. Describe the process your firm uses for carrier and administrative service provider in regard to renewals and negotiations.

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 the Wauwatosa School District 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. Our level headed approach of treating carriers with as a partner has benefited our clients immensely. Carriers recognize that while we work for you the client, R&R Insurance values them as well. Due to this mutual respect, we find carrier partners are more open during negotiations.

We represent the interests of Wauwatosa School District 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. Then, we work together to create an **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, 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 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 all in line. Working with District leadership, 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, any claims data available to get the District out to market as soon as possible.

Leveraging our carrier partnerships, we would expect bids to be within 14-21 days, allowing us to create a formal proposal to the Wauwatosa School District. This timeframe would allow the District to approve, and complete implementation paperwork and annual enrollment meetings. Our agency goals would include a smooth transition, clear communication, quality benefit offerings, and cards to the members in a timely fashion.

SAMPLE Strategic Timeline—each one is customized specifically to each client

Strategic Timeline	Target Date	Responsible Party
Consultant Selection	February/March	District/Board
Agent transfer letters to carrier	March/April	R&R/District
Onboarding Process	March/April	R&R/District
Employee Educational Topics begins (Goal: Savings Opportunities)	April	R&R
Analyze funding with projected budget	April	R&R/District
Medical and Rx Claims Analysis	April	R&R/District
Update Census	April	R&R/Current Carrier/District
Send RFPs to carriers, TPAs, Stop Loss	May	R&R
Answering questions regarding RFP	May	R&R
Analyze RFP proposals and negotiate with Stop Loss	May	R&R
Compare current renewal to SF & FI options	May	R&R
Present options to District admin team (insurance committee)	June	R&R
Determine contribution strategy	June	R&R/District
Transition Meetings (carrier, TPA, claims, contracts...)	June	R&R/District/Carrier, TPA
Prepare Open Enrollment Materials	July/August	R&R
Open Enrollment	August/September	R&R/District
*Monthly claims review *Monthly employee educational topics		
*Wellbeing and insurance committee meetings as needed/requested *Board material preparation as needed/requested		

13. Describe how your firm audits and monitors the performance of insurance carriers and administrative service providers. State how these services are paid.

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.

Certain performance and quality measures (how well a health plan actually performs at helping people) are reported in the Health Plan Employer Data and Information Set (HEDIS). States, employers, health plans and other groups use the HEDIS data to prepare and publish reports for consumers. These reports, typically known as report cards or performance reports, provide a comparison of how well health plans prevent and treat illness, and may even provide member satisfaction and consumer ratings. As an example, the Wisconsin Chronic Disease Quality Improvement Project (CDQIP) examines Wisconsin health plan performance using the National Committee for Quality Assurance's (NCQA) Healthcare Effectiveness Data and Information Set (HEDIS®) – see report at <https://www.dhs.wisconsin.gov/disease/chronic-disease-cdqip-report.htm>. The CDQIP Annual Report compares HEDIS® Effectiveness of Care measures for diabetes, high blood pressure, and high blood cholesterol for Commercial, Medicaid, and Medicare health plans.

On a broader level, some health plans, very large health plans, choose to be reviewed and accredited (given a “seal of approval”) from various independent third-party organizations that review and rate health plan quality such as the organizations listed below:

- The National Committee for Quality Assurance (NCQA) evaluates, and rates managed care plans using more than 50 standards. NCQA rates both providers and health plans. Visit www.ncqa.org to find out more. You can find NCQA’s ratings of health plan in Wisconsin specifically at <https://reportcards.ncqa.org/health-plans?dropdown-state=Wisconsin&filter-state=Wisconsin>.
- The Joint Commission evaluates and accredits all types of health care organizations (not health plans). Visit www.jointcommission.org to learn more.
- The American Accreditation HealthCare Commission/URAC develops accreditation standards and programs for managed care (providers and health plans but concentration is on providers). Visit www.urac.org to find out more.

While the above resources will provide overall or “average” measurements of performance, as with any measurement, variations can exist. To that extent, R&R Insurance and its clients benefit from several carriers and administrators that have modified their administrative service models around brokers/agencies who have earned the designation of being “top tier.” Our access to “concierge” service along with overall stronger working relationships with carriers and administrators translates into a “well above-average” experience for our clients.

R&R Insurance does not audit the performance measures of any carrier’s or third-party administrator’s operations. The engagement of third-party auditing services for a sponsored Plan would be the direct responsibility of R&R’s client, the cost for which are not included in our fees.

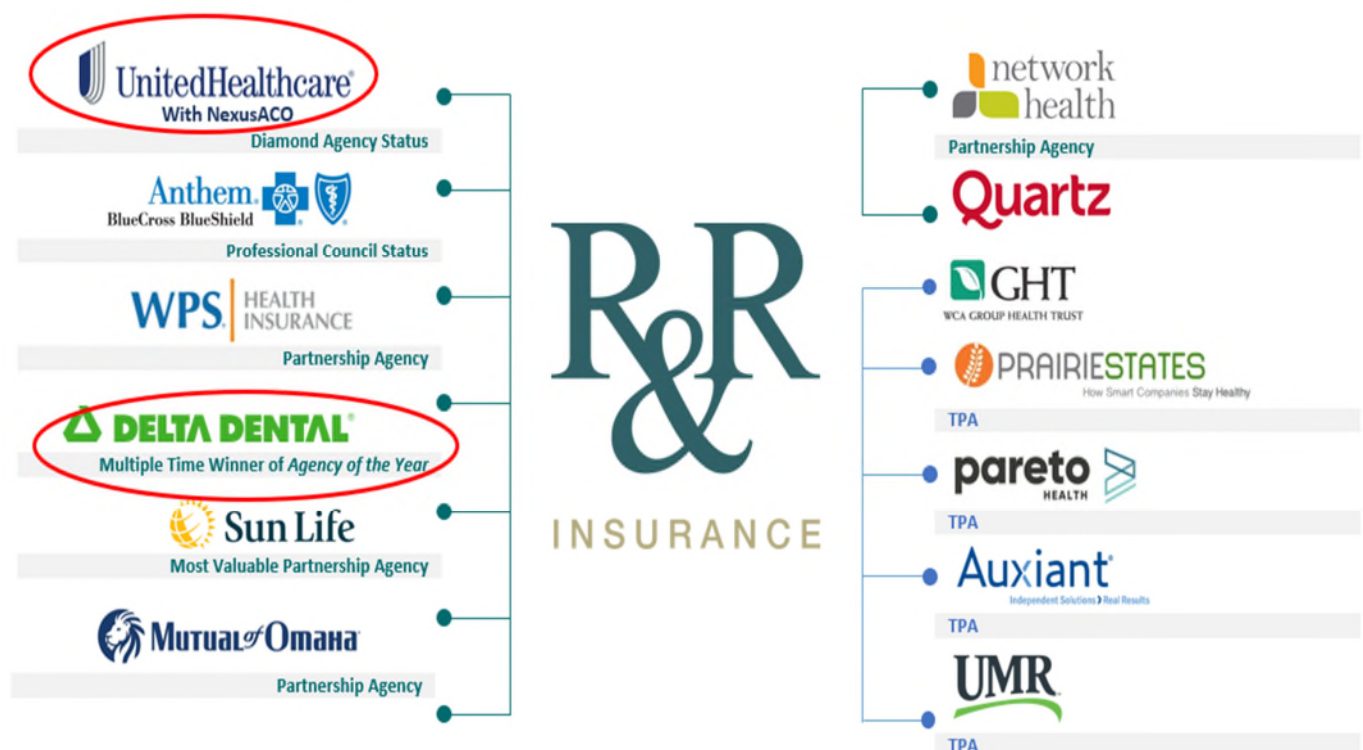
One example of these relationships is that R&R Insurance was one of select number of Wisconsin based firms invited to a special health care symposium held at the headquarters of the nation's largest insurance carrier. Here we were provided with a deep dive of data regarding programming and analytics 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 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.



14. Describe the firm's services in regard to directly assisting the Wauwatosa School District in maintaining compliance with state and federal regulations related to our health and welfare plans. Be as specific as possible.

R&R helps its partner groups stay current with state and federal regulatory issues and changes through a variety of sources:

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

Complimentary

WEBINAR

REGULATORY UPDATE

MARCH 23, 2023

R&R INSURANCE

Assurex GLOBAL

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

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

the knowledge brokers*

REGISTER NOW

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

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

*If you have any questions after attending this webinar, please contact your Employee Benefits Consultant or Account Manager.

myknowledgebroker.com

Click [here](#) to unsubscribe or to change your Subscription Preferences.

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

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

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

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

Available Resources

[Wisconsin Department of Health Services COVID-19 PHE Unwinding Member Communication Timeline](#)

[DOL FAQ Including HIPAA Special Enrollment Opportunities](#)

[UPDATED: Prescription Drug Data Collection \(RxDC\) Reporting Guide](#)

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

[WEBINAR: Ergonomics & Wellbeing](#)

[The In's and Out's of Preventive Care](#)

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

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



Pre-Deductible Telehealth Coverage



Medicaid Redetermination and HIPAA Special Enrollment Requests

LEGAL UPDATE



IMPORTANT DATES

Aug. 16, 2022

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

March 9, 2023

The IRS released updated pay or play penalty amounts for 2024.

2024 Calendar Year

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

ACA Pay or Play Penalties Will Increase for 2024

On March 9, 2023, the IRS [released](#) updated penalty amounts for 2024 related to the employer shared responsibility (pay or play) rules under the Affordable Care Act (ACA). For calendar year 2024, the adjusted \$2,000 penalty amount is **\$2,970** and the adjusted \$3,000 penalty amount is **\$4,460**.

Pay or Play Penalty Calculations

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

Depending on the circumstances, one of two penalties may apply under the pay or play rules—the **4980H(a) penalty** or the **4980H(b) penalty**.

- Under Section 4980H(a), an ALE will be subject to a penalty if it does not offer coverage to “substantially all” (generally, at least 95%) of its full-time employees (and dependents) and any one of its full-time employees receives a subsidy toward his or her Exchange plan. The monthly penalty assessed on ALEs that do not offer coverage to substantially all full-time employees and their dependents is equal to **the ALE’s number of full-time employees (minus 30) multiplied by 1/12 of \$2,000 (as adjusted), for any applicable month.**
- Under Section 4980H(b), ALEs that offer coverage to substantially all full-time employees (and dependents) may still be subject to a penalty if at least one full-time employee obtains a subsidy through an Exchange because the ALE did not offer coverage to all full-time employees, or the ALE’s coverage is unaffordable or does not provide MV. The monthly penalty assessed on an ALE for each full-time employee who receives a subsidy is **1/12 of \$3,000 (as adjusted) for any applicable month.** However, the total penalty for an ALE is limited to the 4980H(a) penalty amount.

IRS Pay or Play Penalty Resources

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

- [Employer Shared Responsibility Provisions](#)
- [Types of Employer Payments and How They Are Calculated](#)

Additional webpages are dedicated to other aspects of the pay or play rules.

COMPLIANCE OVERVIEW



Annual Compliance Deadlines for Health Plans

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

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

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

CALENDAR YEAR DEADLINES

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

Annual Deadlines

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

Action Steps

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

Provided to you by R&R Insurance Services



15. Describe the firm's services and methods employed to obtain and disseminate information about current local and national legislation, trends, new services, new concepts, benefit design, etc.

If we had to describe our services and methods to disseminate information in one word, it would be COMPREHENSIVE. At R&R we take a multifaceted approach to ensure our partner groups have up to date, valuable information.

R&R Insurance uses various forms of communicating information on current trends and legislation. Pertinent information/updates are provided to R&R partners through:

- Consultant calls and/or emails directly to the client
- Regularly scheduled monthly meetings
- Quarterly updates
- Video education
- MyWave Connect® compliance updates
- Benefits Buzz® Newsletter
- HR Brief® Newsletter
- R&R client email compliance advisories
- Monthly R&R/Assurex Global Compliance Webinars
- Providing proprietary compliance tools such as
 - ACA Employer Reporting Tool (IRS Forms 1094/1095)
 - Full-Time Tracker Tool (eligibility determination for variable hour employees)
 - “Play or Pay” calculators
 - HCR (Health Care Reform) Tax Impact Analysis

You can find examples of some of these communications on the following pages of the RFP.



Sample Communications



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](#)

ACA COMPLIANCE BULLETIN

Upcoming ACA Reporting Deadlines

Employers subject to Affordable Care Act (ACA) reporting under Internal Revenue Code Sections 6055 or 6056 should prepare to comply with reporting deadlines in early 2024. For the 2023 calendar year, covered employers must:

- Furnish statements to individuals by **March 1, 2024** (an alternative method of furnishing statements to covered individuals is available in certain situations); and
- File paper returns with the IRS by **Feb. 28, 2024**, or **April 1, 2024**, if filing electronically. Beginning in 2024, employers that file at least 10 returns during the calendar year must file electronically.

Penalties may apply if employers are subject to ACA reporting and fail to file returns and furnish statements by the applicable deadlines.

Individual statements for 2023 must be furnished within 30 days of Jan. 31, 2024. Because 2024 is a leap year, the deadline for individual statements is **March 1, 2024**. In addition, electronic IRS returns for 2023 must be filed by March 31, 2024. However, since this is a Sunday, electronic returns must be filed by the next business day, which is April 1, 2024.

Covered Employers

The following employers are subject to ACA reporting under Sections 6055 and 6056:

- Employers with self-insured health plans (Section 6055 reporting)
- Applicable large employers (ALEs) with either fully insured or self-insured health plans (Section 6056 reporting)

ALEs are employers with 50 or more full-time employees (including full-time equivalent employees) during the preceding calendar year. Note that ALEs with self-funded plans are required to comply with both reporting obligations. However, to simplify the reporting process, the IRS allows ALEs with self-insured plans to use a single combined form to report the information required under both Sections 6055 and 6056.

Provided to you by R&R Insurance Services

Important Dates

Feb. 28, 2024

Paper IRS returns for 2023 must be filed by this date. Reporting entities can file up to 10 returns on paper under the new filing threshold.

March 1, 2024

Individual statements for 2023 must be furnished by this date. An alternative method of furnishing Forms 1095-B is available.

April 1, 2024

Electronic IRS returns for 2023 must be filed by this date. **Most employers must file electronically beginning in 2024.**

Individual Statements

Furnishing Deadline

The IRS extended the deadline for furnishing statements to individuals. The due date for filing with the IRS is unchanged.

Furnishing Under Section 6055

The IRS has provided an alternative method for furnishing statements to individuals under Section 6055. This alternative method generally requires statements to be provided upon request only.



NLRB Delays Joint-Employer Rule Effective Date to February

Recently, the National Labor Relations Board (NLRB) announced it would push the effective date of the new joint-employer rule to Feb. 26, 2024. The final rule was published in the Federal Register on Oct. 27, 2023, and was initially set to become effective on Dec. 26, 2023. However, the agency has delayed the effective date by two months to facilitate the resolution of legal challenges regarding the new rule. Notice of the extension will be published in the Federal Register.

The New Joint-Employer Standard

The 2023 joint-employer standard establishes new criteria for determining joint-employer status as applied to labor issues related to the National Labor Relations Act. It will rescind the existing 2020 joint-employer standard and replace it with a more inclusive law, making it easier for employers to be classified as joint employers. Notable changes to the joint-employer standard include the following:

- Clarification of the definition of "essential

terms and conditions of employment"

- Identification of the types of control that are necessary to establish joint-employer status and the types that are irrelevant to the joint-employer inquiry
- Description of the bargaining obligations of joint employers

What's Next

The law is currently facing legal challenges. A coalition of businesses sued the NLRB in federal District Court, alleging the new joint-employer rule is unlawful, overly broad, and contradictory to the common-law definition that limits joint employment to relationships of actual and substantial control of working conditions.

The new joint-employer standard will only be applied to cases filed after the rule becomes effective on Feb. 26, 2024. Employers can prepare for the new rule by familiarizing themselves with the new standard and determining whether a more inclusive joint-employer standard will reclassify them as joint employers by the amended effective date.

We'll keep you apprised of any notable updates.

3 Key Trends Driving Employer Health Care Costs in 2024

All signs point to health care costs continuing to rise in 2024. This article outlines the three primary drivers of health care costs and ways that employers plan to manage them.

1. Mental Health Challenges

Employers' mental health needs for concerns such as depression, anxiety and substance use disorder undoubtedly rose during the COVID-19 pandemic and continue to linger amid its aftermath. In response, employers are expected to continue to expand access to mental health support and services, and many plan to provide more options for support and reduce cost barriers to care. Organizations may also explore manager and employee training to recognize mental health issues.

2. Pharmacy Costs

In 2024, pharmacy costs will continue to impact employers significantly, in addition to high-cost drugs, relationships with pharmacy benefits managers (PBMs) are also a key concern for employers. To address rising drug costs, employers may implement pharmacy

management strategies, including prioritizing transparent PBM practices and plan design changes to address costly medications.

3. Cancer Treatment

Preventive screenings were a critical health care component disrupted during the pandemic. As a result, employers are anticipating more late-stage cancers among workers. Cancer is one of the top drivers of health care costs for most employers. In response to rising cancer care, employees may encourage advanced screening measures and maintain full coverage of recommended prevention and screening services.

Summary

Heightened health care costs are likely to continue impacting employers for the foreseeable future. Looking ahead to 2024, many employers are focusing on impacts related to mental health, medications, cancer and other drivers of costs, such as growing health care delivery models.

Contact us for additional resources.



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COMPLIANCE OVERVIEW

Top Health Plan Compliance Issues for 2024

Employers should be aware of the top compliance issues that impact their health plan coverage for 2024. Some of these compliance issues are established requirements for employers, such as the expanded electronic reporting requirement under the Affordable Care Act (ACA). Other compliance issues are anticipated developments employers should monitor, such as new regulations under the Mental Health Parity and Addiction Equity Act (MHPAEA).

Other top health plan compliance issues employers should be aware of in 2024 include:

- New health plan transparency requirements;
- Ongoing litigation regarding the ACA's requirement to cover preventive care services without cost sharing;
- Possible expansion of the ACA's contraceptive coverage mandate; and
- Proposed legislation at state and federal levels to regulate pharmacy benefit managers (PBMs).

LINKS AND RESOURCES

- [Final rule](#) lowering the threshold for electronic ACA reporting beginning in 2024
- [Website](#) for submitting prescription drug data collection (RxDC) report
- [Proposed rule](#) from August 2023 on MHPAEA compliance

Key Developments - 2024

- Additional transparency requirements for health plans, including expansion of the cost comparison tool
- Continued focus on MHPAEA enforcement
- Federal appeals court decision regarding ACA's coverage mandate for preventive care benefits
- Lowered threshold for ACA electronic reporting

Other Possible Changes

- New state and federal regulation of PBM practices to help control health plan spending
- New state insurance mandates for fully insured health plans
- Revised HIPAA privacy and security rules
- Extension of telehealth exception for high deductible health plans (HDHPs)



Provided to you by R&R Insurance Services

HR COMPLIANCE OVERVIEW

2024 State Overtime Salary Levels

Under federal and state laws, employers must compensate their employees with one and one-half times their regular rate of pay for any hours of overtime work. However, under these laws, employees who work in an executive, administrative or professional (EAP) capacity are exempt from overtime pay if they satisfy, among other things, the salary level requirements for their exemption.

Under the federal Fair Labor Standards Act (FLSA), the salary level requirement for the EAP exemption is \$684 per week on a salary or fee basis. For highly compensated employees, the salary level is \$107,432, which includes at least \$684 per week paid on a salary or fee basis.

While these salary levels apply in most U.S. jurisdictions, some states have adopted EAP salary levels higher than the ones required by the FLSA. These states are:

- California
- Colorado
- Florida
- Nevada
- New York
- Washington

The table below provides an overview of state EAP overtime salary levels higher than the FLSA thresholds. As a convenience, additional salary thresholds for other overtime exemptions are also provided.

LINKS AND RESOURCES

- U.S. Department of Labor (DOL) [overtime pay website](#)
- DOL [overtime E-tools](#)

Important Dates

Jan. 1, 2024

New salary levels for EAP exemptions become effective in California, Colorado, Maine, New York and Washington.

July 1, 2024

A new salary level for EAP exemptions becomes effective in Nevada.

Legislative Notice

On August 30, 2023, the DOL [announced](#) issuance of a Notice of Proposed Rulemaking (NPRM).

The NPRM proposes to update and revise the regulations issued under the FLSA implementing the EAP exemption from minimum wage and overtime pay.

Proposed revisions include increasing the standard salary level and the highly compensated employee total annual compensation threshold, as well as providing an automatic updating mechanism that would allow for the timely and efficient updating of all the thresholds to reflect current earnings data.



Provided to you by R&R Insurance Services

16. Describe the firm's services and capabilities to provide Wauwatosa School District with specific benchmarking information regarding the costs, premiums, service fees, outcomes, loss ratios, and performance of our health and welfare plans in relation to national, industry, and regional trends.

R&R Insurance has the ability to benchmark the WSD benefits using various analytical software programs at its disposal. Information imported into the software is from numerous sources such as our internal clients, the Wisconsin DPI databases, carrier partner databases, Milliman as well as nationally from our Assurex partners. Data such as deductible levels, premiums costs, HSA or HRA contribution amounts and more can be gathered and analyzed.

In addition to providing benchmarking data to District leaders, our benefit team shares the highlights with the employees during open enrollment in an effort to promote the outstanding benefits offered. In reviewing 2021-2022 data, we compared the WSD to 403 districts in the state and can see that the plan design offered by the District beats the state average. Furthermore, we can drill down to showcase how WSD "measures up" to area districts

We utilize a number of analytic tools to provide robust monthly reporting. Our Applied Benefit Designer and Claros actuarial software tools are used to examine loss history, examine risk tolerance, monitor plan performance, determine contribution strategies and set IBNR levels. On the following pages, you will see a sampling of our reporting capabilities.





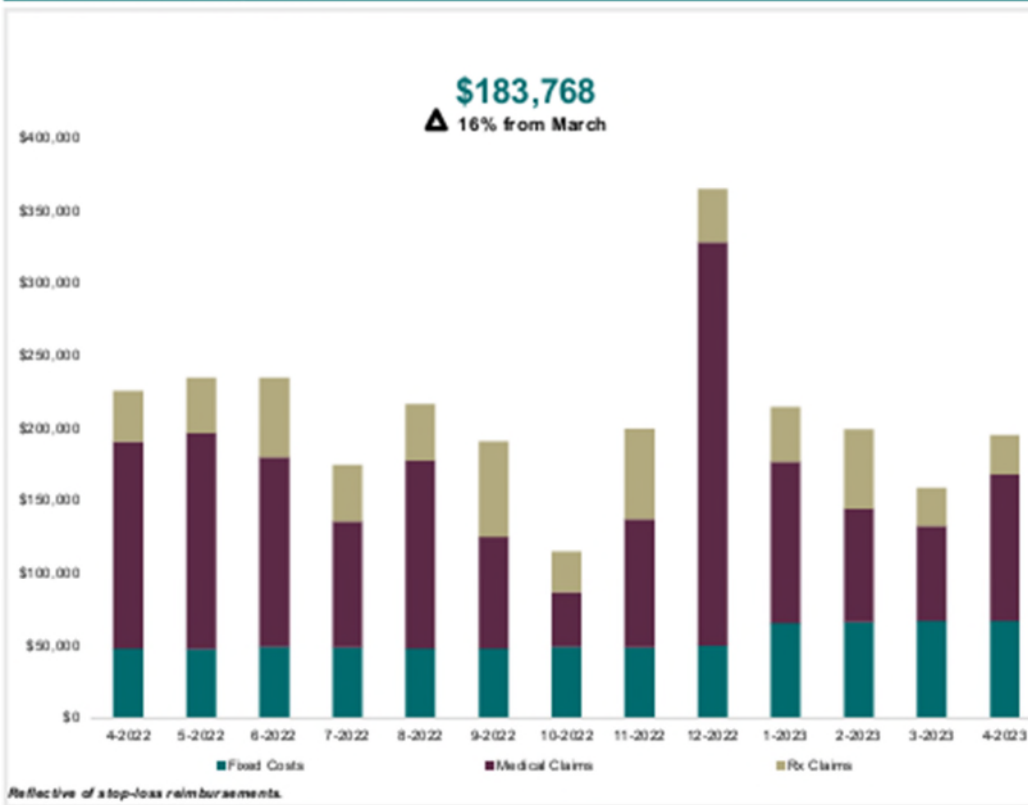
Medical/Rx Plan Performance Report

Sample Client
1/2017 - 4/2023

Key Takeaways

One new high cost claimant (#1 HCC). High cost claimant #2 is repeat high cost claimant from the 2022 plan year. (#1 HCC in 2022). Received \$11,363 in stop loss reimbursements in April for the 2022 plan year. 2023 fixed costs are inclusive of administration, broker fee, specific fee & aggregate fee.

Total Plan Costs by Month



YTD % of Premium Equivalent

55%

YTD Fixed Costs

\$264,666

▲ 39% vs. April 22'

YTD Total Paid Claims
\$501,935

▼ 28% vs. April 22'

YTD Total Plan Costs
\$606,734

▼ 18% vs. April 22'

Average Enrolled Employees
178

▲ 14% vs. April 22'

YTD High Cost Claimants > \$37,500

YTD HCC CLAIMS PAID

\$111,547

+ \$56,422 from prior month

YTD HCC MEMBERS

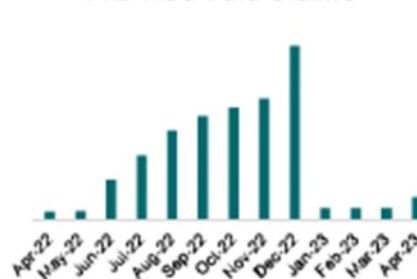
2 Members

+ 1 new this month

YTD HCC AS A % OF TOTAL CLAIMS

2 plan members contributed to 22% of gross paid claims.

YTD HCC Paid Claims



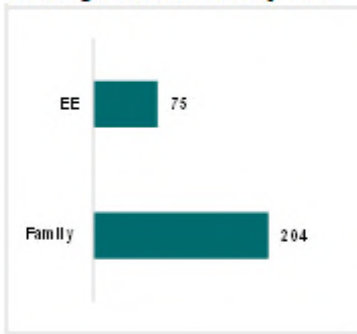


Prior Plan Year Medical/Rx Claims Experience

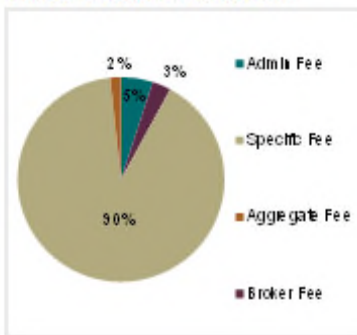
Sample Client
(9/2022 - 8/2023)

Enrollment			Plan Costs						Cost vs. Premium Equivalent		
Month	Employees	Members	Fixed Costs	Medical Claims	Rx Claims	Reimbursement from 21-22 Stop Loss Contract	22-23 Stop Loss Reimbursement	Total Paid Claims	Total Plan Cost	Premium Equivalent	% of Premium Equivalent
9-2022	280	824	\$94,780	\$222,744	\$136,887	\$53,496	\$0	\$359,631	\$400,915	\$504,151	80%
10-2022	279	823	\$94,386	\$293,494	\$118,646	\$2,190	\$0	\$412,139	\$504,335	\$502,034	100%
11-2022	277	815	\$93,596	\$246,168	\$89,528	\$0	\$0	\$335,697	\$429,292	\$497,800	86%
12-2022	279	820	\$94,386	\$313,237	\$144,587		\$2,345	\$457,824	\$549,865	\$502,034	110%
1-2023	278	822	\$94,703	\$405,950	\$141,949		\$20,899	\$547,899	\$621,703	\$502,281	124%
2-2023	277	820	\$94,308	\$472,272	\$118,484		\$235,143	\$590,756	\$449,921	\$500,164	90%
3-2023	277	818	\$94,063	\$468,290	\$139,243		\$126,560	\$607,532	\$575,035	\$498,982	115%
4-2023	279	824	\$94,607	\$321,050	\$144,437		\$16,063	\$465,487	\$544,031	\$502,034	108%
5-2023	280	826	\$94,757	\$627,558	\$122,348		\$228,951	\$749,906	\$815,711	\$502,969	122%
6-2023	280	827	\$94,757	\$644,355	\$169,626		\$19,767	\$813,981	\$888,971	\$502,969	177%
7-2023	278	823	\$93,967	\$436,131	\$140,511		\$293,216	\$576,642	\$377,393	\$498,735	76%
8-2023	278	824	\$93,967	\$668,198	\$210,180		\$78,266	\$878,378	\$894,059	\$498,735	179%
Total	3,342	9,866	\$1,132,275	\$5,119,447	\$1,676,424	\$55,686	\$1,021,229	\$6,795,871	\$6,851,231	\$6,012,888	114%
Average	279	822	\$94,358	\$428,821	\$139,702						

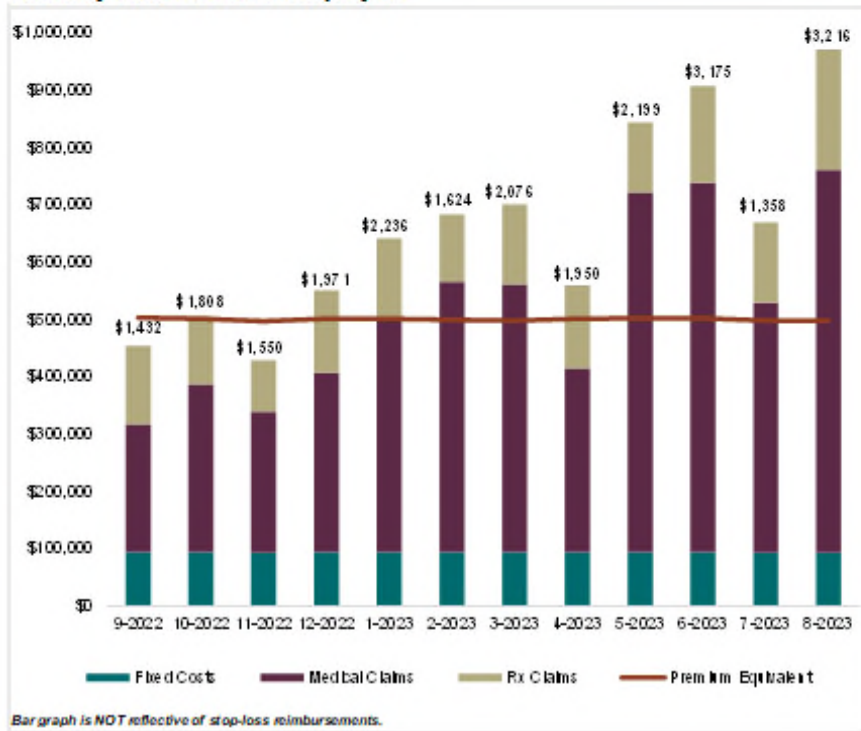
Average Enrollment by Tier



Fixed Costs Breakdown



Monthly Plan Cost Per Employee





Historical Plan Cost by Year

Greendale School District

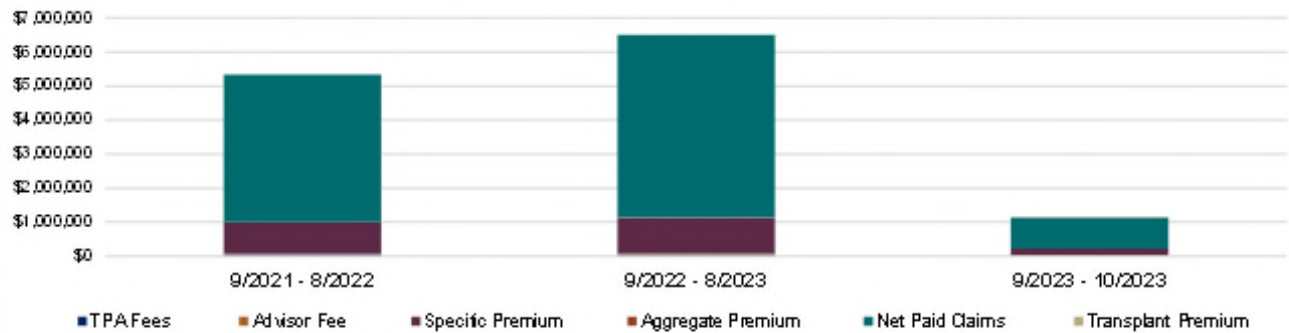
9/2021 - 10/2023

Coverage Period	Administration & Premium Cost (Fixed)						Claims Cost (Variable)						Fixed Costs + Net Paid Claims
	TPA Fees	Advisor Fee	Specific Premium	Aggregate Premium	Transplant Premium	Fixed Costs Total	Paid Medical Claims	Paid Rx Claims	Total Paid Claims	Specific Stop Loss Reimbursement	Rx Rebates	Net Paid Claims	
9/2021 - 8/2022	\$44,701	\$28,776	\$913,804	\$17,386	\$0	\$1,004,467	\$3,465,199	\$1,397,378	\$4,862,578	\$510,553	\$16,330	\$4,335,894	\$5,340,162
9/2022 - 8/2023	\$56,313	\$33,032	\$1,023,914	\$19,016	\$0	\$1,132,275	\$5,119,447	\$1,676,424	\$6,795,871	\$1,329,612	\$86,872	\$5,379,387	\$6,511,661
9/2023 - 10/2023	\$26,548	\$5,653	\$181,514	\$2,801	\$9,300	\$225,816	\$768,639	\$187,296	\$955,935	\$0	\$35,502	\$920,433	\$1,146,248

*Transplant policy added 9/2023

*9/2021 - 8/2022 is an immature plan year

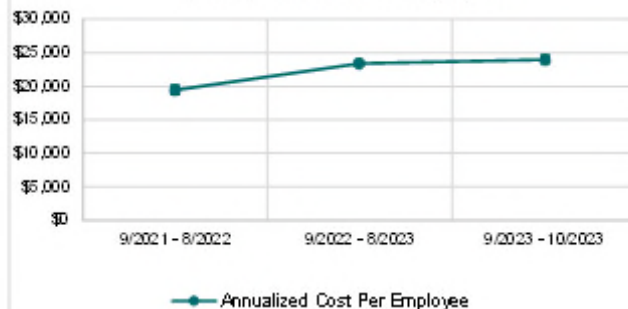
Total Health Plan Cost by Year (Net Stop Loss Reimbursements)



Annualized Net Plan Cost per Employee			
Coverage Period	Fixed Costs + Paid Claims	Average # of Covered Employees	Annualized Cost Per Employee
9/2021 - 8/2022	\$5,340,162	275	\$19,425
9/2022 - 8/2023	\$6,511,661	279	\$23,381
9/2023 - 10/2023	\$1,146,248	287	\$23,963

Enrolled Employees by Coverage				
Coverage Period	Single	Family	Average EE's Enrolled (Total)	Average Enrolled Members (Total)
9/2021 - 8/2022	79	196	275	785
9/2022 - 8/2023	75	204	279	822
9/2023 - 10/2023	81	206	287	841

Annualized Cost Per Employee



Enrolled Employees by Coverage



Claims: Projected and Historical

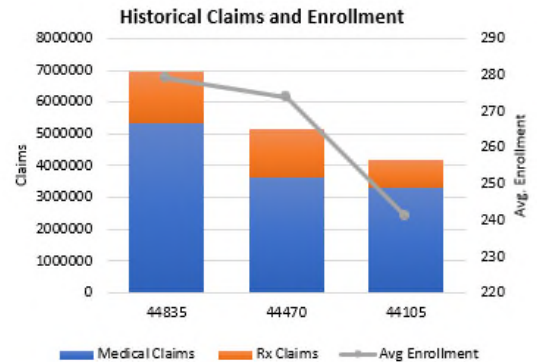
Claims Experience

Period (12 months beginning)	10/1/2022	10/1/2021	10/1/2020
Avg. Enrollment	279	274	241
Medical Claims	5,338,285	3,640,768	3,312,601
Rx Claims	1,625,374	1,503,149	873,431
Total Claims	6,963,659	5,143,917	4,186,032

Claims Per Capita/Month*	925.14	823.70	784.66
Experience Year Weight	51.2%	33.7%	15.1%

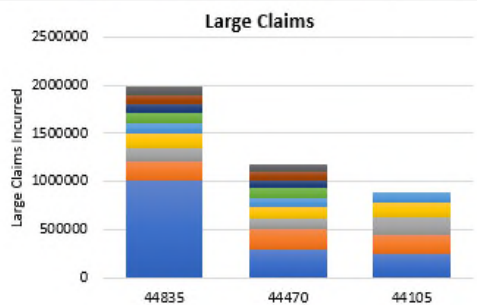
Composite Per Capita Claim Cost 869.74

*normalized, and trended to projection date based on adult equivalents.



Large Claims Incurred

Period (12 months beginning)	10/1/2022	10/1/2021	10/1/2020
	1,016,269	284,990	248,537
	189,340	221,296	191,949
	148,334	114,153	189,811
	139,115	107,230	151,817
	116,136	103,418	112,083
	106,370	97,526	
	105,590	88,194	
	95,120	87,559	
	88,232	84,659	
	86,738	81,699	
	2,091,244	1,270,724	894,196



Powered By Claros Analytics

Sample Client

Annual Estimated Cost Summary: 09/01/2022

Plan Cost:

	Current	Original Renewal	Negotiated Renewal	Option 1	Option 2
Third Party Administrator	TPA NAME	TPA NAME	TPA NAME	TPA NAME	TPA NAME
Stop Loss Carrier	CARRIER NAME	CARRIER NAME	CARRIER NAME	CARRIER NAME	CARRIER NAME
Specific Deductible Amount	\$150,000	\$150,000	\$150,000	\$160,000	\$170,000
Annual Administration Fees	\$151,210	\$152,236	\$152,236	\$152,236	\$152,236
Annual Specific Stop Loss Premium	\$412,563	\$472,581	\$429,052	\$396,668	\$372,708
Total Annual Fixed Costs	\$563,772	\$624,817	\$581,287	\$548,904	\$524,944
Increase From Current		11%	3%	-3%	-7%

Sample Client

Administration Renewal: 09/01/2022

Fixed Fees (Per Employee Per Month)

	Current	Renewal
Third Party Administrator	TPA NAME	TPA NAME
Claims Administration	\$39.30	\$39.30
Utilization Management	\$2.10	\$2.50
Complex Condition Management	\$1.95	\$2.00
NurseLine	\$0.50	\$0.50
CARE Program Discount *	-\$1.03	-\$1.03
External PBM Interface Fee	\$8.00	\$8.00
COBRA	\$10.00 per ongoing COBRA participant, plus \$25.00 per election notice and 2% of their COBRA premium. ±	\$10.00 per ongoing COBRA participant, plus \$25.00 per election notice and 2% of their COBRA premium. ±
SPD Printing, ID Card Printing & 5500 Prep.	\$0.50	\$0.50
Telemedicine Services (Teladoc) †	\$1.55	\$1.55
Advisor Fee	\$6.08	\$6.08
Network Access	Included	Included
Stop Loss Interface Fee	\$7.37	\$7.37
Monthly Cost (PEPM)	\$66.32	\$66.77
Monthly Cost (All Employees)	\$12,601	\$12,686
Annualized Cost (All Employees)	\$151,210	\$152,236
Annualized Total	\$151,210	\$152,236

* The Utilization Management, Complex Care Management and NurseLine services bundled together qualify for a 'CARE' program PEPM discount.

† Includes general medical, behavioral health and dermatology services.

± Actual COBRA administration costs are variable based on beneficiary counts and are not reflected in the above Monthly/ Annual Totals.

Sample Client

Specific Stop Loss Renewal: 09/01/2022

Premium Cost

	Current	Original Renewal	Negotiated Renewal	Option 1	Option 2
Stop Loss Carrier	CARRIER NAME	CARRIER NAME	CARRIER NAME	CARRIER NAME	CARRIER NAME
Specific Deductible Amount	\$150,000	\$150,000	\$150,000	\$160,000	\$170,000
Specific Deductible Includes	Medical + Rx	Medical + Rx	Medical + Rx	Medical + Rx	Medical + Rx
Preferred Contract?*	Yes	Yes	Yes	Yes	Yes
TPA-Preferred Carrier?	Yes	Yes	Yes	Yes	Yes
Includes Lasers	No	No	No	No	No
Contract Term (Incurred/ Paid)	Paid	Paid	Paid	Paid	Paid
Single Rate	\$107.82	\$124.18	\$112.74	\$101.89	\$95.10
# Enrolled	122	122	122	122	122
Single Rate Monthly Cost	\$13,154	\$15,150	\$13,754	\$12,431	\$11,602
Family Rate	\$312.15	\$356.35	\$323.53	\$303.31	\$286.13
# Enrolled	68	68	68	68	68
Family Rate Monthly Cost	\$21,226	\$24,232	\$22,000	\$20,625	\$19,457
Monthly Total Cost	\$34,380	\$39,382	\$35,754	\$33,056	\$31,059
Annual Total Cost (Estimated)	\$412,563	\$472,581	\$429,052	\$396,668	\$372,708
Increase from Current	-	15%	4%	-4%	-10%
Offer is Firm?	Yes	Yes	Yes	Yes	Yes

*Carrier's 'Preferred Contract' guarantees the following at your next stop loss plan year renewal: 1) No new lasers, and 2) a rate increase cap of 50%.

17. Describe your previous experience with vendors or third-party administrators of health savings accounts and flexible spending accounts.

R&R Insurance is very experienced and capable of supporting HSA, FSA and HRA programs. We have extensive experience in the tax-free, account-based plan industry and we have dozens of public and private schools in Wisconsin utilizing HRAs, FSAs and HSAs. Most recently, we provided a comprehensive series of HSA videos, including the benefits of investing HSA dollars, to the Oconomowoc Area School District Benefit Task Force. They are incorporating these into their wellness program in an effort to promote financial wellbeing.

Our agency also invested in technology to create customized videos related to these types of accounts, providing personalized, step-by-step education for employees to comprehend the process effectively using these funding mechanisms. Furthermore, the benefit team working with the WSD has conducted in-person meetings during open enrollment and educational sessions during the year. In August, Michelle hosted a session with DBS representatives for the Unified School District of Antigo and on January 19, she is presenting a lunch and learn session for the Denmark School District during a PD Day to increase understanding and engagement. Clearly demonstrating the value of pre-tax savings is one of our specialties and the impacts are measurable when evaluating the number of members using the savings tools and investing.

Why Put Money Into An HSA?

	No HSA	With HSA
Individual Adjusted Gross Income	\$50,000	\$50,000
Subtract HSA Contributions (from all sources)	-0-	\$2,000
= Taxable Income	\$50,000	\$48,000
Average Tax Rate 25%	\$12,500	\$12,000
= Tax Savings	-0-	\$500

18. Describe the firm's capacity to conduct an employee benefit satisfaction survey, which includes surveying employee interest for voluntary benefits.

At R&R, we feel understanding the employee's perception of the benefit offerings at our employer groups is a critical component in any organization's strategic plan. We have gone to great lengths to educate our customers on this thought process and help them create and initiate a variety of surveys through different mediums. We take this administrative task off the hands of the HR personnel; we work with them to get input on questions and then initiate surveys utilizing *Survey Monkey* and other web-based survey products depending on what our clients feel will most effectively reach their employee base.

Most recently, we worked with the Oconomowoc Area School District and R&R's marketing department to produce and send out a robust benefit survey to gain feedback on the current benefits, new voluntary initiatives we put in place in 2023 and also gain insight into interest in wellness programming and additional future planning. Additionally, we are in the midst of working with the Unified School District on their survey. Simply put, we have extensive experience in this arena.

It is critical that R&R acquires and maintains a complete, thorough understanding of the organizational challenges that the Wauwatosa School District faces and vice versa. **In short, we look to build a strong partnership based on a mutual understanding of current business conditions and short & long-term objectives.**

19. Describe your communication systems (call centers, reports, automated correspondence, newsletters, seminars, app / websites, etc.) that would be used to deliver or support the service.

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

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

Also knowing how important it is to attract talent, our Employee Benefits Marketing Coordinator can work with you to develop a one page "recruiting benefits summary." The purpose of this document is to highlight the benefits that are offered in addition to the culture of your organization. It serves as an excellent document to email a candidate prior to a phone interview. A nice way of marketing all that you have to offer to generate and create excitement about your organization while promoting the value you place on the benefits offered.

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

- **Benefit Enrollment platforms** - R&R Insurance is proficient in multiple. A few worth noting are Skyward, Employee Navigator and EP6ix.



- **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 you're able to participate in Employee Benefits surveys to find out how you compare to others from around the country.

R&R / Zywave Client Portal



Find What you are looking for - FAST

Access Workplace Policies & Forms

ACA Reporting – Generate Forms 1094/1095

Multistate Law Comparison Tool



HR Self-Assessment Tool

Salary Benchmarking Tool

Sample Job Descriptions

Total Compensation Statements

At R&R Insurance, we take our tagline of being The Knowledge Brokers to heart. We are deeply engaged and serve on advisory committees for school districts as well as the Wisconsin Association of School Business Officials (WASBO).



Our communication plan is designed *with* District stakeholders. We meet with some of our partners monthly to review claims reports and work towards their organization goals. Other partners choose to meet bi-monthly, using emails for interim communications. Prior to renewals meetings tend to ramp up to execute strategies we've discussed throughout the year and to share updates with insurance committees or Boards. There is not a set playbook, but rather proactive guidelines we suggest and work from based on each group's goals and needs because we follow the formula of being transformational vs transactional.

For example, Michelle currently leads the monthly insurance committee meetings for the Unified School District of Antigo. The R&R Insurance team addresses a myriad of topics such as monthly claim reports and data evaluations, employee education topics such as "*How Insurance Works 101*," tips for saving, funding strategy options - notably self-funding, pharmacy trends, and wellness programming. Agendas for each meeting are provided by the R&R Insurance team, and District wide recordings are developed to communicate each subject matter deemed essential by the committee and District administration. Additionally, Michelle presents with members of the insurance committee at District in-service meetings to demonstrate the cohesive nature of the relationship between the staff, administration, and insurance agency. Upon renewal, sharing sessions focus on budgetary planning for the next fiscal year and typically increase in frequency.

As an example, upon meeting with District leadership and analyzing claims data as well as clinic data, Michelle created an employee-facing communication aimed to increase clinic utilization in an effort to reduce claims tracking toward the District plan. On Friday, January 19 Michelle is hosting a lunch and learn for the Denmark School District reviewing how each of their plans work, how to understand an EOB and share cost savings strategies.

Furthermore, Michelle is also a contributing member of the K12 Task Force for the Northeast Manufacturing Alliance (NEWMA) connecting school districts, manufacturers, technical and four-year colleges in the area. In 2021 and 2022 she led a roundtable session connecting district members with manufacturers in the community. Michelle is also in her seventh year of serving on the Fall Planning Committee for the WASBO Fall Conference. She not only serves on the Board but has also presented at the conference on several occasions, most recently at the Spring and Fall Conferences in 2023.

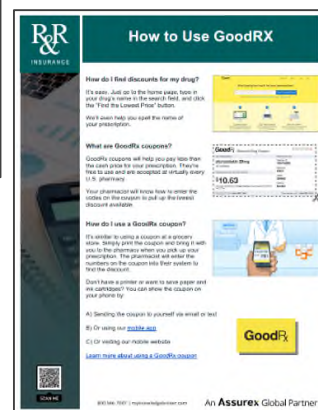
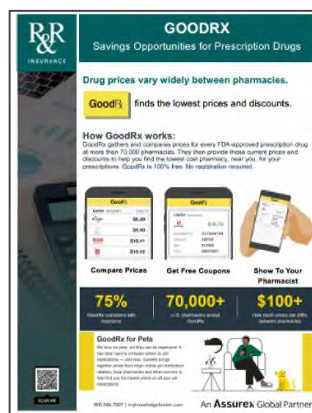
R&R Insurance specializes in employee communication services. We see our primary audiences as:

- Wauwatosa School District employees, their families, and leadership/administrative staff.
- The carriers providing your coverage and services.

Our responsibility is to improve the knowledge and perceived value of the Plan to participants. This is done by simplifying written and verbal communication to clearly express the intent of the message as an extension of your Benefits Department. We will deliver on this commitment through the following approaches:

Promote/Educate/Advocate

- Conduct employee educational meetings to increase consumer awareness in their healthcare choices as well as assist with enrollment meetings.
- Assist with drafting and coordination of employee communications in an effort to educate employees in understanding the full value and benefits of the plans offered.
- Provide ongoing information on the latest in benefit trends and changes in the industry.
- Proactive communication strategy: information shared is current, relevant, and geared toward employees to promote consumerism with better education and resources for employees.
- Core Services for Employee Benefits.
- R&R Insurance Benefits service staff will directly assist the employees/dependents of Wauwatosa School District in resolving claims/eligibility issues as well as answering benefits questions.
- R&R Insurance will provide feedback to Wauwatosa School District leadership as appropriate regarding resolution of employees/dependents/service issues while protecting PHI (Personal Health Issues).
- We believe in educating employees on how to access the new transparency pricing tools available by the carrier partners. We also create customized communications including videos on topics such as how one accesses the transparency tool as well as how insurance works. As an example, below is a snippet of a video we created for a client regarding how to use the transparency tools. We have developed monthly campaigns dedicated to educating the staff on topics such as, virtual care, GoodRx, preventative where to get vaccinations, finding low cost, high quality providers for both medical and dental care, establishing a district contract with a local hospital system for low cost or no cost acute care and utilizing independent facilities for MRI and orthopedic care . . . to name a few.



For employees with plan design questions, we provide a Concierge/Team contact flyer so they can reach out to the benefits team directly.

20. Provide your assessment of current market conditions for the relevant benefits.

Shrinking revenue limits, inflation, pharmacy trends and changes, the need to focus on mental health as well as recruitment and retention and general lack of understanding regarding to insurance make the job of District administration and School Boards more complicated than ever. For these reasons, it is critical that the Wauwatosa School District partners with an agency and consulting team with expertise in these areas.

We understand **Revenue Limits** and the fiscal responsibilities school districts need to adhere to. **Rising insurance rates** and medical trend (inflation) have lead to many district moving to self funding as the WSD has. With that said, there are opportunities within the current self-funded program offered by the Wauwatosa School District to continue to reduce spend. There are ways to capitalize on the current programs that may not have been implemented. We have developed monthly campaigns dedicated to educating the staff on topics such as, virtual care, GoodRx, Cost Plus Drugs, preventative care, where to get vaccinations, finding low cost, high quality providers for both medical and dental care, establishing a district contract with a local hospital system for low cost or no cost acute care and utilizing independent facilities for imaging and physical therapy....to name a few.

Additionally, the **pharmaceutical industry** is ever changing and is expected to account for 50% of a group's healthcare spend by 2025! With the introduction of biosimilars and gene therapies, it is essential to stay up to date on this volatile piece of healthcare and insurance. As an example, in 2023 there were 47 biosimilar drugs approved by the FDA. PBMs are excluding brand names and turning to biosimilars for savings. Just this week, CVS announced the exclusion of Humira. This means members need to be notified and educated on the change. Our team is proactively reaching out directly to impacted members prior to the notifications coming from CVS so they have a better understand of the change, as well as an advocate. The purpose of the change is to eliminate the \$7,000 per script spend on Humira and replace it with a \$600 per script cost. This is one example of a trend that must be monitored closely by your benefit partner.

Making a concerted effort to **focus on mental health** and mental health resources is essential to the success of any benefit program. Mental Health continues to be a concern and your benefit team has extensive experience presenting on 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 the District in a variety of ways, including Assessment of programs and making recommendations on how to expand and improve the programs to create a culture of health and productivity. Identify programs that will be put out to bid conduct RFP's, select wellness partners, negotiate and outline scope of work along with pricing; and provide customized presentations.

Consumer confusion regarding pricing and lack of understanding is another hurdle we can guide the District over. Our solution involves educating employees on how to access the new transparency pricing tools available by the carrier partners. We have created customized communications including videos on topics such as how one accesses the transparency tool as well as how insurance works, designed Navigator Resources members can access to help them learn where to do and how to use their benefits most efficiently and effectively.

Since Act 10, we recognize that school districts are competing like never before for top talent, making **recruitment and retention** a key market condition. Based on an interview Dr. Means provided in August, the Wauwatosa School District has been successful in filling positions, but the next step is ensuring they stay filled. Providing a competitive benefit program is one way to address this need.

With our expertise, we will provide education, solutions and a thorough market analysis throughout the year.



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2024 Employee Benefits Market Outlook | 5

2024 Outlook

This section explores important trends and challenges employers should monitor in 2024, discussing why they're important and how they might impact employers. These trends will likely impact and shape the employee benefits market throughout the upcoming year and beyond.

Rising Health Care Costs

Amid ongoing inflation pressures, employees and employers alike can expect their health care costs to increase in 2024. According to several industry surveys and reports, employers anticipate health care costs to grow between 6% and 8.5% in 2024, the largest increase in more than a decade. As a result, employer-sponsored health care plans may cost more than \$15,000 per employee. While mitigating rising health care costs has historically been one of the most pressing employee benefits challenges for employers, it's becoming increasingly difficult. As employers brace for further health care cost hikes in 2024 and beyond, they are urgently searching for solutions to manage their growing costs and address the long-term impacts of these increases on their organizations.

Some employers may be frustrated with the limited options to address their rising health care costs, especially since many may feel they've exhausted traditional approaches to mitigate health care costs; however, they can consider the following four drivers of 2024 health care costs and strategies to manage them:



Mental health challenges—Employees' mental health concerns and needs, such as depression, anxiety and substance use disorder, undoubtedly rose during the COVID-19 pandemic and continue to linger in its aftermath. Employees and employers alike will continue to notice a prolonged impact of mental health challenges. In response, employers are expected to continue to expand access to mental health support and services, and many plan to provide more options for support and reduce cost barriers to care. Organizations may also explore manager and employee training to recognize mental health issues, anti-stigma campaigns and flexible working arrangements so employees can discreetly seek mental health care during regular working hours.



Pharmacy costs—In 2024, pharmacy costs will continue to impact employers significantly. Specialty and costly prescription drugs, especially the high demand for diabetes and obesity drugs, and cell and gene therapies (CGTs) are behind employers' pharmacy cost increases in 2024. The rising median prices of new pharmaceuticals as well as the high prices of drugs already on the market are driving up employers' pharmacy costs. Additionally, the U.S. Food and Drug Administration (FDA) has been approving a greater number of high-cost drugs, which is causing drug price inflation. To address rising drug costs, employers can implement pharmacy management strategies, including prioritizing transparent PBM practices (e.g., requesting detailed reports, auditing PBM services, requiring compensation

and pricing disclosures, and negotiating contract terms) and plan design changes to address costly medications and treatments (e.g., prior authorization, step therapy and sites of care management).



Cancer treatment—Preventive screenings were a critical health care component disrupted during the pandemic. As a result, employers are anticipating more late-stage cancers among workers. In response to rising cancer care, employers can encourage advanced screening measures and maintain full coverage of recommended prevention and screening services. Employers can also monitor oncology clinical advancements (e.g., biomarker testing and immunotherapies) and help guide employees to high-quality care to improve health outcomes.



Health care delivery—Health care innovations, specifically on-site or near-site clinics and virtual care, gained popularity during the pandemic, but demand is starting to level out. This is likely the result of employers migrating to a hybrid or remote work environment, reducing the need for health services at the workplace. However, such types of care continue to be critical for employees as they prioritize primary or preventive health care. Moving forward, more employers are looking to expand health care offerings to better support primary care and mental health and prioritize employee health outcomes.

21. Describe the firm's expertise and assistance that can be provided to the Wauwatosa School District in ERISA compliance, update, reviews, and documentation (i.e. 5500)

R&R Insurance Services provides its clients with ERISA-compliance support through several means. However, it should be noted that ERISA is a federal law that sets minimum standards for employee benefit plans maintained by private-sector employers. Government employers are exempt from ERISA, including the Form 5500 filing requirements. Employee benefit plans maintained by governmental employers are exempt from ERISA's requirements. This exemption includes plans maintained by the federal, state or local (for example, a city, county or township) governments. ERISA's exemption for governmental plans also extends to plans established by an "agency" or "instrumentality" of a federal, state or local governmental entity. Although ERISA does not define these terms, the DOL has issued many written opinions on the scope of ERISA's exemption for governmental plans (for example, [DOL Advisory Opinion 2005-01A](#)). It is well established that a public school district (such as Wauwatosa School District) constitutes a governmental agency for purposes of ERISA and is therefore exempt.

22. Describe how your firm can assist us with the analysis necessary to determine the best strategy in response to healthcare reform.

R&R Insurance made a business decision early 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 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 where he was responsible for the large accounts business block. 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.

Healthcare reform is changing daily as clarifications and new regulatory interpretations surface. It is imperative that you have updated information available in the most simplified fashion possible. Pete's charge is to ensure that our school district partners are as well informed as possible as we understand they make business decisions impacted by Reform. Specifically, R&R can provide compliance guidance in the following legal areas with the 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, 5500, 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

As an example, Pete helped **one of our school partners that was facing a \$560k IRS penalty for ACA filings (before they worked with us)**. With his expertise, Pete identified the errors, assisted with the refiling and the **penalty was reduced to \$11,000**.

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

23. Based on your initial knowledge of the Wauwatosa School District's health and welfare plans (including medical, dental, flexible spending accounts, and health savings account), what initial priorities do you see that the Wauwatosa School District needs to address?

- In the next twelve months
- In the next three years

Based on what we currently know about the benefit program offered by the Wauwatosa School District there are various strategies that R&R would deploy to meet the goals of reducing overall healthcare spend, while maintaining high-quality benefits. Much like the WSD Continuum of Change, we will work with you to enhance programming and make positive changes.

Unbundling of your current Self-funding approach

An ASO self-funded model has some benefits such as ease of implementation. However, for long-term cost containment, employers look to move up the *Pyramid of Savings* to unbundle the various cost savings levers and have more control over their plan.



Unbundling allows our Analytics, Wellbeing and Consulting team to focus on the different cost drives and implement programs that better alleviate rising healthcare costs. Tools include the ability to:

- Better negotiate stop-loss contracts from dozens of carriers
- Market more effective TPA services
- Implement direct contracting arrangements for services. We understand the District is currently working with ATI, but there are additional direct contract options we have experience with i.e. imaging, direct primary care
- Offer a transplant carve out program and gene therapy rider to protect overall stop loss
- Effectuate more cost advantageous PBM options
- Determine the viability of near site / onsite clinic options
- Implement target programs to prevent potential high-cost claimants such as pre-diabetics

Our experience tells us that unbundling your TPA, stop loss and PBM provides the District with the most flexibility to drive savings. The ability to market stop loss alone recently netted savings of \$300,000 for a District partner of ours, and a re-evaluation of pharmacy benefit managers resulted in two rebate checks so far (Q1 and Q2) equaling \$245,000. The savings are there.

This sets the stage for pulling additional 'cost-containment levers' in the future and building a solid foundation for a fiscally responsible health plan that maintains a competitive benefit design.

Implementation of an online Enrollment Platform

R&R is a licensed provider of Employee Navigator. This easy-to-use program removes the need for paper enrollments, reduces enrollment errors, provides current enrollment information to help guide members in future enrollment decisions, serves a repository for "all things benefits" in terms of resources and communications, and more!

The platform centralizes your HR records online and syncs your employee data across multiple systems, including benefits administration, payroll, and time-off tracking. Employee Navigator is mobile friendly, available in Spanish, and very easy to use.

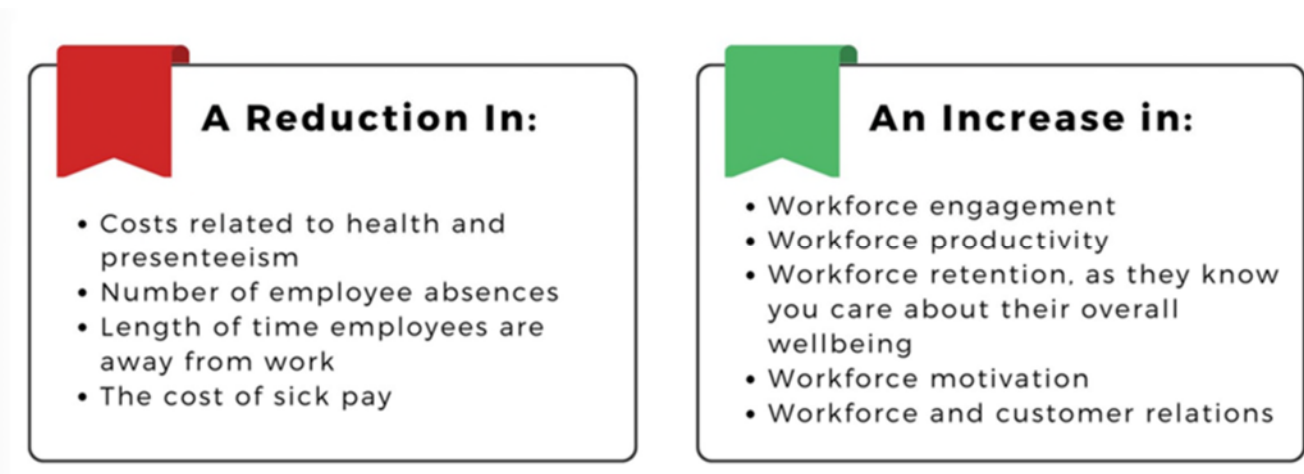
Evaluation of Life and Disability Program with NIS

We recently conducted an evaluation for a partner district that has had its disability and life programs with NIS since before Act 10. Upon marketing the program to a variety of carriers, we determined that we can save the district approximately \$30,000 in premium.

Well-being Enhancements and Programs

Robust, well-being initiatives with input and buy-in from teachers and staff is another important lever Districts can pull to contain costs and receive a return on investment.

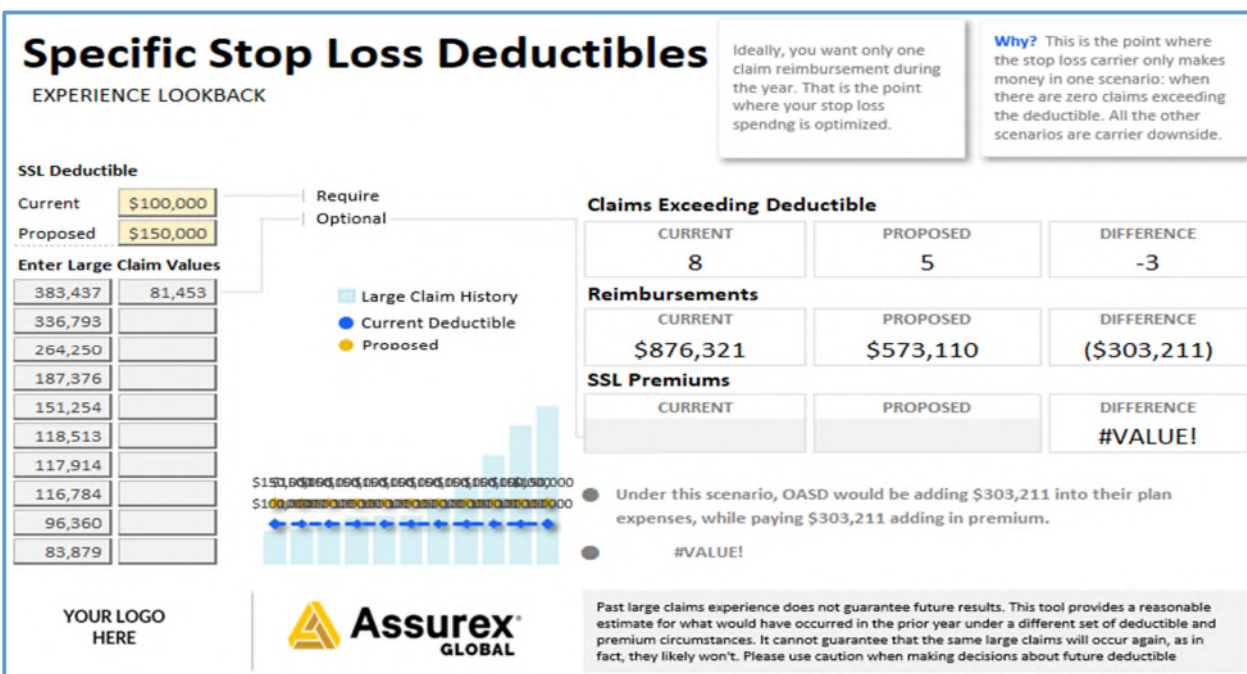
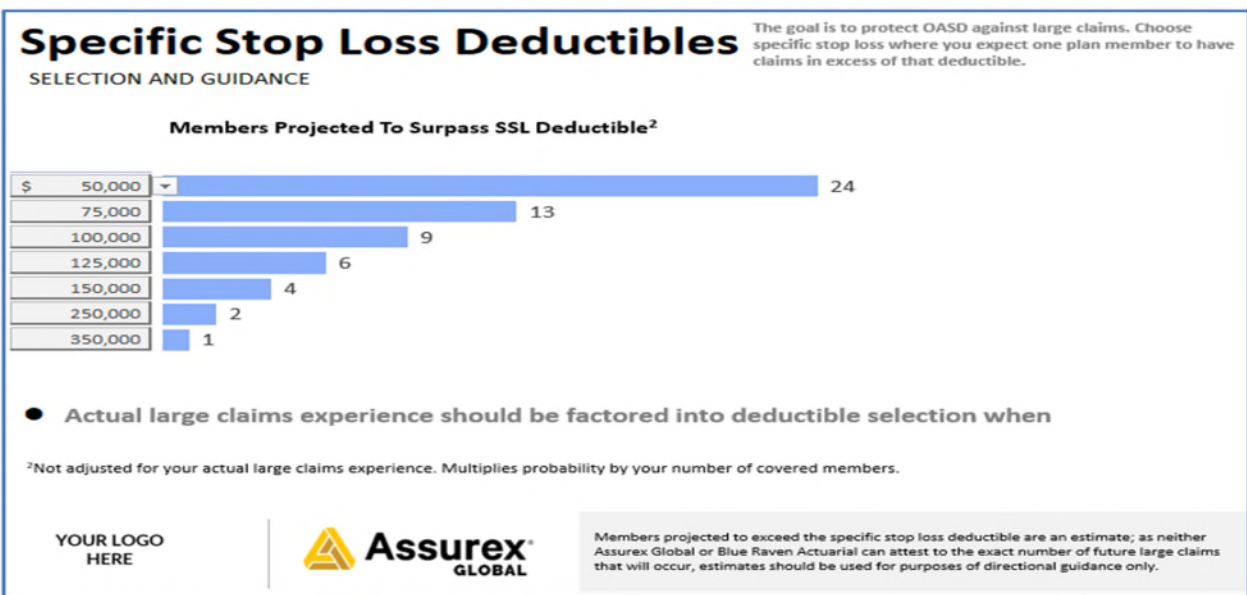
Chronic diseases continue to account for 60-75% of every dollar spent on healthcare. Connecting the dots for employees is critical and one of the things we excel at. With the proper Well-being plan you should see:



The R&R team would help build a multi-year well-being strategy focused on programs that have proven effective, engage employees and foster a culture of wellness. We would promote a strategy to consider that ties HSA funding, as well as possibly premium dollars to active participation in wellness initiatives.

Education

As we mentioned in our RFP, interview presentation and WASBO presentations on self-funding, employee education and engagement are paramount to cost containment. At R&R we collaborate with our partners to outline a year-round communication strategy for the staff, including in-person, video, virtual and written campaigns. A critical piece to the success of the education is commitment by district leadership to carve out the time to emphasize the importance of engagement. We know healthcare spend is a **big** piece of the budget, and we have seen hundreds of thousands of claims dollars avoided by helping to educate and navigate care options. We encourage you to ask our references about the educational opportunities we've provided for their staff members. We're proud to share that a union representative in Greendale requested an educational presentation for the 2023-2024 kick off meeting for the District because the members have embraced the concept of consumerism.



Our Initial 30-Day Action Plan

If R&R is chosen to partner with the District, our team would be ready to go with a well-thought out, methodical action plan for the year. For the first 30 days, we would utilize our 'Reading, Writing, Arithmetic' approach to initiate the action plan and start with our proprietary onboarding process.

The 'Reading' portion would entail our teammates gathering all your benefit plan documents, policies, invoices, benefit summaries from the various carriers, and past pieces & videos used to communicate with employees. We ask for copies of your Employee Handbook, District strategy documents as they relate to benefits and other employee-facing benefit documents. Our team would conduct a thorough review of the documents to gain a clear understanding of where you are with benefits as well as looking for any potential gaps (as an example, one client's dental eligibility was different in the policy compared to what they were presenting to employees). In addition, we would hold calls with your current carriers to learn more about your benefits, how the programs are running and any future initiatives, challenges and/or programs they see. During this process, we also review our compliance checklist to ensure there are no legislative gaps and we provide recommendations and best practices for efficiencies. As the 'Reading' portion is occurring, we begin the "Writing" portion by setting a meeting with the District benefit team.

This will help assist us with creating an effective service plan and strategic timeline with partner responsibilities to guide us over the year. We will meet with the District to review what you have done in the past, understand your current goals, and listen to your future objectives. We are aggressive listeners and will ingrain your needs into the action plan creation. Based on what we know thus far, our internal associates would start preparing what is needed to market your programs.

We also ask for health plan reports so that we can start the "Arithmetic" portion of our onboarding. R&R's Analytics team will begin to 'scrub the data.' This will help us when utilizing our robust analytical tools in the future to show, in real-time, the potential impacts plan design changes can have on cost and potential programs to contain healthcare spend.

We believe that claims data are a key source of insight for care patterns, cost drivers, and strategic direction that will be most beneficial to the District in achieving its goals.



Client Onboarding

R&R Insurance Services
Wauwatosa School District
2024



R&R
INSURANCE

R&R the knowledge brokers[®]
INSURANCE



Capitalize on our in-house Wellness specialist: R&R Insurance provides clients with up-to-date wellness 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 Wellness Specialist and is available to assist with the creation and implementation of a wellness program. She has vetted a number of wellness programs, sets up demonstrations with vendors and will partner with the District to select a carrier partner that fits the goals and needs of the District. As an example, she developed a BINGO challenge focused on mental health and worked with the carrier and District 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 wellness. Most recently, Taylor has taken the lead in vet financial fitness programs for our customer base.

R&R Insurance monitors utilization of multiple wellness related claims throughout the course of the year. Using this data, R&R Insurance will make recommendations to help determine and establish wellness programs that will pinpoint tactics and opportunities designed to have the greatest impact on behavioral change and population health improvement. We are able to do webinars and create videos when applicable to allow Wauwatosa School District to be informed as necessary and when applicable. Each employee population and institution culture are unique, and R&R Insurance recognizes the need for customization when developing a wellness strategy for each of our clients. R&R Insurance has been on the cutting edge of delivering wellness strategies to our groups. Based on our recommendation, many of our current clients have implemented multi-step wellness initiatives with measurable success in several areas.

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 the District in a variety of ways, including:

- Assessment of current wellness programs and making recommendations on how to expand and improve the programs to create a culture of health and productivity.
- Development of multi-year health and productivity strategies and budgets to achieve measurable health and productivity gains.
- Creation and implementation of data driven health and productivity-based programs that support and enhance the District's multi-year health strategy.
- Identify health and productivity programs that will be put out to bid conduct RFP's, select wellness partners, negotiate, and outline scope of work along with pricing; 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.

Sample Wellbeing Communications/Activities/Awards

Wellness Program Options

*Biometrics and incentives are not included in these costs

For a more accurate cost analysis, we suggest a formal RFP be obtained

Vitality®

[Program Demo](#)

- ✓ Status-based activity structure
- ✓ Includes health risk assessment, incentive management, device integration, points based, specialized courses, reporting access
- ✓ Preferred contracted biometric vendor options to utilize

Core Fees	Unit Cost	Fee Basis
Implementation Fee	\$0	Implementation fee waived
Administration Fee for 90 eligible employees	\$5.90 PEPM	Per employee per month (PEPM) Year 1 Annual increase capped at 5% Assumes a 3-year contract
Physician Form - Biometric Data Validation	\$3	Per Form Submitted

*Minimum \$750/month

motion connected

[Program Demo](#)

- ✓ Unique scorecard-based activity structure
- ✓ Includes health risk assessment, incentive management, device integration, 8 pre-set activity/holistic wellbeing challenges, reporting access
- ✓ Any biometric vendor can be utilized

Employees	Monthly
60 Employees	~\$4.47/month
100 Employees	~\$3.40/month
400 Employees	~\$1.53/month

Spouses included at no cost

Customized benefits bulletin one-time fee of \$1,500

Food for Fuel - 12 step lifestyle program \$8/year per Employee

Calculate your monthly employee cost [here](#)

treeo wellness

[Program Demo](#)

- ✓ Gamification-based activity structure
- ✓ Includes fitness/cooking classes, certified wellness coach, meditation, log daily activity, reporting access
- ✓ No biometrics or health risk assessment data

Employees	<100	101-500	501-1000
Monthly	\$99	\$299	\$499

Based on a 12 month commitment

Yearly \$999 \$2,999 \$4,999

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

RESOURCES TO CONTACT

- ✓ National Mental Health Hotline (free & confidential) 800.903.3787 or text NAMI to 741741
- ✓ Local WI NAMI Chapter 800.268.0000 www.namiewisconsin.org
- ✓ Mental Health-Related Distress Call or Text: 988 Chat 988lifeline.org
- ✓ National Suicide Prevention Hours: Available 24hrs. Languages: English/Spanish 800.273.8259
- ✓ Prevent Suicide Wisconsin
- ✓ Wisconsin 211 (Free Referral Helpline) Dial 211 from any phone
- ✓ HOPELINE Text HOPELINE to 741741
- ✓ Aging & Disability Resource Center



Mental Health Tools & Resources

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

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



NO BAKE ENERGY BITES

INGREDIENTS:

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

STEP 1:

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



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

R&R INSURANCE


American Heart Association.
Well-being Works Better™

2022
A CULTURE OF HEALTH
AND WELL-BEING

GOLD

WELCOA
WELL WORKPLACE BRONZE

2021
Go365
Inspire
Health
AWARD



R&R Insurance invested in our own internal Wellbeing unit that has years of experience assisting in evaluating the effectiveness of wellness programs and refining it as needed over time. Part of the evaluation will entail examining the original goals of the program, what it is supposed to achieve and whether the original goals are still the goals of the District today.

A review of the metrics used to determine success will also be conducted. Participant input can also be an important part of the evaluation process. There may be hurdles to achieving goals that the District does not realize should be taken into account. The information is compared to other programs to help determine if the plan is achieving its intended purpose, if tweaks are needed or even a wholesale change. Our team has the expertise needed by the District.

The success of a wellness program can be determined in many different ways depending on what the desired end goals are. R&R Insurance will work with your team to help track employee engagement as well as analyze biometric data that most often directly impacts claims costs year-over-year. By tracking and analyzing data, we can determine whether the existing wellness program has proven to be successful or not. If changes are recommended to improve the overall employee base, R&R Insurance will assist with creating a strategic plan around wellness, which in turn will help to drive costs down and make the overall employee base more knowledgeable and healthier employees.

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

We will support the Wauwatosa School District in a variety of ways, including:

- Assessment of current wellness programs and making recommendations on how to expand and improve the programs to create a culture of health and productivity.
- Development of multi-year health and productivity strategies and budgets to achieve measurable health and productivity gains.
- Creation and implementation of data driven health and productivity-based programs that support and enhance the Wauwatosa School District multi-year health strategy.
- Identify health and productivity programs that will be put out to bid conduct RFPs, select wellness 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.

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As previously mentioned, at R&R we see our role as a trusted advisor and extension of the District leadership 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:

Utilize Our Medicare Division: 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!

N14 W23900 Stone Ridge Drive
Waukesha, WI 53188
MyKnowledgeBroker.com | 800.566.7077

R&R
INSURANCE
The knowledge brokers™



R&R
INSURANCE

The Four Parts of Medicare

we know.

R&R
INSURANCE

How do I sign up for Medicare?

we know.

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

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

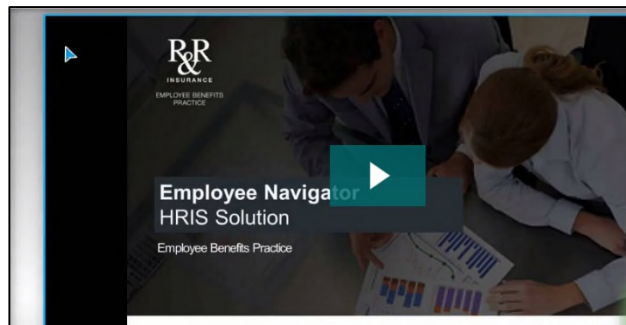
Access SHRM Recertification Provider: R&R is recognized by the Society for Human Resource Management (SHRM) to offer professional development credits (PDCs) for the SHRM-CP® or SHRM-SCP®. Our in-house resources offer several compliances related PDC accredited webinars throughout the year. R&R will also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



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

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

Benefit from Employee Navigator: 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 Skyward. This not only saves time, but it reduces enrollment and payroll deduction errors.

Consider Assistance with a Dependent Eligibility Audit: At R&R, we have found that our district partners 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 district partner's census, we found the district to be paying coverage and claims for six dependents that should no longer have been on the plan. It is the responsibility of the district to monitor and notify carriers of changes, and at R&R we can assist with this evaluation and procedural development.

Employer or Enhance an Onsite/Near-site Clinic Partnership: Our Strategic Wellbeing Consultant, Taylor Hahn, has extensive experience working with schools and private 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 wellness 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.

Michelle has guided districts through the provider evaluation process and assisted in the establishment of both on-site and near-site clinics through Aurora, Thedacare, and Prevea. When working with a school district that was self-funded, Michelle helped the district install a cost share program intended to guide employees to tier-one premium designated providers.

Tier one providers have the highest quality ratings and are the lowest cost providers in the network. Based on claims, district administrators wanted to devise a plan to allow choice yet encourage employees to seek high quality care that was also cost effective.

Under Michelle's guidance, the TPA modified their plan design and SPD allowing the district to implement a \$100 cost share for non-premium designated providers. There was also a cost share incentive added to use certain providers for orthopedic procedures.

25. Describe your fee structure for: Note, WSD will give significant preference to proposals that are fee only.

- **Placement of insurance and/or administrative services;**

The Service Agreement that has been proposed to Wauwatosa School District provides for R&R Insurance to be compensated for all employer-sponsored coverage through a fixed fee in lieu of standard agent commissions normally paid by any carriers involved. Compensation to R&R for all voluntary lines of coverage would be commission-based. Compensation for placement of insurance and/or administrative services is included in the monthly billed fee.

26. Complimentary Services that your firm provides; describe these services and the additional costs if any;

Our consulting services are comprehensive and nearly all encompassing; meetings, patient advocacy, reporting, analytics, wellness programming, compliance, Medicare support, document creation, surveys, benchmarking, newsletters, videos and presentations are all part of our total consulting package.

We have done our best to delineate the services we will deliver on in a simplified format as supported by our "Service Agreement/Scope of Services," which is included with our responses to your RFP. We have also tried to clarify any services that are specifically excluded.

27. Fees for other or optional services that may be purchased. Include a description of other or optional services that the firm provides that have not been listed.

Notably, Employee Navigator has a small separate fee for implementation (\$1,250) and renewal (\$500) but, we have done our best to delineate the services we will deliver on in a simplified format as supported by our "Service Agreement/Scope of Services," which is included with our responses to your RFP. We have also tried to clarify any services that are specifically excluded. We remain open to discussing and considering any other services with the District 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.

28. Explain your recommendation on how these fees can be funded (commissions, fees based on per hour of service, annual retainer fee, combination). Be specific by line of coverage if needed.

The type and amount of compensation that R&R will receive will depend on what compensation arrangement is finally negotiated with the Wauwatosa School District. R&R has the flexibility to engage in all forms of compensation for our services witnessed in the marketplace today. The Service Agreement that has been proposed to Wauwatosa School District provides for R&R Insurance to be compensated for all employer-sponsored coverage through a fixed fee in lieu of standard agent commissions normally paid by any carriers involved. Compensation to R&R for all voluntary lines of coverage would be commission-based.

R&R Insurance will help direct the Board to its “North Star” by offering a comprehensive, fiscally sound benefits program. We will ensure that the educators of the Wauwatosa School District have the support and resources they need to help their students thrive.

Wauwatosa School District Board of Education

North Star



We believe in...

a relentless commitment to the academic achievement of all students, no exceptions.

We will ensure...

we have excellent educators in our schools and that they have the support and resources they need to thrive in ensuring students learn and grow to their potential.