

**PROFESSIONAL SERVICES AGREEMENT BETWEEN  
THE CITY OF DORAL  
AND  
NATIONAL MARKETING GROUP SERVICES, INC.  
FOR  
AGENT OF RECORD FOR INSURANCE AND ADDITIONAL BENEFITS**

**THIS AGREEMENT** is made between **NATIONAL MARKETING GROUP SERVICES, INC.** an active, for-profit Florida corporation, (hereinafter the "Provider"), and the **CITY OF DORAL, FLORIDA**, a Florida municipal corporation, (hereinafter the "City").

**WHEREAS**, the City seeks to provide the most competitive and cost-effective insurance plans and benefits for its employees; and

**WHEREAS**, on May 28, 2015, the City of Doral (the "City") issued Request for Proposal #2015-14, "Employee Health Benefits Broker/ Agent of Record Services (the "RFP")" (the RFP) for the purpose for the purpose of soliciting proposal for employee insurance benefits; and

**WHEREAS**, via Resolution 15-174, a two-year contract with an option to renew for an additional two one-year periods was awarded to National Marketing Group Services, Inc. ("NMS"); and

**WHEREAS**, the initial two (2) year period of the contract expired on January 31, 2018, the first one-year extension expired on January 31, 2019, and the second and final one-year extension will expire on January 31, 2020; and

**WHEREAS**, Resolution No. 19-192 granted the approval and implementation of the City's benefits for Fiscal Year 19-20, after careful consideration of the financial impact to the City and its employees, as well as the quality of health care benefits and review of the current medical benefits offering, past and current medical claims, Staff has requested the City Council to grant one-year extension as it will be in the best interest of the City of Doral; and

**WHEREAS**, National Marketing Group Services provides the City with competitive prices for its services, quality and reliability; and

**WHEREAS**, Section 2-321 of the City of Doral Code of Ordinances authorizes the wavier of the City's competitive bidding process, upon the recommendation of the City Manager that is in the City's best interest to do so due to the nature of the good and/or services; and

**WHEREAS**, the City Council approved staff's recommendation during its December 12, 2019 Regular Council Meeting via Resolution No. 19-317 and authorized the City Manager to enter into a two (2) year agreement with an option to renew for an additional two years.

**WHEREAS**, the Provider and City, through mutual negotiation, have agreed on the terms and conditions in this Agreement for the provision of services.

1. **Scope of Services/Deliverables.**

- 1.1 The Provider shall furnish professional services to the City as set forth in the Scope of Services, attached hereto as Exhibit "A", which is incorporated herein and made a part hereof by this reference.
- 1.2 The "Scope of Services" includes a Schedule for the Service which includes a breakdown of tasks, timeline and deliverables to the City.

2. **Term/Commencement Date.**

- 2.1 This Agreement shall become effective upon execution by both parties and shall remain in effect through February 1, 2022, unless earlier terminated in accordance with Paragraph 8. The City shall have two (2) one-year options to renew, and Provider shall maintain, for the entirety of the stated additional period(s), the same terms and condition included within this original Agreement. Continuation of the Agreement beyond the initial term, and the optional years, is a City prerogative, and not a right of the Provider.

The City Manager may extend the term of this Agreement by written notice to the Consultant.

- 2.2 Provider agrees that time is of the essence and Provider shall complete each deliverable for the Service within the timeframes set forth in the Schedule, unless extended by the City Manager.

3. **Compensation and Payment.**

- 3.1 The Provider shall be compensated in the following manner:

As compensation for the services contemplated herein and for performance rendered by National Marketing Group Inc. of its duties and obligations hereunder, the City shall pay to National Marketing Group, Inc a monthly fee of \$5,000.00 for Consulting fees. (The "Consulting Fee"). In no event shall the fees due under this agreement exceed budgeted funds.

- 3.2 The City shall pay Consultant in accordance with the Florida Prompt Payment Act.

- 3.3 If a dispute should occur regarding an invoice submitted, the City Manager may withhold payment of the disputed amount and may pay the Consultant the undisputed portion of the invoice. Upon written request of the Finance Director, the Consultant shall provide written documentation to justify the invoice. Any compensation disputes shall be decided by the City Manager whose decision shall be final.

4. **Sub-providers.**

4.1 The Provider shall be responsible for all payments to any sub-providers and shall maintain responsibility for all work related to the Service.

4.2 Any sub-providers used on the Service must have the prior written approval of the City Manager or his designee.

5. **Provider's Responsibilities.**

5.1 The Provider shall exercise the same degree of care, skill and diligence in the performance of the Service as is ordinarily provided by the provider under similar circumstances. The City in no way assumes or shares any responsibility or liability of the Provider or Sub Provider under this agreement.

6. **Conflict of Interest.**

6.1 To avoid any conflict of interest or any appearance thereof, Provider shall not, for the term of this Agreement, represent any private sector entities (developers, corporations, real estate investors, etc.), with regard to any City related matter.

7. **Termination.**

7.1 The City Manager for any reason may terminate this Agreement upon thirty (30) days written notice to the Provider, or immediately with cause, with cause. Cause for purposes of this Agreement shall be defined as: a material breach of this Agreement which Provider fails to cure within five (5) days of receiving notice from the City of such breach; a failure on the part of Provider to adhere to the City's reasonable requests regarding the objectives of this Agreement; and/or any act or omission of Provider that constitutes a violation of Federal, State, County, or City Law.

7.2 Upon receipt of the City's written notice of termination, Provider shall stop work on the project.

7.3 In the event of termination by the City, the Provider shall be paid for all work accepted by the City Manager up to the date of termination, provided that the Provider has first complied with the provisions of Paragraph 7.4.

7.4 The Provider shall transfer all books, records, reports, working drafts, documents, and data pertaining to the Project to the City, in a hard copy and electronic format specified by the City within 14 days from the date of the written notice of termination or the date of expiration of this Agreement.

7.5 If the Provider wishes to terminate this Agreement, it must provide the City with sixty (60) days written notice. Failure to provide the City with such days written notice may result in the Provider being unable to do business with the City in the future.

8. **Insurance.**

- 8.1 The Provider shall secure and maintain throughout the duration of this Agreement medical and/or commercial insurance of such type and in such amounts as required for Provider to operate its business.
- 8.2 The City may require proof of the aforementioned insurance prior to the commencement of the Services. The City further reserves the right to solicit additional coverage, or require higher limits of liability as needed, and depending on the nature of scope, or level of exposure.

9. **Nondiscrimination.**

- 9.1 During the term of this Agreement, Provider shall not discriminate against any of its employees or applicants for employment because of their race, color, religion, sex, or national origin, and to abide by all Federal and State laws regarding nondiscrimination

10. **Attorneys' Fees and Waiver of Jury Trial.**

- 10.1 In the event of any litigation arising out of this Agreement, each party shall be responsible for their attorneys' fees and costs, including the fees and expenses of any paralegals, law clerks and legal assistants, and including fees and expenses charged for representation at both the trial and appellate levels.
- 10.2 In the event of any litigation arising out of this Agreement, each party hereby knowingly, irrevocably, voluntarily and intentionally waives its right to trial by jury.

11. **Indemnification.**

- 11.1 Provider shall defend, indemnify, and hold harmless the City, its officers, agents and employees, from and against any and all demands, claims, losses, suits, liabilities, causes of action, judgment or damages, arising out of, related to, or any way connected with Provider's performance or non-performance of any provision of this Agreement including, but not limited to, liabilities arising from contracts between the Provider and third parties made pursuant to this Agreement. Provider shall reimburse the City for all its expenses including reasonable attorneys' fees and costs incurred in and about the defense of any such claim or investigation and for any judgment or damages arising out of, related to, or in any way connected with Provider's performance or non-performance of this Agreement. This section shall be interpreted and construed in a manner to comply with any applicable Florida Statutes, including without limitation Sections 725.06 and 725.08, Fla. Stat., if applicable.
- 11.2 The provisions of this section shall survive termination of this Agreement.

11.3 Ten dollars (\$10) of the payments made by the City constitute separate, distinct, and independent consideration for the granting of this indemnification, the receipt and sufficiency of which is voluntary and knowingly acknowledged by the Provider.

12. **Notices/Authorized Representatives.**

12.1 Any notices required by this Agreement shall be in writing and shall be deemed to have been properly given if transmitted by hand-delivery, by registered or certified mail with postage prepaid return receipt requested, or by a private postal service, addressed to the parties (or their successors) at the following addresses:

For the City: Albert P. Childress  
City Manager  
City of Doral, Florida  
8401 NW 53<sup>rd</sup> Terrace  
Doral, Florida 33166

With a Copy to: Luis Figueredo, ESQ.  
City Attorney  
City of Doral, Florida  
8401 NW 53<sup>rd</sup> Terrace  
Doral, FL 33166

For the Provider: Roger Gonzalez  
President  
National Marketing Group Services, Inc  
7705 NW 48<sup>th</sup> Street Suite 100  
Doral, FL 33166

13. **Governing Law.**

13.1 This Agreement shall be construed in accordance with and governed by the laws of the State of Florida. Exclusive venue for any litigation arising out of this Agreement shall be in Miami-Dade County, Florida.

14. **Entire Agreement/Modification/Amendment.**

14.1 This writing contains the entire Agreement of the parties and supersedes any prior oral or written representations. No representations were made or relied upon by either party, other than those that are expressly set forth herein.

14.2 No agent, employee, or other representative of either party is empowered to modify or amend the terms of this Agreement, unless executed with the same formality as this document.

15. **Ownership and Access to Records and Audits.**

15.1 All records, books, documents, maps, data, deliverables, papers and financial information (the "Records") that result from the Provider providing services to the City under this Agreement shall be the property of the City.

15.2 The City Manager or his designee shall, during the term of this Agreement and for a period of three (3) years from the date of termination of this Agreement, have access to and the right to examine and audit any Records of the Provider involving transactions related to this Agreement.

15.3 The City may cancel this Agreement for refusal by the Provider to allow access by the City Manager or his designee to any Records pertaining to work performed under this Agreement that are subject to the provisions of Chapter 119, Florida Statutes.

16. **Nonassignability.**

16.1 This Agreement shall not be assignable by Provider. The City is relying upon the apparent qualifications and personal expertise of the Provider, and such firm's familiarity with the City's area, circumstances and desires.

17. **Severability.**

17.1 If any term or provision of this Agreement shall to any extent be held invalid or unenforceable, the remainder of this Agreement shall not be affected thereby, and each remaining term and provision of this Agreement shall be valid and be enforceable to the fullest extent permitted by law, provided the severance of any term does not result in interest on any Bonds issued to finance the Fields being includable in gross income for federal tax purposes.

18. **Independent Contractor.**

18.1 The Provider and its employees, volunteers and agents shall be and remain independent contractors and not agents or employees of the City with respect to all of the acts and services performed by and under the terms of this Agreement. This Agreement shall not in any way be construed to create a partnership, association or any other kind of joint undertaking, enterprise or venture between the parties.

18.2 The Provider agrees that it will not take any Federal tax position inconsistent with it being a service provider.

19. **Compliance with Laws.**

19.1 The Provider shall comply with all applicable laws, ordinances, rules, regulations, and lawful orders of public authorities relating to the Service.

20. **Waiver**

20.1 The failure of either party to this Agreement to object to or to take affirmative action with respect to any conduct of the other which is in violation of the terms of this Agreement shall not be construed as a waiver of the violation or breach, or of any future violation, breach or wrongful conduct.

21. **Survival of Provisions**

21.1 Any terms or conditions of either this Agreement that require acts beyond the date of the term of the Agreement, shall survive termination of the Agreement, shall remain in full force and effect unless and until the terms or conditions are completed and shall be fully enforceable by either party.

22. **Prohibition of Contingency Fees.**

22.1 The Provider warrants that it has not employed or retained any company or person, other than a bona fide employee working solely for the Provider, to solicit or secure this Agreement, and that it has not paid or agreed to pay any person(s), company, corporation, individual or firm, other than a bona fide employee working solely for the Provider, any fee, commission, percentage, gift, or any other consideration, contingent upon or resulting from the award or making of this Agreement.

23. **Counterparts**


23.1 This Agreement may be executed in several counterparts, each of which shall be deemed an original and such counterpart shall constitute one and the same instrument.

**IN WITNESS WHEREOF**, the parties execute this Agreement on the respective dates under each signature: The City, signing by and through its City Manager, attested to by its City Clerk, duly authorized to execute same and by Provider by and through its President, whose representative has been duly authorized to execute same.

Attest:

  
\_\_\_\_\_  
Connie Diaz, City Clerk

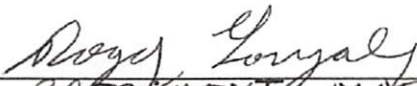
CITY OF DORAL

By:   
\_\_\_\_\_  
Albert P Childress, City Manager  
Date: Jan 14, 2020

Approved As To Form and Legal Sufficiency for the Use  
And Reliance of the City of Doral Only.

  
\_\_\_\_\_  
Luis Figueredo, ESQ.  
City Attorney

PROVIDER

By:   
\_\_\_\_\_  
Its: PRESIDENT, IVMS  
Date: 1-14-20



# **“EXHIBIT A”**

**RESOLUTION No. 19-317**

**A RESOLUTION OF THE MAYOR AND THE CITY COUNCIL OF THE CITY OF DORAL, FLORIDA, PURSUANT TO SECTION 2-321 OF THE CITY CODE OF ORDINANCES, WAIVING THE COMPETITIVE BID PROCESS IN FAVOR OF NATIONAL MARKETING GROUP SERVICES, INC.; AUTHORIZING THE CITY MANAGER TO EXECUTE A TWO (2) YEAR AGREEMENT WITH NATIONAL MARKETING GROUP SERVICES, INC. WITH AN ADDITIONAL TWO (2) YEAR EXTENSION UNDER THE SAME TERMS, CONDITIONS, AND PRICES OF THE ORIGINAL CONTRACT; AUTHORIZING THE CITY MANAGER TO EXECUTE THE CONTRACT AND EXPEND BUDGETED FUNDS ON BEHALF OF THE CITY; PROVIDING FOR IMPLEMENTATION; AND PROVIDING FOR AN EFFECTIVE DATE**

**WHEREAS**, on May 28, 2015, the City of Doral (the "City") issued Request for Proposal #2015-14, "Employee Health Benefits Broker/ Agent of Record Services (the "RFP")" (the RFP) for the purpose for the purpose of soliciting proposal for employee insurance benefits; and

**WHEREAS**, via Resolution 15-174, a two-year contract with an option to renew for an additional two one-year periods was awarded to National Marketing Group Services, Inc. ("NMS"); and

**WHEREAS**, the initial two (2) year period of the contract expired on January 31, 2018, the first one-year extension expired on January 31, 2019, and the second and final one-year extension will expire on January 31, 2020; and

**WHEREAS**, Resolution No. 19-192 granted the approval and implementation of the City's benefits for Fiscal Year 19-20, after careful consideration of the financial impact to the City and its employees, as well as the quality of health care benefits and review of the current medical benefits offering, past and current medical claims, Staff has requested the City Council to grant a two (2) year agreement with a two-year extension as it will be in the best interest of the City of Doral; and

**WHEREAS**, National Marketing Group Services provides the City with competitive prices for its services, quality and reliability; and

**WHEREAS**, section 2-321 of the City of Doral Code of Ordinances authorizes the wavier of the City's competitive bidding process, upon the recommendation of the City Manager that is in the City's best interest to do so due to the nature of the good and/or services; and

**WHEREAS**, based on the renewal rate, cost savings and quality of health care benefits, the Staff has recommended to the City Manager to waive of the competitive bid because it is in the City's best interest; and

**WHEREAS**, staff respectfully requests that the City Council authorize the City Manager to enter into a two (2) year agreement with an option to renew for an additional two (2) years.

**NOW, THEREFORE, BE IT RESOLVED BY THE MAYOR AND CITY COUNCIL OF THE CITY OF DORAL, FLORIDA, AS FOLLOWS:**

**Section 1. Recitals.** The above recitals are confirmed, adopted, and incorporated herein and made part hereof by this reference.

**Section 2. Waiver.** Pursuant to Section 2-321 of the City Code, and upon the recommendation of the City Manager, the competitive bid process is hereby waived in favor of National Marketing Services Group, Inc. This waiver in and of itself, absent an agreement, does not vest National Marketing Services Group, Inc. with any contractual rights.

**Section 3. Approval.** The agreement between the City of Doral and National Marketing Group Services, Inc, for Employee Health Benefits Broker/ Agent of Record Services and the City's voluntary benefits offering for one (1) year under the

same terms, costs and conditions, in an amount not to exceed budgeted funds, is hereby approved.

**Section 4. Authorization.** The City Manager is authorized to execute the agreement and extensions, and expend budgeted funds on the behalf of the City.

**Section 5. Implementation.** The City Manager and the City Attorney are hereby authorized to take such further action as may be necessary to implement the purpose and the provisions of this Resolution.

**Section 6. Effective Date.** This Resolution shall take effect immediately upon adoption.


The foregoing Resolution was offered by Councilmember Mariaca who moved its adoption. The motion was seconded by Vice Mayor Fraga and upon being put to a vote, the vote was as follows:

Mayor Juan Carlos Bermudez	Yes
Vice Mayor Christi Fraga	Yes
Councilwoman Digna Cabral	Yes
Councilman Pete Cabrera	Yes
Councilwoman Claudia Mariaca	Yes

PASSED AND ADOPTED this 12 day of December, 2019.

  
\_\_\_\_\_  
JUAN CARLOS BERMUDEZ, MAYOR

ATTEST:

  
\_\_\_\_\_  
CONNIE DIAZ, MMC  
CITY CLERK

APPROVED AS TO FORM AND LEGAL SUFFICIENCY  
FOR THE USE AND RELIANCE OF THE CITY OF DORAL ONLY:

  
\_\_\_\_\_  
LUIS FIGUEREDO, ESQ.  
CITY ATTORNEY



CERTIFICATE OF INSURANCE

NOTICE: This insurance provides professional liability (E&O) insurance coverage for properly licensed individual insurance agents and insurance consultants. It is written on a "claims-made and reported" basis and applies only to "written claims" first made against an insured and reported to the Insurer during the Named Insured's Certificate Period. No coverage exists for claims first made or reported after the Named Insured's Certificate Period unless an extended reporting period applies. (For those Named Insureds who are residents of or practice in New York State, no coverage exists for claims first made or reported after the end of the coverage relationship unless an Extended Reporting Period applies.) Defense costs reduce the Limits of Liability and are subject to the Retention. Please review the policy carefully and discuss the coverage with your insurance agent or broker. This certificate of insurance does not amend, extend, or alter the coverage afforded by the insurance policy, and coverage is subject to all of the terms, conditions and exclusions of the policy.

NAMED INSURED:
GONZALEZ, ROGER
NATIONAL MARKETING GROUP SERVICES, INC.
7705 NW 48TH STREET SUITE 100
DORAL, FL 33166

PRODUCER:
LOUIS MARINACCIO CA LICENSE #:0B44869
8430 ENTERPRISE CIRCLE, STE 200
LAKEWOOD RANCH, FL 34202

COMPANY AFFORDING COVERAGE: CONTINENTAL CASUALTY COMPANY

COVERAGE: THIS IS TO CERTIFY THAT THE INSURED LISTED ABOVE IS COVERED UNDER THE POLICY OF INSURANCE LISTED BELOW, FOR THE CERTIFICATE PERIOD INDICATED. THE INSURANCE AFFORDED BY THE POLICY DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICY.

Table with 4 columns: Policy Number, Certificate Period, Limits of Liability: Each Claim, Limits of Liability: Aggregate. Row 1: 596427449, 7/1/2019, 7/1/2020, \$1,000,000, \$3,000,000

Table with 2 columns: COVERAGE, RETENTION AMOUNT: Each Claim. Rows include Life, LTC, Accident, and Health (\$0), Medicare Advantage and Medicare Supplemental (\$0), Disability Income Insurance (\$0), Indexed Annuities/Fixed Annuities (if purchased) (Not Purchased), Variable Annuities (if purchased) (Not Purchased), Mutual Funds (if purchased) (Not Purchased).

Table with 2 columns: NOTICE OF CLAIMS, SPECIAL PROVISIONS. NOTICE OF CLAIMS includes Life Agent Intake Notice Administrator, CNA, CNA - Claims Reporting, PO Box 8317, Chicago IL 60680-8317, or via email: SpecialtyProNewLoss@cna.com.

Named Insured's Endorsements attached at Certificate Inception:

DATE: 7/12/2019 BY Authorized Representative [Signature]

This certificate of insurance is not a contract of insurance. It is merely evidence of insurance provided under a Master Policy. Covered claims are paid in accordance with the terms of the Master Policy. Coverage is provided based on representations made on the Named Insured's Application for Insurance. No coverage exists if the representations made on the Named Insured's Application for Insurance are discovered to be false. Failure to provide true and accurate responses to any of the questions on the Application for Insurance will result in the immediate voiding of the insurance coverage issued and/or the denial of claims asserted against the Named Insured. Coverage is in-force only if premium payments are current. A Policy Aggregate of \$50,000,000 applies under the Master Policy except with respect to those Named Insureds who are resident of or practice in New York State. A complete copy of the policy is available at www.napa-benefits.org/nd.

# FLORIDA DEPARTMENT of FINANCIAL SERVICES

NATIONAL MARKETING GROUP SERVICES, INC.

7705 NW 48TH STREET SUITE 100  
DORAL FL 33166

Agency License Number L068349

Location Number: 121340

Issued On 02/20/2014

Pursuant To Section 626.0428, Florida Statutes, This Agency Location Shall Be In The Active Full-Time Charge Of A Licensed And Appointed Agent Holding The Required Agent Licenses To Transact The Lines Of Insurance Being Handled At This Location.

Pursuant To Subsection 626.172(4), Florida Statutes, Each Agency Location Must Display The License Prominently In A Manner That Makes It Clearly Visible To Any Customer Or Potential Customer Who Enters The Agency Location.



Jeff Atwater  
Chief Financial Officer  
State of Florida



**DORAL**  
FLORIDA

2019 2020

# CITY OF DORAL

EMPLOYEE BENEFITS

Your Guide to Health & Wellness





## Message from the Mayor and City Manager

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Dear Valued Team Member,

We would like to thank you for your service to the City of Doral. As a member of the Doral team, you undoubtedly play a vital role in ensuring that our residents, customers, and fellow team members have the best possible experience as they live, work, learn, and play in this great City. With this in mind, we strive to provide a well-rounded benefits program that meets the needs of you and your family.

This year we are once again proud to offer a range of plans that help protect you in the case of illness or injury. The details of these plans can be found within this handbook.

We are excited to offer you this wonderful benefits package and hope that you have a safe and productive year as part of our team.



Juan Carlos Bermudez  
Mayor of Doral



Albert Childress  
City Manager

"The groundwork of all happiness is good health."



# WHAT'S INSIDE?

## HEALTH PLANS

Benefits Overview i

Employee Navigator 1

## HEALTH PLANS

Aetna HDHP/HSA 2

Aetna HMO I 3

Aetna POS I 4

## ANCILLARY

Dental Plan 5

Dental Provider Search 5

Vision Plan 6

Vision Provider Search 6

Life/AD&D 7

STD/LTD 7

Health Savings Account 8

## WHAT YOU NEED TO KNOW

Bi-weekly Deductions 9

Aetna Mobile App 10

Prescription Savings 10

Aetna Medical Provider Search 11

GoodRX 11

Employee Assistance Program 12

Aetna Member Programs 12

Flexible Savings Account (FSA) 13

FSA Eligible Expenses 13

Prescription Programs 13

Helpful Resources 14

Know Your Health Numbers! 15

Contact & Broker Support Back

**DISCLAIMER:** The summaries in this guide are not intended to supersede any insurance contract or any other agreement. Where discrepancies may exist, your official contract controls.

The 2019/20 Summary of Benefits Coverages can be found on your online employee benefits portal, Employee Navigator.

To obtain a hard copy of the updated 2019-20 SBC, please contact your human resource department.

To obtain a virtual copy of this handbook, please log into your employee navigator portal:

[www.employeenavigator.com](http://www.employeenavigator.com)

### PROVISIONS REQUIRED UNDER ACA

- ✓ Minimum essential coverage
- ✓ Minimum Value Standard (60%)
- ✓ Affordability

## Eligibility

We offer a variety of health and insurance benefits to meet your needs. This enrollment guide is designed to help you understand the comprehensive medical, prescription, dental and vision coverage available for you and your family. You'll also learn about the available life and disability insurance options, including what's provided to you at no cost from the City of Doral.

### ELIGIBILITY

**New Hire Enrollment** 1st of the month after 30 days

**Termination** End of employee termination month.

**Eligible Dependents** Spouse, Domestic Partners, biological child, adopted and/or stepchild, legal custody/guardianship

### SPECIAL ENROLLMENT PERIOD

You may add/change/drop coverage during a Special Enrollment Period. You must notify HR within **30 days** of qualifying event.

**Qualifying event** — hour reduction, termination of coverage, marriage, divorce, newborn

### COBRA- CONTINUED COVERAGE

The Consolidated Omnibus Budget Reconciliation Act (COBRA) requires most group health plans to provide a temporary continuation of group health coverage that otherwise might be terminated.

Upon termination, the employee will receive a package with options to enroll in coverage continuation for up to 18 months and/or 36 months with qualifying event.

## BENEFITS AT-A-GLANCE

### Medical

All **Aetna** plans are open access which means you do not have to obtain a referral to see a specialist.

City of Doral will sponsor 100% of the employee only level of the base plan.

### Dental

Optional PPO dental coverage is available for employee and/or dependents through **Aetna**.

### Vision

Optional vision coverage is available for employee and/or dependents through **Humana**.

### Life

100% Employer Paid  
2X salary rounded to the next higher \$1,000, up to \$300,000.

### Disability

**STD:** 60% of employee's weekly earnings up to a max of \$1,000

**LTD:** 60% of employee's monthly earnings up to a max of \$5,000 a month.



# ENROLLMENT PORTAL

1

## Steps to Enroll

There are only **three opportunities** to select coverage or make changes to your coverage. This includes at the end of your new hire waiting period, during open enrollment, or in the event of a qualifying event (see page i)

1

### Attend the open enrollment sessions—

Here you will learn about what's new for the upcoming 2019-2020 benefit year.

[Moving our dental policy to Aetna & moving Life ,AD&D, Disability to The Hartford]

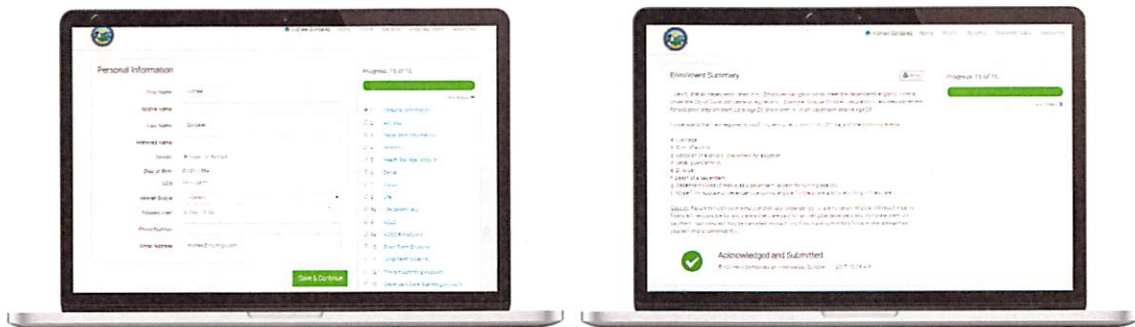
2

### Login to your benefit administration portal— EMPLOYEE NAVIGATOR [www.employeenavigator.com](http://www.employeenavigator.com)

Once you have logged in (*first time users are required to register*), update any personal or dependent information and review the benefits options.

- THIS IS YOUR OPPORTUNITY TO MAKE PLAN CHANGES, ADD OR DROP DEPENDENTS.

**Reminder:** Please review your home address and make sure all information is *up to date*.



3

### Benefit Selection and E-Signature

Finalize your elections by clicking the enrollment acknowledgement button on the last page of the enrollment process.

## Adding a Newborn

Adding a newborn to your health insurance? Newborns must be added to your plan within 30 days of the date of birth. If you add your newborn to your plan after 31 days, you will be responsible for the medical claims accrued during the uncovered period .

## MEDICAL PLAN 1

# aetna

HDHP		Network: / HNOOnly National Network
	Calendar Year Deductible	\$1,500 Individual/ \$3,000 Family
	Coinsurance	20%
	Max Out of Pocket	\$3,000 Individual/ \$6,000 Family
OUTPATIENT CARE		
	PCP Office Visits	20% after deductible
	Specialists Services	
	Chiropractic Services	
	Phys/Speech/Occ Therapy (60 visits)	
	Outpatient Surgery	
	Minor Diagnostics/ X-ray CAT, PET scan, MRI and other Diagnostic Imaging	
WELLNESS		
	Physical Exams	\$0 Copay & not subject to Ded 1x per year
	Well Woman Care	
	Mammogram	
HOSPITALS		
	Inpatient Hospital	20% after deductible
	Outpatient Hospital	
	Urgent Care	
	Emergency Room	20% after deductible
	Ambulance Services	
RX		
	Prescription Drugs	\$10/35/60 after deductible
	Mail Order Prescription (90)	\$25/87.50/150 after deductible
MENTAL HEALTH/ SUBSTANCE ABUSE		
	Mental Health Outpatient	20% after deductible
	Mental Health Inpatient	
	Substance Abuse Outpatient	
	Substance Abuse Inpatient	



City contributes 100% for the 'Employee Only' HDHP coverage



### Virtual Medicine through Teladoc

Video chat with a doctor on your mobile device\*, tablet or computer, and you can even get a prescription, if needed. Virtual visits can treat common health issues such as abdominal pain, acid reflux, strep or sore throat, cold, constipation, digestive issues and much



MEDICAL PLAN 2



HMO	NETWORK
Calendar Year Deductible	\$1,500 Individual / \$3,000 Family
Coinsurance	0%
Max Out of Pocket	\$3,000 Individual / \$6,000 Family
<b>OUTPATIENT CARE</b>	
PCP Office Visits	\$20 copay
Specialists Services	\$40 copay
Chiropractic Services (20 treatments)	\$20 copay
Phys/Speech/Occ Therapy (Limited to 60 visits )	\$20 per treatment
Outpatient Surgery	\$250 copay (deductible waived)
CAT, PET scan, MRI and other diagnostic imaging	\$250 copay
<b>WELLNESS</b>	
Physical Exams	\$0 Copay & not subject to Deductible 1x per year
Well Woman Care	
Mammogram	
<b>HOSPITALS</b>	
Inpatient Hospital	\$250/day x5, thereafter covered 100% (deductible waived)
Outpatient Hospital	\$250 copay (deductible waived)
Urgent Care	\$20 copay
Emergency Room	\$250 copay
Ambulance Services	0% after deductible
<b>RX</b>	
Prescription Drugs	\$10/35/60
Mail Order Prescription (90)	\$25/87.50/150
<b>MENTAL HEALTH/SUBSTANCE ABUSE</b>	
Mental Health Outpatient	\$40 copay
Mental Health Inpatient	\$250 copayment x day first 5 days
Substance Abuse Outpatient	\$40
Substance Abuse Inpatient	\$250 copayment x day first 5 days

HNOnly Network is a National Network



**Need to get an x-ray done?**

Save on your out-of-pocket costs by checking with local freestanding (outpatient) facilities before scheduling at a hospital. Freestanding facilities offer diagnostic services such as x-rays, diagnostic imaging, CT scans and more (with lower copays/lower coinsurance than hospitals.)

## MEDICAL PLAN 3



POS		NETWORK	OUT-OF-NETWORK
	Calendar Year Deductible	\$500 Individual / \$1,000 Family	\$1,050 Individual / \$2,100 Family
	Coinsurance	0%	30%
	Max Out of Pocket	\$1,500 Individual / \$3,000 Family	\$6,350 Individual / \$12,700 Family
<b>OUTPATIENT CARE</b>			
	PCP Office Visits	\$25 copay	
	Specialists Services	\$25 copay	
	Chiropractic Services (20 treatments)	\$25 copay	
	Phys/Speech/Occ Therapy (Limited per 60 visits)	\$25 copay	30% after Deductible
	Outpatient Surgery	\$0 after deductible	
	CAT, PET scan, MRI and other diagnostic imaging	\$0 after deductible	
<b>WELLNESS</b>			
	Physical Exams	\$0 Copay & not subject to Deductible	
	Well Woman Care	1x per year	
	Mammogram		30% after deductible
<b>HOSPITALS</b>			
	Inpatient Hospital	\$0 after deductible	
	Outpatient Hospital	\$0 after deductible	30% after deductible
	Urgent Care	\$50 copay	
	Emergency Room	\$100 copay	
	Ambulance Services	0% after deductible	Benefits paid at HMO benefit level
<b>RX</b>			
	Prescription Drugs	\$10/35/60	
	Mail Order Prescription (90)	\$25/87.50/150	
<b>MENTAL HEALTH/SUBSTANCE ABUSE</b>			
	Mental Health Outpatient	\$25	
	Mental Health Inpatient	0% after deductible	
	Substance Abuse Outpatient	\$25	30% After Deductible
	Substance Abuse Inpatient	0% after deductible	

Aetna Health Network Option National Network



### It Pays to know!

Quest Diagnostics and LabCorp are the preferred labs to use within the Aetna network for your blood work and other services. Using Non-participating labs may cost you up to 7 times more than in-network labs. Search for participating facilities at: [www.aetna.com](http://www.aetna.com)

DENTAL



AETNA DPPO	IN NETWORK	OUT OF NETWORK
Individual	\$50	\$50/\$50
Family Limit	3 PER FAMILY	
Waived For Preventative	YES	
CO-INSURANCE		
<b>Type I:</b> Preventative	100%	100%
<b>Type II:</b> Basic Services	90%	90%
<b>Type III:</b> Major Services	70%	70%
<b>Type IV:</b> Orthodontics	50%	50%
ANNUAL MAXIMUM BENEFIT	\$5,000	\$5,000
ORTHODONTIA		
	Child Only	
Lifetime Orthodontia Max	\$1,500	
Coinsurance	50%	
<b>Office visit copay</b>	None	

Aetna Dental PPO provides flexibility in that you may choose a participating PPO dentist or you may use a dentist that is non-participating and still receive benefits.

Basic:			
Gingivectomy (a)*	90%	Incision and drainage of abscess*	90%
Amalgam (silver) fillings	90%	Uncomplicated extractions	90%
Composite fillings (anterior teeth only)	90%	General anesthesia/intravenous sedation*	90%
Stainless steel crowns	90%		
Major:			
Inlays	70%	Full & partial dentures	70%
Onlays	70%	Pontics	70%
Crowns	70%	Root canal therapy, molar teeth	70%
Anterior teeth / Bicuspid teeth	70%	Osseous surgery (a)*	70%
Surgical removal of erupted tooth*	70%	Surgical removal of impacted tooth (partial bony/ full bony)*	70%
Surgical removal of impacted tooth (soft tissue)*	70%	Implants	70%

\*Certain services may be covered under the Medical Plan. Contact Member Services for more details.



**Balance Billing**

When you go out of network you may be subject to balance-billing, which means a provider can bill you the difference between what they normally charge and the allowed amount.



## VISION

# Humana®

VISION	IN NETWORK	OUT OF NETWORK
Exams Copay	\$10	Up to \$30
Retinal Imaging	\$39 allowance	Not Covered
Materials	\$15	
COVERED SERVICES		
Single Vision Lenses	\$15	Amount over \$25
Lined Bifocal Lenses	\$15	Amount over \$40
Lined Trifocal Lenses	\$15	Amount over \$60
Lenticular Lenses	\$15	Amount over \$100
Frames	Up to \$130, 20% off balance over \$130	Up to \$65
Contact Lenses (elective)	Up to \$130, 15% off balance over \$130	Up to \$104
Contact Lenses (Medically Necessary)	\$0	Up to \$200
MEMBER DISCOUNTS		
Lasik	15% off retail price or 5% off promotional price for LASIK or PRK from the US Laser Network (LCA Vision).	
SERVICE FREQUENCIES		
Exams	Once every 12 months	
Lenses	Once every 12 months	
Frames	Once every 24 months	

JCPenney | optical

sears  
OPTICAL

OPTICAL

LENSCRAFTERS  PEARLE   VISION

## FIND A HUMANA VISION PROVIDER

To search vision providers employees can go to: [Humana.com](https://www.humana.com)

Click on "Find a Doctor or Pharmacy". Select **Vision**, and then Select **Vision coverage through your employer**. Click Humana Vision (Humana Insight Network). Enter zip code or click *Use My Location*.

## LIFE & DISABILITY



**THE HARTFORD**

### Life

Employer paid term-life insurance policy. Group Term Life Insurance is a way for employees to obtain valuable protection for their families. Employees must elect a beneficiary/beneficiaries at the time of their enrollment.

### AD&D

Benefit— 2 x BAE (base annual earnings) rounded to the next higher \$1,000.

Benefit Maximum: \$300,0000

Accidental Death 100%	Quadriplegia 100%
Loss of a limb 50%	Loss of sight: 100%
Paraplegia 50%	Loss of hearing and speech 100%

**Guaranteed Issue Amount** — 2 X BAE (base annual earnings) rounded to the next higher \$1,000

Accelerated Death Benefit — 24 months terminal illness period, 75% max benefit percentage

**Benefit Maximum:** \$300,000

### Age Reduction Rule—

Reduced by 35% at 65 years old

Reduced by 50% at 70 years old

## Disability

### Short Term Disability

**Definition of disability**—inability to perform own occupation and a partial (80%) earnings test.

STD benefits will replace a portion of your income after an employee is out of work one day for non-work related injury and 8 days due to a non-related sickness, and if you meet the requirements/definition for disability determination.

STD would pay 60% of employee's weekly earnings up to a max of \$1,000 a week.

**Elimination Period for accident:** 1 Day

**Elimination Period for Sickness:** 8 Days

**Maximum Benefit Duration:** 26 weeks

### Long Term Disability

LTD provides partial income replacement for up to a maximum period of time payable to an insured employee during disability while the employee is under the regular care of a licensed physician.

LTD would pay 60% of employee's monthly payroll up to a max of \$5,000 a month.

**Elimination Period for accident:** 180 days

**Maximum Benefit Duration:** Reducing Benefit Duration

\*For more details, please refer to your benefit summary

## HEALTH SAVINGS ACCOUNT [In conjunction w/ HDHP]

For the October 1, 2019—September 30, 2020 Plan Year



The Health Savings Account applies only for those employees who enroll in the HDHP. For the fiscal year of 2019-2020, The City of Doral will fund each health savings account with an initial funding of \$1,000 for those enrolled in single coverage and \$1,750 for Employee + Spouse, Employee + Child/ren, or Family.

If you enroll or are enrolled in the QHDHP you may elect to save funds into your HSA through pre-tax, payroll deductions. You will need to complete an Optum bank account application in order to receive the Health Savings Account funding from the City or to make payroll deduction into your account. Please allow up to 15 days to receive a Welcome Kit.

### Manage your HSA Online —

<http://enrollhsa.optumBank.com/enrollment#/?group=835486>

- Register for online banking
- Bill Payment
- Designate Beneficiary
- Make Deposit/Set up recurring deposits

2020	HSA Contribution Limits	Max Out of Pocket Limits
Employee	\$3,550	\$6,900
Family	\$7,100	\$13,800

Individuals age 55 or older may contribute an additional \$1,000.

If you are currently on an HDHP plan and you choose to move plans, you can no longer contribute into your HSA account. You can use any monies left to continue to pay for eligible medical expenses.



## HSA FACTS

- To be eligible to contribute to an HSA or receive employer contributions, you must be covered by a QHDHP. You may not be covered under another health plan such as your spouse or Medicare that is not also a QHDHP and contribute to an HSA.
- HSA money can be used to pay for qualified medical expenses, tax free
- HSA's are portable and money left alone in the account will accumulate on a tax free basis
- No use or lose provision
- You may withdraw funds using your HSA debit card or you may use the bank's automated phone system. Please remember to keep your receipts and maintain records in case you have to prove to the IRS that you have spent your HSA money on qualified, IRS 213d medical expenses.
- If you spend your HSA money on non-qualified expenses you will have to pay taxes and penalties.

## EMPLOYEE DEDUCTIONS

Employee Bi-weekly Deductions

TIER	AETNA HDHP	AETNA HMO	AETNA POS
Employee Only	\$0.00	\$18.96	\$47.72
Employee + Spouse	\$75.16	\$166.89	\$224.36
Employee + Child/ren	\$67.64	\$150.19	\$201.91
Employee + Family	\$140.92	\$250.32	\$336.53

DENTAL	PAY PER PERIOD	VISION	PAY PER PERIOD
Employee Only	\$3.79	Employee Only	\$2.07
Employee + Spouse	\$18.37	Employee + Spouse	\$5.18
Employee + Child/ren	\$23.01	Employee + Child/ren	\$4.97
Employee + Family	\$32.63	Employee + Family	\$7.90

## GET FIT DORAL

### Incentive Program Requirements

In order to be eligible to receive the full amount you **MUST** complete the following:



**Preventive Care Exam** Employees must complete one qualified wellness exam between 10/1/2019 and 9/30/2020



**Online Health Assessment** takes 15 minutes (\$50 gift card funded by Aetna Enhanced Wellness Package)



**Online Health Coaching** can take up to 30 days, and may take up to 45 days to be sent for processing for the email with reward

### Wellness Incentive Program Eligible Employees

- 1) Employees who enrolled in the health insurance plan **(AND)**
- 2) Complete program requirements to qualify for the incentives

*(For more details see Incentive Program Requirements to the left)*

### OTHER WAYS TO GET INVOLVED:

- Attend Annual Health Fair
- Attend Monthly lunch & Learns
- Onsite medical Clinics & more...

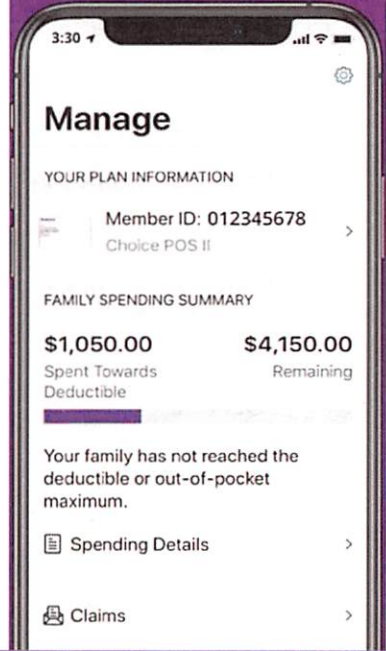
**EARN UP TO \$100 IN GIFT CARD REWARDS!**

## AETNA MOBILE APPLICATION

Manage your health wherever.



Easily view your benefits and progress toward deductible



Download **Aetna Mobile** on Google Play & Apple App Store



## GoodRx

### Search & Compare Prices

Find the lowest local prices for your prescriptions

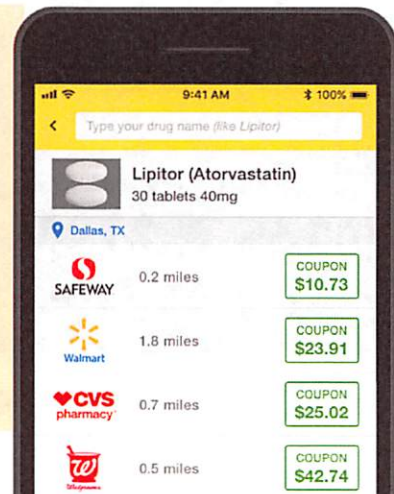
### Get Free Coupons

GoodRx coupons can save you up to 80% on your prescriptions at no cost to you

Mobile app available for your android or iPhone.  
Download today and start saving!

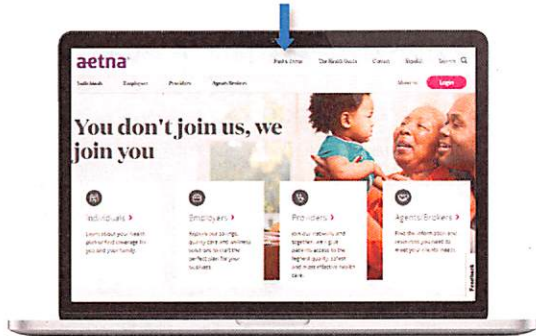


www.goodrx.com

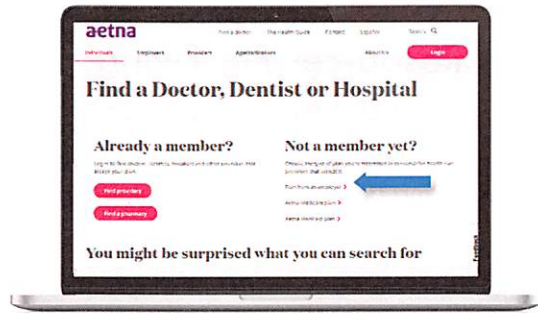


# HELPFUL RESOURCES

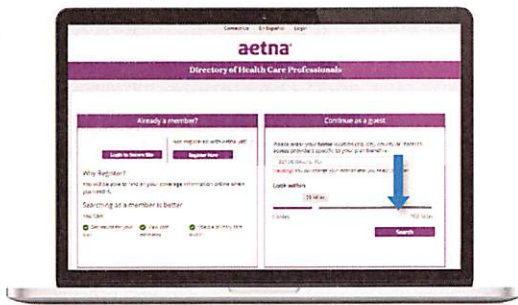
## Search for Providers within Aetna Network



Go to **Aetna.com** to search for primary care physicians, specialists, hospitals & labs



Select 'Plan from an employer'.



Type in Provider zip code and hit search



Aetna Open Access Managed Choice Plan (POS)  
Aetna Health Network Only (HMO/HDHP)

## How to Save on Prescriptions

Take advantage of local pharmacy discount programs and save some money. Many retail stores offer discounted rates for Generic Prescription Drugs.



**Walgreens**

Walgreens Prescription Club  
\$5 / \$10 / \$15  
30 Day Supply



**Publix**

Free Medication Program  
Free Antibiotics  
Up to a 14 day supply



**Walmart\***

\$4 Prescriptions  
30 Day Supply



**GoodRx**

Online Pharmacy Discount Finder  
Compare prices from local pharmacies,  
print coupons ..and more.

## EMPLOYEE ASSISTANCE PROGRAM

Resources for Living



### Aetna Resources For Living

'Resources for Living' offers timely assistance to members and anyone in their household who may be experiencing personal or work- related problems.

With Aetna— you have unlimited telephonic access to licensed clinicians who will provide you with the support and resources you need to start living a happy and healthy life.

In addition, Aetna provides their members with **three face-to-face counseling sessions** with an EAP network provider.

**Find help for issues involving —**  
*Mental health and well-being, depression and anxiety, personal/professional relationships, family discord, substance abuse, daily stress & more.*



**Aetna EAP anytime 1-855-283-1915**

CONFIDENTIAL SERVICES ARE AVAILABLE 24 HOURS/ 7 DAYS A WEEK

## Programs Available to Aetna Members



**Beginning Right—Maternity Program**

1-800-CRADLE-1 (1-800-272-3531)

**Aetna Health —Disease Management**

1-866-269-4500

**24/7 Nurse Line— Informed Health® Line**

1-800-556-1555

**Teladoc®**

1-855-Teladoc (835-2362)

## ONLINE RESOURCES

### Reawakening Center

an engaging, online source to help you assess your risk for depression, learn more about yourself, discover ways of dealing with different feelings and emotions, and access important information and tools.

1-877-327-5832

[www.AetnaEAP.com](http://www.AetnaEAP.com)

### MY LIFE VALUES

an engaging, online source equipped with self-help tools such as webinars, videos and articles to help you access important information on work life, family life and behavioral health issues.

[www.mylifevalues.com](http://www.mylifevalues.com)

Login & Password: RESOURCES

made available through

## FLEXIBLE SAVINGS ACCOUNT

### Healthcare + Dependent Care FSA



Toll Free: 888-868-FLEX (3539)

E-mail: [claims@myameriflex.com](mailto:claims@myameriflex.com)

### Flexible Spending Account (FSA)

Money is taken out of each paycheck before federal, state or Social Security taxes are taken out. The money is then placed into your FSA.

#### Healthcare FSA

If you have a health care FSA—

Your FSA may have an automatic payment feature. If we receive a request for payment (claim) for an eligible expense and you owe money, we will automatically pay it from your FSA.

For some purchases, you may have to submit a claim to be reimbursed from your FSA.

#### Eligible Healthcare Expenses

Acupuncture	Chiropractor
Ambulance	Contact lenses
Artificial Teeth	Insulin
Blood sugar kits (diabetes)	Eyeglasses/vision exams
Breast pumps	Sunscreen
Crutches	Fertility treatment
Drug addiction treatment	Lab fees
Drug Prescriptions	Hearing Aids

#### Over the Counter Medicine/Drugs

Must be prescribed\*

Acid Controllers	Pain Relievers
Aids for ingestions	Acne Medicine
Antidiarrheal medicine	Allergy and sinus medicine
Cold and flu medicine	Baby rash ointment
Feminine antifungal	Eye drops
Laxatives	Nasal sprays/drops
Lice treatment	Sleep aids

#### Dependent Care FSA



If you have a dependent care FSA

To be reimbursed for dependent care expenses, You must manually submit your claims. Be sure to spend your money before you lose it. You have a deadline for spending your FSA and for submitting claims for reimbursement.

If you have a dependent care FSA, it works a little differently. Money must be in your dependent care FSA before you can be reimbursed.

See your FSA plan documents to find out about your "use it or lose it" date and how long you

#### Eligible Child Care Expenses

Before/After-care	Nursery School
Babysitter	Pre-school
Child care	Sick child care
Nanny	Summer camp

#### Eligible Elder Care Expenses

Adult day care center	Senior day care
Custodial elder care (work-related)	Elder care (in your home or someone else's)
Elder care (while you work, to enable you to work or look for work)	

#### 2020 Flexible Spending Account Limits

Healthcare FSA	\$2,700
Dependent Care FSA	\$5,000   \$2,500 (Filing Separately)
Limited Purpose FSA	\$2,700













## HELPFUL RESOURCES

### Not sure where to go to go for treatment?

**If ever in doubt, get emergency care or call 911.**

Finding the right place to get treated can help save time and money.

DR OFFICE	WALK-IN CLINICS	URGENT CARE	EMERGENCY ROOM
Preventative care	Minor Illnesses— i.e. Indigestion	Flu/cold	Allergic reactions to food, animals
Shots/immunizations	Minor Injuries — i.e. bug bites	Coughs and sore throat	Broken bones
Routine check-ups	Screenings and monitoring	High fevers	Chest pains
Flu	Skin conditions — acne, sores	Vomiting, diarrhea	Constant vomiting
Fever	Travel Health	Cuts and severe scrapes	Severe shortness of breath
Sore Throat	Women's Services	Minor injuries/sports injuries	Deep wounds
		Minor burns	Weakness or pain in leg or arm

	Doctor's Office	Convenience Care (Ex. MinuteClinic)	Teladoc	Urgent Care	Emergency Room
What is the visit for?	Routine or preventive care, non-urgent care, or to manage a condition	Minor illnesses or injuries	Minor illnesses and injuries	Urgent but not serious or life-threatening	Immediate treatment for a serious or life threatening situation
What is the Wait?	 Appointment typically required	 Walk-in or same day appointment	 Appointment typically within an hour or less	 No appointment, wait times vary	 No appointment but could take hours for care
Estimated Cost?	 \$20-50	 \$20-50	 \$10-30	 \$20-50	 \$100 +

The Content is not intended to be a substitute for professional medical advice, diagnosis, or treatment. Always seek the advice of your physician or other qualified health provider with any questions you may have regarding a medical condition. Never disregard professional medical advice or delay in seeking it because of material you have read in this book.

# Know Your Health Numbers

## BLOOD PRESSURE

**Normal blood pressure < 120/80.**

High blood pressure (hypertension) can increase your risk for heart disease, stroke and kidney disease. You can play an active role in your health by making small modifications to your lifestyle:

- Eating a diet rich in fruits and vegetables, lean meats and low-fat dairy products
- Reducing your sodium intake
- Maintaining a healthy weight
- Reducing stress
- Including 30 minutes of aerobic exercise a day (ex. brisk walking)
- Quitting tobacco and limiting your alcohol



## CHOLESTEROL

**Normal ranges for total cholesterol: 100–199**

The goal is to have your LDL level lower than 100, **HDL greater than 40 if you are a male, or HDL greater than 50 if you are a female**

Triglycerides ranging from 45–149.

**SIMPLE WAYS TO HELP LOWER CHOLESTEROL :**

- Eating more fruits, vegetables, fish,
- Using olive, canola and flax
- Including more foods high in soluble fiber (oat bran, nuts, beans, lentils, peas)

## BLOOD GLUCOSE

**Normal range (fasting blood glucose) is < 100 mg/dL**

Helping reduce your risk for diabetes by eating foods low in saturated fats

- Including more foods high in soluble fiber (oats, peas, beans, carrots, apples)
- Adding at least 30 minutes of moderate exercise into your daily routine.



## HEALTHY WEIGHT

If most of your fat is around your waist rather than at your hips, you're at a higher risk for heart disease and type 2 diabetes.

**Waist Circumference:**

- Less than 35 inches for women
- Less than 40 inches for men



The Content is not intended to be a substitute for professional medical advice, diagnosis, or treatment. Always seek the advice of your physician or other qualified health provider with any questions you may have regarding a medical condition. Never disregard professional medical advice or delay in seeking it because of material you have read in this book.

Source: WebMD

## BENEFITS DIRECTORY & BROKER SUPPORT

### Medical Coverage

Aetna Medical  
1.800.627.4200  
Www.aetna.com

24/7 Nursing Line- Informed Health® Line  
1.800.556.1555

Teladoc®  
1.855.Teladoc (835-2362)

### Dental Coverage

Aetna Dental  
1.877.238.6200  
Www.aetna.com

### Vision Coverage

Humana Vision  
1.877.877.1051  
Www.humana.com

### Life & Income Protection

The Hartford Life & Disability  
Customer Service: 1.800.523.2233  
Disability Claims: 888.301.5615  
(Hartford Ability Advantage)  
Life Claims: 888.563.1124

### Benefit Consultants

National Marketing Group Services, Inc  
Michael Gonzalez  
Michael@mynmgs.com  
305.592.9926

### Health & Wellbeing Resources

Aetna EAP  
1.855.283.1915



# City of Doral



Employee Health Benefits Broker/Agent of Record  
RFP#2015-14

Due Date:  
Friday, June 26, 2015 at 11:00 am

Submitted by:



**National Marketing  
Group Services, Inc.**

Experience. Professionalism. Integrity.

7705 NW 48 Street, Suite 100

Doral, Florida 33166

(305) 592-9926

(305) 597-6426

[www.mynmgs.com](http://www.mynmgs.com)

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June 1<sup>ST</sup>, 2015

Edward A. Rojas  
City Manager  
City of Doral City Hall  
8401 NW 53 Terrace  
Doral, Florida 33166

**RE: Request for Proposal, RFP #2015-14 Employee Health Benefits Broker/Agent of Record**

Dear Mr. Manager:

National Marketing Group Services, Inc. is pleased to submit a proposal offer in response to the City of Doral's RFP for Broker/Agent of Record. We have reviewed all questions with great care and provided thorough responses within. NMGS fully understands the requirements, terms, conditions, and overall scope of work. Through our extensive experience serving as Broker and Consultant for various Florida public and private sector entities, we are confident that we will not only meet, but exceed the City of Doral's needs regarding employee health benefits, as we have over the last several years including **saving the City more than \$1.2 million** in premium since 2011. In addition, NMGS is willing and able to negotiate any other items that the City would like to incorporate into the final terms of agreement.

NMGS was founded in 1988 and our company philosophy is rooted in three fundamental principles:

- **Experience**- Over 27 years of consistent and exemplary service to our community
- **Professionalism**- Combining knowledge through continuing education with ethical and core values to achieve positive outcomes
- **Integrity**- Honoring the basic principal "do what's best for your client"

**Below is a list of recent recognition and awards of National Marketing Group Services:**

- 2014 Sunshine Award for Minority owned Business of the year
- 2014 AvMed Leader's Circle Award
- Aetna Premier Producer- Chairman Level 2012-Present
- Aetna Premier Producer- Chairman Level
- Honored Professional in National Register's "Who's Who" in Executive and Professionals
- United Health Care Echelon Award for Excellence 2004-2010

- Cigna Premier Agency Producer
- Neighborhood Health Preferred Broker Award

The following individuals are authorized to make representations on behalf of National Marketing Group Services, Inc.:

**Roger Gonzalez**, President

**Michelle Gonzalez Febres**, Vice President

**Michael Gonzalez**, Account Manager

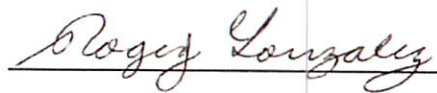
Each of the above individuals can be reached at (305) 592-9926, and are located at 7705 NW 48 Street, Suite 100 Doral, FL 33166.

As it relates to the scope of work and commitment to perform services within, NMGS has the onsite personnel, services platform and management resources to meet and exceed those requested in the Scope of Services section of the attached RFP. NMGS's service team is both extensive and well qualified. By virtue of our organizational structure and service team deployment design, we can ensure efficient management of any employee benefits program. Our staff regularly attends educational seminars throughout the year and pursues independent studies to broaden their knowledge and keep pace with the current status of trends, coverage terms and product development. Our account managers are licensed insurance professionals and PPACA consulting specialists.

As a leader in the healthcare benefits arena, and as a resident and business owner in Doral, we have been honored to serve this City with diligence and integrity since 2006. **Therefore, NMGS would like to take this opportunity to offer the City a four year agreement at \$55,000 per year.** We thank you for your review of our comprehensive response, and appreciate the opportunity to bring innovative and affordable employee benefit solutions to the City of Doral's workforce.

Thank you for your trust.

Sincerely,



Roger Gonzalez, President

NMGS' staff brings to the table a wealth of healthcare and private industry knowledge. We employ former executives, account managers, sales reps, and underwriters to manage each account and ensure the highest quality service. Our account management professionals have experience from many of the top national carriers. We also employ former Human Resources officers and managers who bring a unique perspective to the table and allow us to fully appreciate the difficulties our clients encounter on a daily basis in order to come up with quick and effective solutions.

NMGS continuously helps shape the healthcare and business landscapes on a local and national level as members of United and AvMed broker advisory councils as well as NAHU (National Association of Health Underwriters) and NAIFA (National Association of Insurance and Financial Advisors). We are continuously providing feedback to governmental associations and private insurance carriers on how to improve quality of coverage as well as contain costs. In addition, NMGS is a proud member of the following organizations: Certified South Florida Minority Enterprise, South Florida Hispanic Chamber of Commerce, Village of Key Biscayne Chamber of Commerce and Doral Business Council.



1. *State the name of your firm, including address, phone number and email address of main contact.*

### Company Information

<b>Firm Name:</b>	National Marketing Group Services, Inc.
<b>Address:</b>	7705 NW 48 Street, Suite 100 Doral, FL 33166
<b>Phone:</b>	(305) 592-9926
<b>Main Contact:</b>	Roger Gonzalez Sr.
<b>Email Address:</b>	Roger@mynmgs.com

2. *Provide information on the history and organizational structure of your firm, including year established, ownership and principal officers.*

NMGS was founded in 1988 by President, Roger Gonzalez who maintains 100% ownership of the company. NMGS is a family owned boutique firm with strong core values and a commitment to helping our clients contain costs, increase productivity, understand their benefits, and plan ahead to offer the best available options to their workforce. Staffed by industry executives, managers, underwriters and insurance professionals, NMGS has become a leader in employee benefits consulting. We have experience with the most intricate facets of the rating process, carrier contracting methodologies, fixed cost development, PPACA compliance law, insurance benefit plans, enrollment process and Human Resources. With state of the art technology platforms, we deliver valued customer service, informational data and planning tools. Currently, NMGS services over 200 public and private commercial accounts and manages over \$30,000,000 in insurance premium.

At the core of our company, is the desire to help our clients achieve the highest quality care and security. We distinguish ourselves by associating with the most recognizable and respected names in the industry and offering the most intimate and personalized service experience available. At NMGS, you'll never speak to an automated response system; a valued staff member will always pick up the phone to address your needs. When proposing options to our clients, there is no insurance company we steer from or to. Simply put, our goal is to present the best

available option that offers the highest level of protection at the most affordable price. Through our unique relationships with these insurance carriers along with our industry knowledge and excellent customer service, we have established a long history of managing the employee benefits of both small and large companies throughout the state of Florida and across the country. At NMGS, we genuinely and deeply care about our community that is why many of our staff members are involved in voluntary and charity work with organizations such as Overtown Youth Center, Nicklaus Children's Hospital, Doral United Cerebral Palsy, Humane Society, and Miami Dade Animal Shelter. NMGS has proudly served as the insurance consultant for The City of Doral's medical, dental, vision, life, AD&D, and disability benefits since 2006.

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### Principal Officers

<b>President</b>	<i>Roger Gonzalez, Founder &amp; President</i>
<b>Vice President</b>	<i>Michelle Gonzalez Febres</i>

## ORGANIZATIONAL CHART

<u>Name</u>	<u>Title</u>	<u>Address</u>	<u>Years Emp.</u>
Roger Gonzalez	President and Founder	7705 NW 48 St, Suite 100 Doral, FL 33166	27
Michelle Gonzalez Febres	Vice President and Office Manager	7705 NW 48 St, Suite 100 Doral, FL 33166	20
Michael Gonzalez	Account Manager	7705 NW 48 St, Suite 100 Doral, FL 33166	10
Juan Loriga	Medical Underwriter and Compliance Consultant	7705 NW 48 St, Suite 100 Doral, FL 33166	3
Roger Gonzalez Jr.	Operations Manager	7705 NW 48 St, Suite 100 Doral, FL 33166	15
Alexandra Velasco	Medicare Specialist	7705 NW 48 St, Suite 100 Doral, FL 33166	20
Michael Behrman	Senior Benefits Consultant	7705 NW 48 St, Suite 100 Doral, FL 33166	6
Jessica Ruiz	Executive Assistant and Assist Acct Manager	7705 NW 48 St, Suite 100 Doral, FL 33166	1
David Machado	Assistant Account Manager	7705 NW 48 St, Suite 100 Doral, FL 33166	5
Lina Lopez	Administrative Assistant	7705 NW 48 St, Suite 100 Doral, FL 33166	4



**3. Identify and describe pertinent experience of the firm, including servicing other public sector accounts, if any.**

NMGS has over ten years of experience working with public sector clients. At NMGS, we take pride in servicing the employee benefit needs of our local municipal entities. Currently, we manage over \$30,000,000 in collective insurance premium and over 200 public and private sector accounts. Through our technology platforms and informational resource tools coupled with our local community status, we are perfectly positioned to assist Human Resource departments manage all facets of the employee benefits arena. NMGS also has extensive experience in handling various funding arrangement plans including self-insured, fully insured, level funded, HSA's, HRA's, and FSA's. We partner with leading experts of various insurance carriers, financial institutions and third party administrators to manage these different types of arrangements as efficiently and effectively as possible. Through these relationships we can leverage our industry influence to negotiate the best available market rates. We also realize the need some clients may have for a more specialized level of service to cover a broader spectrum of employee management and insurance benefits. That is why NMGS has partnered with various underwriters, medical professionals, actuaries, and legal counsel to provide clients with a wide array of value added consulting services.

**PERTINENT ACCOUNTS**

<b>Name of Entity</b>	<b>Lines of Coverage</b>	<b>Years</b>
<b>City of Doral</b>	Medical, Dental, Vision, Life AD&D, and Disability & Supplemental	2006-Present
<b>Village of Key Biscayne</b>	Medical, Dental, Life, AD&D, and Long Term Disability	2010-Present
<b>Excelsior Charter Academy</b>	Medical, Dental, Vision, STD, LTD, Life w/ AD&D	2012-Present
<b>EE &amp; G Management</b>	Medical	2010-Present
<b>University Health Care</b>	Medical, Supplemental	2015-Present
<b>Horizon Contractors</b>	Medical	2011-Present
<b>Sound Hospitality</b>	Medical, Dental, Vision, Life AD&D, and Disability & Supplemental Insurance	2008-Present

In addition, below are a few pertinent items that hold significant relevance to the City of Doral. NMGS uses the following tools and resources to assist our clients in maintaining compliance with changing government regulations and assist HR manage their employee benefits:

- **HR360-** Legislative Updates, COBRA and State Laws, PPACA guidance, Hiring and Terming, Employee Handbooks, Salary Benchmarking tools and much more...
- **Online Enrollment Tool-** Manages employee benefits, enrollment, terminations, & communication
- **ACA Compliance Tracker-** Tracks employee hours and benefits for IRS reporting requirements
- **Monthly Newsletter-** Industry Updates, PPACA news, New Product info Wellness Tips and more...
- **PPACA Compliance Checklist-** Customized checklist of PPACA compliance requirements

Please see Section 5 Exhibit (C-F) for examples of our resources and tools.

- 4. Provide the name(s) of the agent/broker(s) to perform the work for the City and a brief statement as to why each agent/broker is qualified to provide the services herein. Identify areas of expertise for each consultant, resume citing experience and references, including licenses, designations/affiliations and any other pertinent qualifications.***

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**Roger Gonzalez Sr. – President, Doral, FL**

*Roger has been in the insurance industry since 1969. He earned a degree in Computer Science from the City University of New York and began his career as a programming analyst with Equitable Life Assurance in New York City. After rising through the company, he continued to progress to Underwriting and Policy Issue. From 1975-1985, Roger worked as Vice President and Chief Underwriter for American Banker's Insurance Group and Latin American Insurance Company, respectively. Here he was responsible for overseeing the underwriting and policy issue of life and health insurance products. In 1985 he moved into the sales arena and later that year he joined Finlay HMO and was responsible for business acquisitions and marketing of individual, Commercial and Medicare products. Seeing the market potential in the area, he decided to start his own agency*

“ The success of NMGS is rooted in the philosophy that the company and sales team are never complacent, never quit and maintain high credibility with their staff, carriers, and clients. ”



**National Marketing  
Group Services, Inc.**  
Experience. Professionalism. Integrity.

*and has successfully grown that business for the last 27 years. Roger holds a 2-18 Life and Health Insurance license. His areas of expertise are in carrier contract negotiations and client relations. His role and responsibilities include:*

- *Overseeing the carrier rating process to make sure clients are obtaining the best possible pricing from insurance companies*
- *Negotiating initial and renewal rates based on various information models*
- *Keeping in constant and open communication with current carrier to ensure client is receiving best possible service and benefits (i.e. health fair budget, up-to-date utilization reports, proper underwriting process, and claims resolution)*
- *Maintaining a presence with the client to establish and build professional relationships*

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**Michelle Gonzalez Febres- Vice President, Doral, FL**

*Michelle earned a Bachelor of Science Degree in Business Administration and Marketing from Nova Southeastern University. Michelle joined NMGS in 1998 when she first obtained her 2-15 insurance license (Life, Health and Variable Annuities). She started in the Medicare market negotiating contracts for physicians and managing their patient database. Her years in sales allowed her to build a client database of over 200 Medicare members. After five years she expanded into the employee benefits field where she acquired and managed over 300 clients. She managed middle market account segments. Her experience includes providing analysis of benefit plans and claims utilization, oversight of the evaluation process, and the management of various funding arrangements. With her years of experience and growth in the sales arena, Michelle brings a passion for engaging and educating hundreds of employees in the public and private sector. Michelle sits on the Board of Directors for the Overtown Youth Center, an organization that raises funds through community efforts in order to provide afterschool education and sports programs to the children in Overtown. Michelle is also one of the 12 “Damas de Lincoln”, for Lincoln Company. Lastly Michelle sits on the Board of Directors for the South Florida Hispanic Chamber of Commerce; an organization with over 1200 Hispanic members supporting leaders and the business community in South Florida. In 2013, Michelle was awarded Hispanic Executive of the Year by the Chamber of Commerce.*

*Her role and responsibilities include:*

- *Assisting with the initial and renewal rate negotiation process*
- *Putting together benefit booklets, Stewardship and RFP reports*
- *Reconciling billing issues*

- *Communicating with HR to resolve any pending issues*
- 

**Michael Gonzalez- Account Manager, Doral, FL**

*Michael is an account manager and benefits consultant for National Marketing Group Services, Inc. He has worked for NMGS since 2005 and has over twelve years of experience working in the healthcare and insurance industry. Michael has a degree in Business Administration from Florida International University and currently holds a 2-15 insurance license (Life, Health, and Variable Annuities) and 2-20 insurance license (Property and Casualty). His experience includes work in financial reporting and budget analysis, claims utilization studies, enrollment processing, technology platform integration, PPACA compliance and client management. Michael has been servicing the account for the City of Doral since 2012. His role and responsibilities include:*

- *Working directly with HR to manage and reconcile all ongoing benefit and billing issues*
- *Managing all enrollments, terminations, claims and COBRA submissions*
- *Conducting monthly orientation meetings to educate and inform new hires of their benefits and the enrollment process*
- *Overseeing the online enrollment portal the City uses to manage the benefits of their employees*
- *Ensuring all compliance documents are up to date and posted in a timely manner*
- *Putting together wellness program and health fair including contracting all participating vendors, acquiring budget, marketing materials, securing prizes and giveaways and coordinating event logistics*

*Michael is consistently and readily available whenever needed, and assists Human resources with any and all facets of the City's employee insurance benefits.*

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**Jessica Ruiz- Executive Assistant, Doral, FL**

*Jessica Ruiz is an executive assistant at National Marketing Group Services. She is the newest addition to NMGS, after expressing her special interests in Human Resources and Health Service Administration. She is currently pursuing her second Bachelor's Degree in Health Service Administration after being inspired by administrators at the Nicklaus Children's Hospital.*

*Jessica graduated from Florida International University in 2012 with a Bachelor's Degree in Psychology. Upon graduation, she became a Miami-Dade County Educator. As an educator,*

*Jessica was able to enhance her skills in leadership, organization and instructional design, and strengthen her communication and analytical skills.*

*Jessica dedicates a lot of her time to serving the community. She has served as an administrative volunteer in the Oncology Unit at Nicklaus Children's Hospital, participated in the "Pack 1 Million Meals" event hosted by AARP, and has volunteered in the Doral United Cerebral Palsy.*

*At NMGS, Jessica assists as account manager and executive assistant to the President and Vice President. Her roles and responsibilities include:*

- *Technical writing*
- *Graphic design*
- *Account servicing/Enrollment Processing*
- *Financial reports*
- *Event Coordinating*

**5. a) Provide a detailed list of services you will provide, as stated in the scope of services, and the associated fees as a lump sum. In addition, list services and fees for any other services outside of the requested scope.**

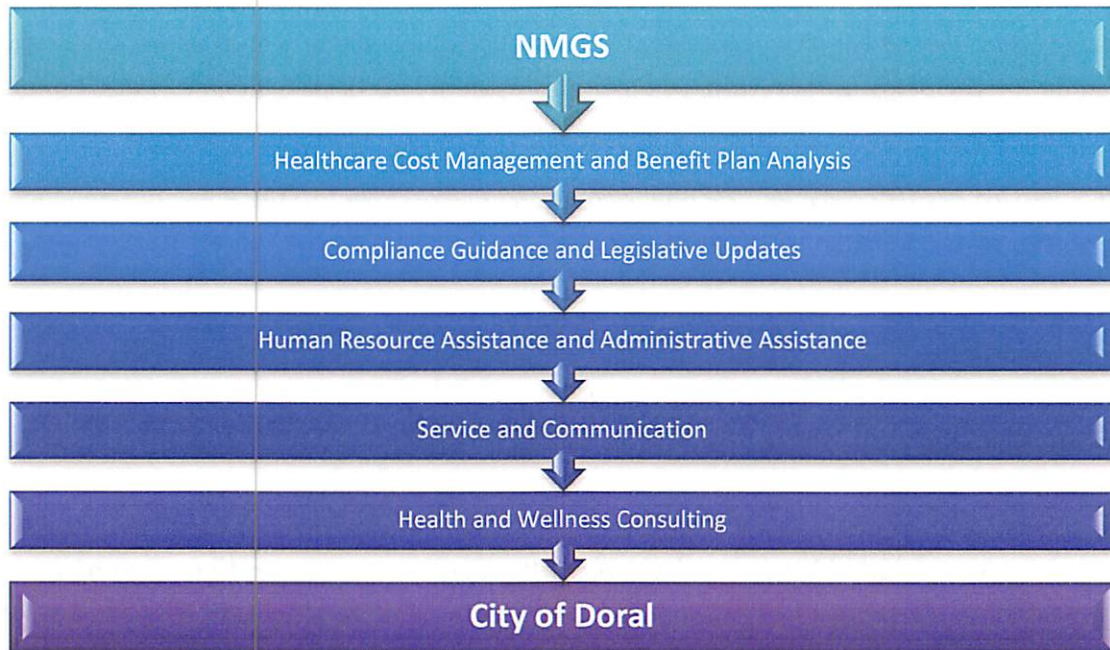
**b) Disclose of any and all fees, commissions, contingent commissions, overrides, bonuses and incentive pay offered by carriers that you and/ or your organization receive each year as a result of your organization's representation of their products/ services.**

**National Marketing Group Services has read and agrees to perform all services outlined in Section 4.2- Scope of Work under 4.1 Technical Specifications on pages 28-30.**

**NMGS will not collect any fees, commissions, overrides, bonuses, or other such outside payments aside from the agreed upon contractual fee with The City of Doral.**



Below is a flow chart illustrating the client advocacy services NMGS provides to their clients:



The following is a detailed list of services we will provide, as stated in the scope of services:

- 1) NMGS will continue to provide the City with an annual stewardship report including complete accounting and disclosure of fees and/or commissions earned on the account, observations on relevant changes in the insurance market, view on loss exposures facing the City of Doral, loss control activities and insurance policy summaries. In addition, this report will include a comprehensive and detailed account overview, premium cost analysis for the relevant year, pertinent PPACA compliance information, and a detailed list of key accomplishments throughout the year. The Stewardship report will display complete transparency with all services and fees rendered and will be performed at no additional cost. See exhibit (A) in Section 5 for a copy of sample stewardship report.
- 2) NMGS will continue to solicit and negotiate plan proposals and rate quotes from existing and alternate insurance carriers for annual renewals. It is our goal to obtain the highest quality coverage and the most affordable rate for the City. We will aggressively pursue alternate plan proposals and implement new strategies to obtain these results. NMGS will leverage wellness plan models, claims utilization reports, projected future trends, and alternate carrier quotes to drive rates down. Due to our positive relationships and valued

broker status with major insurance companies along with our extensive experience negotiating renewal rates, we are perfectly positioned to achieve positive renewal outcomes.

As we have done for the last nine years, NMGS will continue to be deeply involved in all aspects of the renewal negotiation process and make the best possible recommendation for the City.

- 3) NMGS will analyze claims utilization reports and cost saving options on a quarterly basis throughout the year. Our analysis will involve considering fully insured options vs. self-insured, implementing wellness programs to reduce employee utilization that will provide carriers with valuable information during the rating process, as well as restructuring benefit plans to lower monthly premiums. We will continuously look for alternative programs both traditional and innovative to ensure the City has exhausted all options before making any decisions. In addition, NMGS will consistently hold monthly meetings to educate employees on how to most effectively and efficiently use their benefits in order to keep medical loss ratios down. For example, statistically speaking, emergency room bills are 3-5 times higher than urgent care centers. By letting employees know to visit urgent care centers as opposed to the emergency room we can lower medical loss ratios significantly. NMGS facilitates this process by providing members with a list of urgent care facilities in their geographic area. Another example includes informing employees about facilities offering low cost prescription drugs without proof of insurance. If employees can obtain free or very low cost prescriptions without using their insurance plans, we can reduce the amount of overall claim submissions which will in turn keep MLR low. See exhibit (B) in Section 5 for sample customized utilization reports.
- 4) NMGS will conduct annual open enrollment benefits meetings for all employees, including preparation and presentation of annual benefit plans, changes to current plans, employee cost, employer contribution, enrollment process, and any changes in compliance law. This presentation will be in Power Point format and will be readily available to all employees in their personal login portal. See exhibit (C) in Section 5 for a sample of this presentation.
- 5) NMGS will prepare Employee Benefit Guides detailing, but not limited to, the following: pertinent provider information, health plan benefits, dental and vision plan overview, life insurance, disability insurance, qualifying events, and important contact information. Please see Exhibit (D) in Section 5 for a sample benefit guides.

- 6) NMGS will maintain an active and ongoing relationship with the service providers/insurance carriers to ensure smooth operation and delivery of benefits as well as facilitating prompt review and resolution of plan and claims administration issues. NMGS will have an account manager that speaks with each of the carrier representatives at least once a week to ensure all aspects of the City's coverages are running efficiently. We will keep close contact with said reps to make sure all enrollments, billing issues and claims are resolved promptly and without error. During the open enrollment process NMGS will organize meetings, presentations and delivery of benefit packages with all carriers. We will assure smooth transition between changes in benefit plans or insurance providers. In addition, NMGS will coordinate wellness incentives/events and ensure the carriers are providing all the benefits they offer. Your account manager will always be available to mediate any pending issues between carrier and client.
- 7) NMGS will make regularly scheduled visits to the City to respond to questions, solve problems, hold periodical wellness talks and assist with benefit administration. We will provide the City with a calendar of all regularly scheduled visits and be available when called upon for unscheduled meetings. Your account manager will visit the City on a monthly basis to conduct new hire orientation meetings and educate employees on their benefit plans, wellness, enrollment process, provider search and how to effectively manage their insurance plans. Additionally, NMGS will visit with HR on a quarterly basis to discuss claims utilization, compliance issues, and any other pending topics. Our close proximity to City Hall makes regularly scheduled visits consistently and readily available.
- 8) NMGS will provide a managing team of servicing representatives available to the City on a daily and ongoing basis. Each member of our staff will display the characteristics of our company philosophy...Experience, Professionalism and Integrity. Michael Gonzalez will be the primary account manager and will be backed by two assistant account managers. NMGS guarantees prompt responses and resolution on all issues by at least one of our representatives. The entire management of the account will be overseen by President, Roger Gonzalez.
- 9) NMGS will provide plan design and financial management performance updates throughout the plan year via detailed analysis, review, and evaluation of utilization, claims, cost, and trends. Each quarter NMGS will meet with HR and any other applicable representatives of the City to review detailed claims utilization reports that will affect the City's future renewal rates. Together, we will work on effective strategies to lower utilization and increase the overall health of the employees. For example, by analyzing the

claims data and identifying that many of the employees were using their benefits too often and leisurely, we implemented an employee cost driven plan that lowered their monthly premium, but placed a higher responsibility on their out of pocket costs. This drove employees to be more conscious of how and where to use their benefit plans and also increased work productivity by keeping employees out of unnecessary physician visits. Another example includes monitoring usage of out of network providers. By overseeing what physicians the employees were visiting, we were able to determine that excess claims were being paid to out of network providers, increasing out of network claims and medical loss ratios. By educating employees on which providers to visit, we were able to lower our clients MLR which in turn improved their renewal offer. For examples of our analysis reports please see exhibits (A) and (B) in Section 5.

- 10) NMGS will assist with the development and design of year-round informational materials, payroll stuffers, employee meetings, annual wellness fair etc. to maximize employees' knowledge and understanding of how to be the best consumer of the employee benefits plan. We will create and design with the City's approval: benefit booklets, communication materials, event marketing materials, and newsletters for distribution and posting on the employees online enrollment portal. NMGS will assist HR in coordinating the annual wellness fair and design and print the marketing flyers and passports. Please see section 5, exhibit (C-F) for sample benefit booklets and exhibit (J) for sample communication notices.
- 11) NMGS will coordinate and conduct health fairs and prepare all necessary materials. NMGS will contract all participating vendors, obtain prizes and giveaways, and coordinate raffles and logistics with HR. In addition, we will work with the best medical hospitals in South Florida to provide onsite medical screenings and wellness prevention benefits. NMGS will attempt to contract all vendors located in the City as long as they are qualified in order to help boost economic growth. We will try to improve upon employee participation and overall excellence of each and every health fair for as long as we're servicing the account. The last health fair NMGS conducted was nominated for the 2015 Florida worksite wellness award. See exhibit (E) in Section 5 for Sample Wellness timeline.
- 12) NMGS will work with HR to coordinate and attend monthly new hire orientation meetings. These meetings will be conducted by your account manager. The meetings will discuss the following topics:
  - Wellness and Preventive Care

- Relevant Carrier Information
- Enrollment Process
- Commonly Used Insurance Terms
- Benefit Plan Design
- PPACA compliance
- How to use Online Enrollment tool
- Q & A

13) NMGS will assist with compliance issues, including but not limited to: OPEB, COBRA, Section 125 Cafeteria Plan, HIPAA, FMLA, Healthcare Reform issues, and other state and/or federal mandated benefits and serve as a valuable resource to the City's Human Resources staff. We will inform HR of all compliance issues related to the employer mandate and provide a checklist on the areas of the law the City should be in compliance with. In addition, NMGS will assist with certain ACA IRS reporting requirements such as 1094 and 1095 B & C forms. We will provide two online resource tools (HR360 and Employee Navigator) that will help HR manage and answer all questions related to PPACA compliance law, HR solutions, hiring and terminating, COBRA laws, and much more. Please see, exhibits (C-F) in Section 5 for details on the above mentioned resources.

14) NMGS will inform the City of current issues in the area of benefit law and administration including advice regarding HIPPA, COBRA, Medicare, Healthcare Reform and other similar state and federal laws that govern group insurance programs. NMGS will meet with HR on a quarterly, if not monthly basis to discuss these topics. We will also have access to qualified staff or outside employee benefits legal counsel at no cost to the City. In addition, NMGS will send monthly newsletters with valuable information pertaining to HIPPA, COBRA, Medicare, Healthcare Reform and other similar state and federal laws. Finally, as mentioned above we will provide HR with two online resource tools (HR360 and Employee Navigator) that will help manage and answer all questions related to PPACA compliance law, HR solutions, hiring and terminating, COBRA laws, and much more. For more information on these resources please see, exhibit (F-H) in Section 5 for details on the above mentioned resources.

15) NMGS will keep the City abreast of changes in statutory and regulatory laws. Review pending legislation and report to the City of any impact it may have on existing or future benefits to include bearing the cost and expense for the reproduction of any copyrighted materials necessary for such performance. We will provide the City with monthly email updates on changing PPACA, HIPPA, COBRA, and Medicare regulation, and meet with HR

on a quarterly, if not monthly basis to discuss these topics. The City will also be given access to HR360, a personalized online portal with valuable information on all Human Resources laws and compliance issues. For more information on these resources please see exhibit (F-H) in Section 5 for details on the above mentioned resources.

- 16) NMGS will inform the City's Human Resources Department of changing legislation and legal decisions affecting employee benefits, and advise on methods to comply with these changes. We will provide the City with monthly newsletters containing valuable information pertaining to HIPPA, COBRA, Medicare, Healthcare Reform and other similar state and federal laws. NMGS will proactively address all compliance requirements with the City to ensure their complete cooperation with all laws pertaining to employee health benefits. NMGS will also provide guidance on laws pertaining to benefit administration, domestic partnership, same sex marriage and dependent coverage. Please see Section 5 exhibit (H) for samples of our monthly newsletters.
- 17) NMGS will provide compliant COBRA administration services via third party, to include responsibility for all COBRA notification obligations, premium collection, and provide documentation/reporting of same. Although NMGS doesn't administer COBRA ourselves, we will work with a TPA to ensure all terminated employees are notified of their rights to COBRA coverage and receive the proper enrollment materials. NMGS will also provide the City with the required COBRA notices for distribution. NMGS currently works with Aetna's COBRA division to manage The City of Doral's COBRA administration.
- 18) NMGS will coordinate the provision of Section 125 Administration services via third party and ensure that the plan remains in compliance with changing legislation. Currently, NMGS uses Aflac as the TPA for Section 125 implementation.
- 19) NMGS will provide an online benefits enrollment source that allows employees and employers to access, enroll and manage their benefits. Our software called Employee Navigator, allows for interface with benefit providers enrollment software, either directly or through reports, to allow for paperless enrollment for each benefit option. Each employee will have their own login to administer and view all their employee health benefits. Any changes made will be automatically sent to your account manager for processing. Your account manager will review submissions and confirm with HR that they are cleared for processing. Once completed he will send HR written confirmation of all changes made. This online software will be provided at no additional charge. For more

information on our online enrollment/HR Management software, please see Section 5, exhibit (G)

- 20) The City of Doral currently does not have an FSA in place as one was presented in 2011, but the City elected not to implement. However, at the City's request NMGS will solicit, analyze, review, and recommend account administration firms and plan designs in order to propose and present top viable FSA options. If elected, NMGS will provide assistance with the enrollment implementation of said FSA options.
- 21) NMGS will assist the Human Resources and Finance Departments with the dispute, changes, and reconciliation of billing invoices. Our online enrollment tool will generate reports that HR can use to reconcile against carrier bills. Your account manager will personally process all new hire and termination enrollments. NMGS will work directly with the carrier to ensure any errors and/or omissions are corrected immediately. Furthermore, your account manager will send written confirmations of each enrollment and termination to confirm all the above have been processed correctly and to minimize billing errors. One of our primary goals is to limit reconciliation disputes and changes as much as possible.
- 22) NMGS will assist with budget projections on future costs of benefit programs to include the determination of contribution structures for the City and for active and retired employees; assisting in plan/claim projections or forecasts for all health or wellness related costs; and plan and develop or create cost savings measures or recommendations necessary for future plan performance.
- 23) NMGS will assist with budget projections on future costs of benefit programs to include the determination of contribution structures for the City and for active and retired employees. We will assist with plan/claim projections or forecasts for all health or wellness related costs; and plan and develop or create cost savings measures or recommendations necessary for future plan performance. Each quarter during our claims utilization meetings, we will discuss claim trends and where we project renewals to come in based on medical loss ratio. We will provide pertinent claims data through the applicable 12 months prior and analyze the expected renewal rate. NMGS will consider self-insured proposals as a long term savings option. We will look at restructuring benefit plans each year to contain costs. Perhaps a switch to a more employee driven option is the best fit to ensure the City's employees are conscious of their out of pocket spend. Increasing a plans deductible and introducing a gap plan might be a good option to help

lower premium while protecting the employee from higher out of pocket costs. At least 60 days prior to the renewal date, we will obtain alternate carrier quotes and leverage those against the current carrier's offer to help drive rates down. Once we have decided on the best option for the City, we will assist in determining a contribution structure that will benefit both the City and its employees. Please see exhibit (A & B) in Section 5 for samples of our claims data reporting and budgeting models.

24) NMGS will diligently perform any other duties critical to the proper formation of the City's benefits package and its optimal operation and participation. This includes providing all of the above as well as intangible services that cannot be necessarily quantified, but can certainly be acknowledged. Providing personalized attention, immediate responsiveness, and handling the City's account with pride and dignity. As a commercial and personal resident of Doral, Roger Gonzalez has a vested interest in the economic growth and overall wellbeing of The City of Doral.

#### ***6. What makes your firm different than your competition?***

What make NMGS different from its competition, is our strong core values stemming from a family driven practice with a focus on personalized attention and immediate responsiveness. For example, rather than sending a report to the carrier with new hire enrollment, we personally enter and process each employee into the carrier system and send a written confirmation notice to HR in order to ensure submissions are handled with the least amount of errors as possible. Furthermore, with regard to responsiveness, we provide each client with our personal cell phones so no matter the time, if there is an emergency, we can be reached. At NMGS, you'll never speak to an automated response system; a valued staff member will always pick up the phone to address your needs. Above all else, is the simple but important fact that we genuinely care about the wellbeing and financial security of every single one of our clients. As a resident of the Doral community, our main goal is to protect those we serve and make sure the quality of the care they receive is second to none.

Finally, while we maybe a smaller boutique firm, we strongly believe the philosophy "quality over quantity". Despite our intentional firm size, there is no task we cannot handle or item we can't address. NMGS has extensive experience in handling both private and public accounts. Our resources and technology platforms are top of the line. We've been trusted by one of the largest insurance firms in the world (Aon Risk Solutions) to bring employers viable insurance solutions. We are leaders in the employee benefits arena and our reputation and creditability with our staff, carriers, competitors and clients speaks for itself.



***7. How will you manage costs? Citing specific examples from your relevant experience, explain the firm's approach to assisting local governments to maximize benefits for employees while minimizing financial impact of rising health insurance premiums. Detail innovative concepts your firm has employed in this area?***

NMGS' seasoned and experienced analysts review and evaluate each client's plan performance on a monthly basis, with further extensive analysis performed at scheduled intervals, typically annually. We also compile and present concise and comprehensive plan performance reports that provide committee members and decision makers with the knowledge necessary to make informed program recommendations and decisions. Our consulting process typically includes the following steps:

- Phase 1: Gather Information/Objectives
- Phase 2: Research available alternatives and develop solutions
- Phase 3: Review and Recommend final options
- Phase 4: Implementation
- Phase 5: Vendor Management
- Phase 6: Continuous Service and Client Advocacy

NMGS is deeply involved in all program implementations and new hire and annual open enrollments. Our team will handle all areas of implementing and renewing all lines of employee benefits coverage. This includes ensuring that all paperwork is complete and accurate and is forwarded to the applicable vendors in a timely manner.

NMGS is also available to assist with the City's annual open enrollment as well as conduct new hire orientations. We will contact all required vendors to coordinate all materials as well as attendance at open enrollment. We are available to conduct meetings, give presentations, and meet with employees individually to clarify any questions regarding their coverage. In addition, we can provide additional licensed staff to attend meetings at multiple locations and time slots if necessary. We can also conduct new-hire enrollments on a scheduled basis. Our demonstrated service level reduces the administrative burden on City's staff.

The following are some examples of our successful experience in assisting local government maximize benefits for employees while minimizing financial impact of rising health insurance premiums:

## Village of Key Biscayne

In 2011 NMGS became the Agent of Record for The Village of Key Biscayne to assist them in implementing a more cost effective health insurance program. The first step was to move the policy effective date to align with the Village fiscal year, as the plan year began May 1st. At the time, the existing health insurance provider proposed a renewal increase of +15.8%. Based on our review and analysis of their program, we felt the proposed increase was unreasonable. NMGS recommended a bid process to obtain competitive proposals. As a result of an RFP process, NMGS was successful in negotiating an +8.1% renewal and a 17 month rate guarantee while transitioning to a new carrier. This change was successful not only in simplifying the budget process and plan administration, but also saved the Village more than 8% in their health insurance premium, or more than \$100,000 annually.

In October 2014, their renewal came in with a 21.6% increase; the Village was also looking to provide additional plan options to its employee population. By closely monitoring claims experience and anticipating the potential cost impact of the health care reform mandates, NMGS recommended that the Village bid its program for the 10/1/2014 policy year. The RFP resulted in the Village moving its health insurance coverage to an alternate carrier, for a +13% increase. In addition, employees benefited from an enhanced schedule of benefits while the entity benefited from the significant cost savings. NMGS was successful in saving the Village nearly 9% in their health insurance premium, or more than \$150,000 in premium.

During both transitions, we coordinated transition plans, addressed any benefit/provider disruption issues and NMGS staff was available at all open enrollment meetings. Further, NMGS quarterbacked the implementation with the new carrier to minimize and eventually eliminate all pending issues.

Finally, NMGS partnered with Mount Sinai Medical Center and other local hospitals in sponsoring the Village's employee health fair. The comprehensive health fair included educational seminars on various health topics, health risk assessments, skin cancer screenings, and cholesterol and diabetes screenings were performed by physicians. Once their blood work is complete and the results have been sent back to the Primary Care Physician HR receives a detailed report with general information on the test results. The Human Resources Department does not receive any personal medical information. These reports are used to track the Village's overall wellness and to help negotiate renewal rates. NMGS also recruits and coordinates the various subject matter experts and vendors when implementing each health fair and wellness program.

- 8. *Demonstrate successful health plan cost management skills for four consecutive plan year renewals (i.e., Company XYZ, from 2011 – 2015), for three different current health plan accounts that your firm is currently managing, that have between 200-300 full time employees.***
- a. Select only accounts that The City of Doral can contact to discuss your reports and performance and all aspects of benefits management services that your firm has provided for at least four consecutive years – as listed above.**
  - b. For each account, provide the name of the entity, the address, contact person, contact person’s telephone number, and the length of service provided to the entity.**

NMGS regularly tracks the available claims utilization data of our clients program throughout the plan year in order to more effectively prepare to forecast renewal projections and negotiate with current vendors. We meet with decision makers at key points throughout the year, as well as on an as needed basis to assist with budget preparation. In addition to consistent plan monitoring, NMGS remains abreast of any market changes that may be relevant to the City and its employee benefits program. The following examples demonstrate how our staff has successfully managed health plan cost.

**Example # 1:**

**Village of Key Biscayne**

**Carolyn Greaves, Director of Human Resources**

**88 W. McIntyre Street, Key Biscayne, Florida 33149**

**(305) 365-8904**

**cgreaves@keybiscayne.fl.gov**

In 2010, National Marketing Group Services, Inc. was working with The Village of Key Biscayne as an outside consultant. During this time the Village was insured with AvMed. In 2011 NMGS became the Agent of Record for The Village of Key Biscayne to assist them in implementing a more cost effective health insurance program. The first step was to move the policy effective date to align with the Village fiscal year, as the plan year began May 1st. At the time, the existing health insurance provider proposed a renewal increase of +15.8%. Based on our review and analysis of their program, we felt the proposed increase was unreasonable. NMGS recommended a bid process to obtain competitive proposals. As a result of an RFP process, NMGS was successful in negotiating an +8.1% renewal and a 17 month rate guarantee while transitioning a new carrier. This change was successful not only in simplifying the budget process and plan administration, but also saved the Village more than 8% in their health insurance premium.

In October 2014, the Village’s renewal came in with a 21.6% increase; additionally the Village was also looking to provide more plan options to its employee population. By closely monitoring claims experience and anticipating the potential cost impact of the health care reform mandates, NMGS recommended that the Village bid its program for the 10/1/2014 policy year. The RFP resulted in the Village moving its health insurance coverage to an alternate carrier, for a +13% increase. In addition, employees benefited from an enhanced schedule of benefits while the entity benefited from the significant cost savings. NMGS was successful in saving the Village nearly 9% in their health insurance premium.

During both transitions, we coordinated transition plans, addressed any benefit/provider disruption issues and NMGS staff was available at all open enrollment meetings. Further, NMGS quarterbacked the implementation with new carrier to Day 1 issues were minimized or eliminated.

**CHART 1**

	2012/2013	2013/2014	2014/2015
<b>Initial</b>	15.8%	44.2%	21.6%
<b>Final</b>	8.1% <sup>(1)</sup>	31.0%	13.0%
<b>Benefit Change</b>	<i>Minor Changes</i>	<i>No Changes</i>	<i>No Changes</i>

<sup>(1)</sup> 17 month contract

Chart 1: Displays the yearly changes in renewal costs by percentage for the Village of Key Biscayne

**Example 2:**

**Sound Hospitality Management LLC**

**Elvis Sharpe: Controller**

**3850 Bird Road Suite 320, Miami, Florida 33146**

**(305)448-2927**

**esharpe@soundhospitality.com**

National Marketing Group Services, Inc. was appointed agent of record for Sound Hospitality Management LLC in 2008. The client currently has over 450 employees residing in Florida, North Carolina and Ohio. NMGS currently oversees all aspects of their employee benefit packages. Due to the difference in location, trend and demographics, we began the process of analyzing employer contribution, claims utilization and benefit management. We were able to identify areas of their program in where over utilization was taking place due to the richness in benefits resulting in high renewal increases. These cost savings were implemented resulting in plan savings year after year.



In 2010, NMGS recommended an RFP process in order to obtain competitive proposals for the group's renewal date. Sound was transitioned to a fully insured plan with a dual option represented by a reputable insurance carrier. This change was successful not only in simplifying the plan administration and employer contribution, but it also included a reduction in cost because of a change in benefits where over utilization was taking place.

As of today, Sound has been able to maintain a rich schedule of benefits while keeping claims costs below the three previous years. Enrollments and service are processed efficiently. Compliance and HR issues have a dedicated service representative to address all relevant zip codes. With all goals reached for 2014, renewal for 2015 resulted in a rate pass (0% increase) while maintaining current benefits and employer contributions.

**CHART 2**

	2010	2011	2012	2013	2014
Initial	24.0%	42.0%	20.0%	33.0%	24.0%
Final	9.0%	17.0%	-12.0%	13.0%	0.0%
Benefit Change	<i>Minor Changes</i>	<i>Richer Plans</i>	<i>Richer Plans</i>	<i>Increased Deductibles</i>	<i>No Changes</i>

Chart 2: Displays the yearly changes in renewal costs by percentage for Sound Hospitality

**Example 3:**

**CMS, Inc. formerly All-Med Services**

**Jorge Pereda, CEO**

**15476 NW 77th Court #705 Miami Lakes FL 33016**

**(305) 450-2975**

**Jpereda@cmsdme.com**

This South Florida based durable medical equipment company was experiencing growth and while satisfied with the carrier's service level, the client felt the existing insurance carrier was limited in its product offering and scope of provider network as they began expanding. They engaged our staff to analyze their claims experience and provide recommendation for savings while maintaining benefit levels. While the renewal increases for the previous 3 years had been under 12% per year, our analysis revealed that medical cost trend was rising at a double digit pace. After adjusting for high dollar claims, a thorough drill-down did not reveal any alarming utilization concerns. Key measures of utilization (ALOS, Admissions, Rx utilization, ER utilization) were better than the incumbent's book-of-business. Our analysis concluded that the carrier's

level of the provider discounts was eroding. This was confirmed when the incumbent carrier proposed double digit increases for both the 2014/2015 policy year. NMGS recommended a competitive bid process for the 2014/2015 policy year. As a result of the RFP process, the client accepted our staff's recommendation to transition to a new carrier with improved provider discounts. One year later, the data has proven that claim costs have been reduced significantly while maintaining benefit levels. This change has saved the client more than **10% in claim spend, or \$300,000.**

**CHART 3**

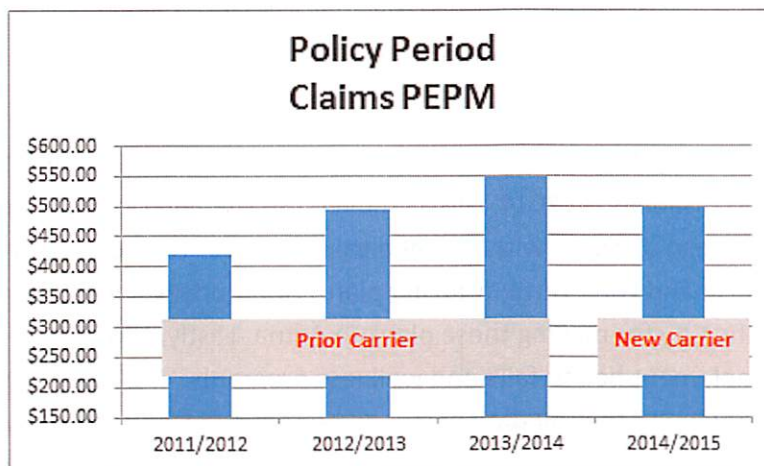


Chart 3: Displays the yearly cost of claims paid per employee per month for CMS

**Example 4:**

**City of Doral**

**Francisco Rios, HR Director**

**8401 NW 53<sup>rd</sup> Terrace Doral, 33166**

**(305) 593-6725**

**Francisco.Rios@cityofdoral.com**

Since NMGS was awarded the RFP in 2011, we have provided superior service and delivered substantial administrative and premium savings to the City of Doral. NMGS has saved the City more than **\$1.2 million** in premium while maintaining or improving upon the benefits offered to employees. As a business located within the City, we are uniquely positioned to understand and serve the needs of the City and its employees. Our intimate knowledge of employee workforce, strong collaboration with City staff and firm grasp of health cost drivers has been essential to achieving this success on behalf of the City. Our aggressive analysis and skillful negotiations has

provided the City with a **4 year average increase of less than 3%**. The exhibit below illustrates the successful history of achieving well below average increase for the City.

**CHART 4**

	2011/2012	2012/2013	2013/2014	2014/2015
Initial	21.0%	11.5%	14.9%	38.4%
Final	5.0%	0.0%	-2.0%	7.8%
Benefit Change	<i>Richer Plans</i>	<i>No Changes</i>	<i>No Changes</i>	<i>No Changes</i>
Savings	\$ 111,452	\$ 210,682	\$ 312,946	\$ 576,334

Chart 4: Displays the yearly changes in renewal costs by percentage for the City of Doral

NMGS also provided additional savings for the ancillary benefits while maintaining rates for four years for Dental, Vision, Life and Disability. In 2014, NMGS moved the Life and Disability benefits to Aetna in order to obtain a package discount with the medical insurance. This resulted in a 7.5% savings across the Life, Short Term and Long Term disability plans. Additionally, we obtained a \$12,000 one month credit for the City for moving these plans to Aetna. Lastly, NMGS has collaborated with the City to implement health fairs and wellness programs. A [2010 study](#) by researchers at Harvard University found that medical costs can be reduced \$3.27 for every dollar spent on wellness program and that absenteeism costs all by about \$2.73 for every dollar spent. Our efforts led to the City being awarded the **2015 Florida Worksite Wellness award**. Further, our educational services have been successful in highlighting the cost and time savings opportunities when using Urgent Care Center (UCC) compared to Emergency Room (ER).

**CHART 5**

	2011/2012	2012/2013	2013/2014	2014/2015
Dental	Rate Pass	Rate Pass	Rate Pass	Rate Pass
Vision	Rate Pass	Rate Pass	Rate Pass	Rate Pass
Life & Disability	Rate Pass	Rate Pass	Rate Pass	-7.5%

Chart 5: Displays the yearly changes in ancillary renewal costs by percentage for the Village of Key Biscayne

For the 2012-2013 policy year, for emergent care, employees used UCC services 51% vs 49% of ER services. For the 2013/2014 policy year, UCC services represented 56% of emergent care utilization. This initiative saved money for both the City and employees.

***9. Explain your role in providing The City of Doral recommendations with respect to employer/employee contribution strategy.***

Employer paid health insurance is the most valued fringe benefit, and is an important tool for recruiting and retaining top employees. There are several different approaches to take for employer-provided health benefits. National Marketing Group Services, Inc. has a dedicated medical economics unit that fulfills all of our customers reporting needs. Our team is experienced in constructing custom-built contribution models using standard percentage based or dollar based allocations, salary tiered contributions and contributions based upon job classification. Our strategy allows us to work with the employer. We take several factors such as employer size, budget, personnel resources, health benefits goals, and knowledge of different options. Utilizing our in house contributing models our team will discuss with Human Resource and Finance the goals for the upcoming policy year in relation to the contributions and illustrate those goals with custom-built contribution models. The models will detail monthly and per pay period obligations of both the employer and employee on a dollar and percentage basis.

National Marketing Groups Services, Inc. recognizes that contributions have a dual goal of premium cost sharing and motivating employees to make prudent coverage decisions that leverage employer dollars. Our goal is to provide a well-designed contribution strategy that will save the employer considerable resources by eliminating payment for unnecessary coverage while attaching a value to that employee contribution from the employer.

***10. How often will your firm bid out the health & welfare plan?***

National Marketing Group Services will bid out the health and welfare plan once a year to coincide with the City's fiscal annual renewal, unless otherwise requested by the City.

***11. Provide a timeline of when the renewal process would begin – Renewal date is October. Explain steps you will take throughout this process and what role you will play.***

National Marketing Group Service's renewal strategy begins with our initiative of remaining deeply involved on a year round basis with our Clients. We consistently monitor trend and claims loss ratio in preparation for the annual renewal. Below is a summary of activities that will be reviewed and implemented.

**Renewal Forecast Meeting** – The renewal planning meeting is a formal meeting that will include Human Resources, Financial Management and City Manager some four months in advance. Forecasted renewals for each line of business that is renewing will be discussed. This meeting will focus on financial projections, claims loss ratio and market trends as well as establishing a strategy on the clients benefit needs and financial budget.



This meeting will also include a discussion of the carriers that NMGS will send out to bid. It will include a timetable for acquiring additional information and we will discuss the decisions regarding open enrollment procedures. This will include expected timeline for open enrollment materials, employee benefit highlight book, enrollment meeting coordination, etc.

**Renewal Preparation** – If NMGS does not see a benefit in requesting an early renewal because of trend and claims loss ratio, we will receive the renewal from the current carrier at least 60 days prior to October 1st. The current benefit provider will be contacted 90 days prior to renewal to begin discussing options and strategies. We will consider different strategies such as self-insuring, level funding plans, and deductible protection plans to contain costs. In addition, NMGS will begin to prepare all required information to send the proposal out to bid to all viable carriers. This is essential in the renewal process as we need to make sure that the Client is receiving the best possible benefits and rates available in their market segment.

**Renewal Presentation** – This presentation will be held 75 days prior to renewal. The proposal will include the following:

- Review and analysis of proposals
- NMGS recommendation
- Interview final Carrier options
- Request best and final offers due from Carriers
- Presentation to all Decision Makers
- Discussion of Open Enrollment Materials
- Schedule open enrollment meetings
- Design employee benefit highlight books
- Finalize employer contribution
- Implement all plan and rate changes to Employee Navigator

**Renewal Implementation** – Open enrollment meetings will begin 60 days prior to October 1st, depending on Council and Management approval from the renewal presentation.

Implementation meetings will always be held in groups coordinated by Human Resources and each department head. Regardless of a new plan change or keeping current plan benefits, NMGS will hold open enrollment meetings every year. Two NMGS's account representatives will be onsite all week to present benefit plans, help employees login and enroll in their online portal, discuss wellness and preventive benefits, and answer any questions. Education has become an increasingly important factor in managing employee benefits, especially with all the legislative and regulatory changes due to PPACA. For example, it is vital that our clients know; most of their preventive coverage is 100% covered, how to search for in network providers, and that their dependents can stay on their plan until the age of 26. Finally, NMGS will coordinate the

enrollment meetings with all carriers for all product lines to include ancillary and voluntary products.

This schedule will be customized to accommodate any additional services and needs that are requested by the City. Please see section 5, exhibit (I) for a sample calendar and proposed calendar.

***12. How will you assist the City with benefit compliance requirements and issues?***

NMGS will keep the City well-informed of changes in statutory and regulatory laws. We will review pending legislation and report any impact it may have on existing or future plan designs. We will provide the City with monthly email updates on changing PPACA, HIPAA, COBRA, and Medicare regulation, and meet with HR on a quarterly, if not monthly basis to discuss and provide solutions on these topics. The City will also be given access to HR360, a personalized online portal with valuable information on Human Resource laws and compliance issues.

NMGS will continuously assist with compliance issues, including but not limited to: OPEB, COBRA, Section 125 Cafeteria Plan, HIPAA, FMLA, Healthcare Reform issues, retiree coverage and other state and/or federal mandated benefits and serve as a valuable resource to the City's HR staff. We will inform HR of all compliance issues related to the employer mandate and provide a checklist on the areas of the law the City should be in compliance with. NMGS will provide access to qualified staff or outside employee benefits legal counsel at no cost to the City. Furthermore, we will assist with certain ACA IRS reporting requirements such as 1094 and 1095 B & C forms. We will provide two online resource tools that will help HR manage and answer all questions related to PPACA compliance law, HR solutions, hiring and terminating, COBRA laws, and much more.

In addition, NMGS will inform the City's Human Resources Department of changing legislation and legal decisions affecting employee benefits, and advise on methods to comply with these changes. We will provide the City with monthly newsletters containing valuable information pertaining to HIPAA, COBRA, Medicare, Healthcare Reform and other similar state and federal laws. NMGS will proactively address all compliance requirements with the City to ensure their complete cooperation with all laws pertaining to employee health benefits. NMGS will also provide guidance on laws pertaining to benefit administration, domestic partnership, same sex marriage and dependent coverage.

For more information on these resources please see section 5, exhibit H for samples of our monthly newsletters.

### ***13. How will you assist with enrollment/administration?***

Your NMGS account manager will facilitate as much of the enrollment administration as Human Resources will allow. One of our main focuses is to remove as much of the burden of “processing” so that HR can attend to other priorities. As previously mentioned, for all new hires and terminations, we will personally enter and process each employee into the carrier system and send a written confirmation notice to HR in order to ensure submissions are handled with the least amount of errors as possible. NMGS will be onsite the week of open enrollment to assist and inform employees on how to use the online enrollment software. We will answer any questions related to benefits and explain the difference between benefit plan options. NMGS will also process COBRA administration and make sure terminated employees are sent the appropriate enrollment material. The following is a list of enrollment and administrative functions NMGS will perform:

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#### **Policy Administration**

- Benefit plan explanation and presentation
- Additions Deletions and Changes
- New Hires and Terminations
- Invoice Adjustments and Reconciliation
- Claims resolution
- COBRA administration

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#### **Policy Implementation**

- ID card executions
- Change of primary doctor
- Provider Search
- Enrollment software maintenance
- Enrollment software presentation and education
- Section 125 implementation
- Assistance with other misc. services required

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#### **Compliance Notices**

- Healthcare Reform/PPACA
- Medicare coverage
- COBRA administration
- Section 125
- Federal Marketplace and COBRA Notices



**National Marketing  
Group Services, Inc.**  
Experience. Professionalism. Integrity.

***14. How will you assist with service problems/claims problems from employees?***

NMGS's goal is to facilitate ease for Human Resources and the City in general. Our focus is to remove the burden of "processing" as much as possible to free HR for other priorities. That is why we have designed our service platform to make sure each account manager takes on as much of the workload as possible. For instance, service issues such as name changes, dependent additions or deletions, and medical claim problems will all be resolved by your account manager. If an employee isn't sure why he is being charged for a certain procedure, we will make sure to explain the benefits to him or her, and identify exactly where they can find that explanation in writing. In reference to claim issues; NMGS will directly resolve all claim disputes with the current carrier. We will make sure to identify, track and resolve the problem. NMGS will keep record of all disputes and follow up with the employee to confirm resolution. Finally, NMGS will ensure all claims issues are kept confidential as per HIPPA law.

***15. Please describe your communication/education process and provide samples.***

National Marketing Group Services, Inc. provides our clients with a menu of communication services, resources and technology solutions. It is important that the City of Doral's employees understand their benefits program and the role it plays in their compensation package. NMGS believes employees who have a greater understanding of their benefit program will place greater value on it, and ultimately lead to less turn over and a stronger employee organization.

NMGS has and will continue to develop communication strategies that deliver clear and concise information for all employees. This includes and is not limited to in-house benefit brochures and enrollment forms. These pieces are produced in house allowing for customization on the client's behalf. Our employee communication services include:

- Benefit Brochures
- Open enrollment and new hire orientation materials
- Coordination of monthly open enrollment meetings
- Employee education programs
- Pharmacy literature
- Employee communication sites
- Monthly Newsletters

NMGS believes that face to face meetings are imperative in educating the employees. At the same time we realize that some employees do not have the time to wait for HR offices to open to obtain information on their coverage. NMGS, through employee navigator, provides your employees access from their home, regarding their benefits information anytime, anywhere.

The employee portal page on employee navigator provides employees with information on their benefits, cost of their products, provider directory, etc. for every line of benefit being offered. We believe in providing the best online communications, administrative and enrollment solutions. This will allow employees and their families the opportunity to access their benefits 24/7.

NMGS will continue to send out electronic messages and hold quarterly meetings for employees regarding various topics such as: urgent care vs. emergency room, generic vs. brand name drugs, pharmacies that provide certain drugs at no cost, etc. This is essential to lowering out of pocket costs for the employees as well as potentially decreasing future costs for the employer.

In short, an informed employee on their benefits program is likely to be a satisfied one. That is why education is important for The City of Doral and its employees. NMGS will review all options with staff to determine the most effective communication methods. For examples of our communication postings please see section 5, exhibit (G.2)

***16. Detail the services your firm will provide during open enrollment, who will perform open enrollment/educational meetings?***

NMGS will be directly involved with the entire open enrollment process. Once we've analyzed our renewal options and made a well informed decision on the best available carrier and plan options, the first thing we'll do is have a meeting with HR to create an open enrollment schedule. Employees will have various times throughout the scheduled week to come in and view a benefits and open enrollment presentation. This presentation will be presented by one of your three account managers. In this presentation, we'll discuss topics such as: wellness and preventive care, benefit plan design, detailed carrier information, enrollment process, ACA compliance updates, and a custom employee enrollment demonstration. Once they have viewed the presentation, they will have a specific amount of time to login into their online portal and make their enrollment elections. Your account manager will be onsite all week to assist employees with any questions or concerns they might have. We will also inform the applicable carriers and make sure they're onsite all week to help answer any question and provide necessary materials. In addition, NMGS will coordinate meetings, transition of care, and ensure all aspects of the open enrollment process run smoothly and efficiently.

***17. What type of advice would you provide to The City pertaining to voluntary products such as AFLAC, Allstate etc., and what role will they play in our open enrollment?***

National Marketing Group Services, Inc. has many clients that participate in voluntary benefits and products. NMGS would review and work with the current representative for the voluntary products to make sure that all products are competitive and compare them to the open market.

If the client wishes to offer a specific type of voluntary product, we will assist the City in evaluating all proposals in order to determine the best policy for the City's needs. In addition, if NMGS feels that the City would benefit from a product that is currently not being offered today, that will be presented and proposed for the City to elect.

NMGS has a dedicated enrollment specialist that will coordinate open enrollment with all voluntary product vendors. We will make sure that they have adequate time to present and enroll during open enrollment as well as our regular monthly enrollment meetings throughout the year. Furthermore, we encourage our partners in the voluntary product market to meet with City employees throughout the year and make sure they benefit from their wellness initiatives and incentives in order to maximize employee dollar contributions.

### ***18. How would you help us with wellness initiatives?***

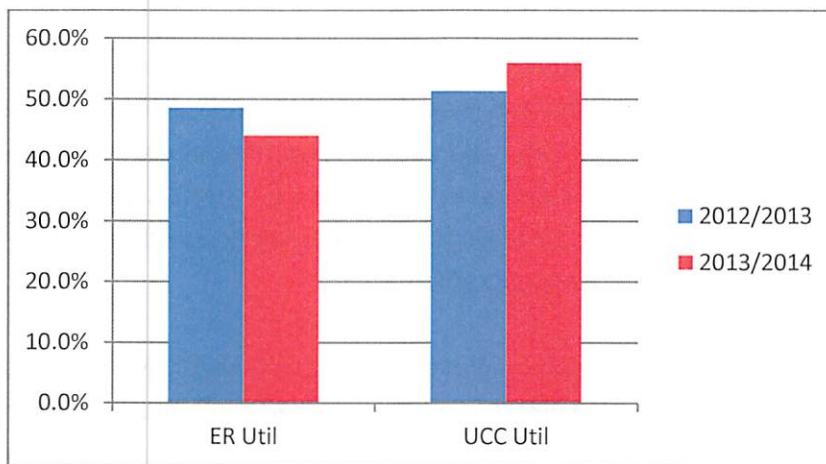
A 2010 study by researchers at Harvard University found that medical costs can be reduced \$3.27 for every dollar spent on wellness program and that absenteeism costs all by about \$2.73 for every dollar spent. NMGS believes in the education and involvement of employers concerning their organization's benefit program. This interaction leads to high morale, and often serves to improve the health of its members. As part of this philosophy, we believe in assisting with, coordinating and participating in Wellness Programs.

The cornerstone of wellness is encouraging employees to engage in healthy behaviors and to take advantage of health management and wellness programs offered through their health plan to improve their quality of life. A meaningful wellness program supports employees in making wise choices.

Wellness programs should be tailored to each client to maximize impact. Intimate knowledge of employee workforce, collaboration with City staff and strong grasp of health cost drivers is essential for success. The simplest of Wellness Programs can cost next to nothing; however, Wellness Programs in which health risk assessments are conducted for the entire employee population and measured throughout several plan years can incur substantial cost to the group. We have also enlisted the client's EAP provider or health insurance carrier to provide more extensive disease management and educational wellness seminars. NMGS has been successful in obtaining funding for Wellness initiatives for carriers and providers. For the City of Doral, NMGS has successfully delivered:

- Funding for Wellness initiatives **at no cost to the City**
- Sponsors and vendors for Health Fairs **at no cost to the City**

- Monthly service and health education meetings for employees
- Monthly Wellness newsletters
- Free mammograms
- 24% of employees are enrolled in High-Deductible Health Plan (HDHP) helping the City to control costs
- Year round Plan Benefit education. Education services have been successful in highlighting the cost and time savings opportunities when using Urgent Care Center (UCC) compared to Emergency Room (ER). For the 2012/2013 policy year, for emergent care employees used UCC services 51% vs 49% of ER services. For the 2013/2014 policy year, UCC service represented 56% of emergent care utilization. This initiative saved money for both the City and Employees.



NMGS will continue to build on the successful programs that have been implemented so far including being awarded the **2015 Florida Worksite Wellness award**. The most recent Health Fair resulted in a **53% increase** in employee participation compared to the prior year. Our collaborative efforts have been successful. NMGS will assist the City

- Develop and articulate strategic Wellness plan
- Develop budget parameters
- Analyzing data to identify wellness and education targets
- Continue to coordinate all vendors for services, including recruiting new vendors based on goals and objectives
- Continue to recruit key provider participation at Health Fairs
- Coordinate, attend and tailor Health Fairs specific to goals
- Biometric screenings
- Continue to expand employee wellness workshops (i.e., nutrition, weight loss, stress

- management)
- Education on plan benefits
  - Providing onsite educational meetings to staff and employees
  - Health risk assessments
  - Continually monitoring claims experience to make projections in order to adequately prepare for renewal

Another example of NMGS' success in implementing wellness initiatives is the Village of Key Biscayne. NMGS customized Wellness and Health Fair program by partnering with Mount Sinai and other providers to offer educational seminars on various health topics, health risk assessments, Skin Cancer screenings, cholesterol and diabetes screenings were performed by physicians at no cost to the Village.

Each of the above clients utilized different wellness vendors to oversee, administer and monitor program participation and results. This reflects NMGS' tailored approach to assist in initiating new wellness programs and/or support wellness programs already established.

***19. How will you assist with making recommendations to improve the benefits program/what benefits to offer, identifying shortcomings, and compliance problems? Outline the process that your firm would use to evaluate overall effectiveness.***

As we have demonstrated at NMGS, exceeding client expectations is central to everything we do. We will continue to collaborate with the City to understand objectives and present solutions. Your NMGS service team is truly an extension of, and a valuable resource to the benefits administration and human resources staff. Fundamental to this process is the ability to review, evaluate and diagnose benefit plan components. As part of our continuous service, we consistently review available claims utilization reports to determine whether your programs are running favorably and utilize this claims data to forecast renewal projections and negotiate with vendors. With this information, we can partner with you to develop an action plan to accomplish the goals of the City. We have assisted our clients through transition in many ways such as: changing from fully insured to self-insured and vice versa, switching insurance carriers, and implementing new health savings vehicles such as HSA's and HRA's. Our highly experienced staff is available to assist the City and their employees through any change that may be implemented.

**Our consulting process typically includes the following steps:**

Phase 1: Gather Information/Objectives

Phase 2: Research available alternatives and develop solutions



Phase 3: Review and Recommend final options

Phase 4: Implementation

Phase 5: Vendor Management

Phase 6: Continuous Service and Client Advocacy

Additionally, as part of the ongoing service process we are able to assist the City in responding to emerging benefit issues. NMGS has proactively addressed these requirements on behalf of all of our clients to ensure that all policy renewals subject to the mandates are in compliance with this new legislation. We have proactively hosted a number of informational seminars on the new laws for our clients so that they have all the information needed to be adequately prepared for the upcoming mandates. As health care reform continues to evolve, we will diligently review all newly available product offerings to ensure that our clients are always presented with the best available options while complying with all mandates and requirements of the health care reform legislation. This expertise is especially vital in anticipation of the legislative mandates associated with the ACA.

***20. List any additional office locations that would provide direct services and a full description of other resources that will be utilized for the City's account.***

All services will be performed from our Doral location at:

Corporate Park of Doral  
7705 North West 48th Street, Suite 100  
Doral, Florida 33166

***21. Cite major complaints, claims or lawsuits, if any, pending against the firm and that would be considered material to the firm's financial status.***

Not applicable. There are no complaints, claims or lawsuits pending against our firm.

***22. Attached the following to your proposal:***

- A sample of recent benefits guide
- A sample of legislative updates
- A sample calendar of meetings/services with a current client
- Proposed calendar for the City of Doral demonstrating the appropriate level of contact between consultant and carrier & consultant and client (the City)

- Proof of Errors & Omission insurance with at least a \$1 million dollar policy limit, provided by a carrier acceptable to the City of Doral

**See section 5 (Sample Forms, Contracts, Booklets and Exhibits)**

**Reference 1**

<b>Company Name</b>	Podicare
<b>Contact Person</b>	Nelly Arriaga
<b>Contact Title</b>	Director of Human Resources
<b>Address</b>	3440 Hollywood Blvd. 4th Floor, Suite #460 Hollywood, Florida 33021
<b>Telephone Number</b>	(954) 602-9830 ext. 9830
<b>Email Address</b>	<a href="mailto:narriaga@woundtech.net">narriaga@woundtech.net</a>

**Reference 2**

<b>Company Name</b>	CMS, Inc. formerly All-Med Services
<b>Contact Person</b>	Jorge Pereda
<b>Contact Title</b>	CEO
<b>Address</b>	15476 NW 77th Court #705 Miami Lakes FL 33016
<b>Telephone Number</b>	(305) 450-2975
<b>Email Address</b>	<a href="mailto:jpereda@cmsdme.com">jpereda@cmsdme.com</a>

**Reference 3**

<b>Company Name</b>	Sound Hospitality Management LLC
<b>Contact Person</b>	Elvis Sharpe
<b>Contact Title</b>	Controller
<b>Address</b>	3850 Bird Road Suite 320, Miami, Florida 33146
<b>Telephone Number</b>	(305)448-2927
<b>Email Address</b>	<a href="mailto:esharpe@soundhospitality.com">esharpe@soundhospitality.com</a>

**Reference 4**

<b>Company Name</b>	Village of Key Biscayne
<b>Contact Person</b>	Carolyn Greaves
<b>Contact Title</b>	Director of Human Resources
<b>Address</b>	88 W. McIntyre Street, Key Biscayne, Florida 33149
<b>Telephone Number</b>	(305) 365-8904
<b>Email Address</b>	<a href="mailto:cgreaves@keybiscayne.fl.gov">cgreaves@keybiscayne.fl.gov</a>

### Reference 5

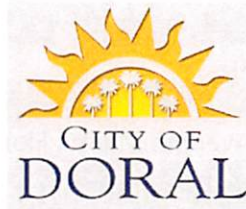
Company Name	EE&G Management Services, Inc.
Contact Person	Misty Willard, SPHR
Contact Title	Human Resource Director
Address	5751 Miami Lakes Drive, Miami Lakes, Florida 33014
Telephone Number	(305) 374-8300
Email Address	<a href="mailto:mwillard@eeandg.com">mwillard@eeandg.com</a>

### Reference 6

Company Name	Quad International, Inc.
Contact Person	Richard Homann
Contact Title	Comptroller
Address	1629 NW 84th Avenue, Miami, Florida 33126
Telephone Number	(305) 662-5959 ext. 261
Email Address	<a href="mailto:homannr@scoregroup.com">homannr@scoregroup.com</a>



Exhibit A: Sample Stewardship Report



**CLIENT STEWARDSHIP REPORT  
PREPARED  
FOR  
THE CITY OF DORAL**

National Marketing Group Services, Inc

Date of Stewardship Report: 12/01/2014

## ACCOUNT OVERVIEW

### The City of Doral Premium Analysis

The City of Doral insurance cost relative to claims paid has been on a downward trend. In other words, the cost of insurance has been lower than the claims paid by the insurance carriers. To determine rate action, the insurance carrier uses the plan's actual claims experience and blends it with the average experience of groups with similar demographics. In addition, they also use annual trend factor and changes in the specific group demographics to determine renewal action. Lastly, for the first time, in 2014 all plans had a 5% reinsurance fee.

From October 2013 to 2014, the paid cost ratio was at 138% for said 12 month period, the second highest for the City of Doral since 2006. That is, for every dollar the City paid in premium, Coventry paid \$1.38 in claims. This medical loss ratio resulted in premium increases of 38.4% from the current rate at the time. After several carrier declinations and through several factors including leveraging other carrier quotes and statistical medical wellness models, NMGS negotiated alternate renewal rates down to 7.78% with improved benefits. This represented a savings of approximately \$68,000 a month or \$816,000 annually. In that same time period, NMGS obtained a 30 day extension with Coventry to allow council to make the best informed decision regarding the City's medical insurance going forward. This also provided time to further negotiate benefits and ensure the enrollment process was a smooth transition.

The Dental and Vision for The City of Doral for 2014 maintained, once again, the same cost and benefit plan structure. In addition, for 2014 the plan maximum for the individual on the Dental continues at \$1500 with the Deductible Rollover benefit from one year to the next for employees and their dependents.

The City of Doral had the Life, AD&D, STD, and LTD accounts with Lincoln Financial from 2006-2014. However, after several service issues throughout the year NMGS recommended, and The City agreed, that it was time to make a change. This was due to Lincoln not providing the level of service we required from our insurance carriers plus 7% increase on renewal rates due to claims. After receiving several quotes from various carriers, NMGS decided consolidating these accounts with the medical would be the best option. The result was the exact same benefits at a 7.5% discount, plus a \$12,000 credit applied to the first month's premium. This represented a total savings of \$29,297.40. The change has reduced enrollment errors and made the new hire and termination process more efficient.

City of Doral

For 2014-2015, employer contribution increased slightly to accommodate the premium increase, and benefits were adjusted in favor of the employee. It's important to note, The City of Doral's employee benefit cost was increasing due to claims. The exposure for change in demographics and trend was minimal and provided only a slight cost increase.

**Coverage Changes and Enhancements Year by Year**

The table below captures the past 3 years changes in coverages and their effect on cost.

<b>Year</b>	<b>Plan</b>	<b>Addition/Change</b>	<b>Cost Effect</b>
2012	HMO 1	Stayed as is	Rate Pass / No increase
2012	HDHP	Stayed as is	Rate Pass / No increase
2012	POS	Stayed as is	Rate Pass / No increase
<b>Year</b>	<b>Plan</b>	<b>Addition/Change</b>	<b>Cost Effect</b>
2013	HMO 1	Changed carriers	2% decrease overall
2013	HDHP	Changed carriers	2% decrease overall
2013	POS	Changed carriers	2% decrease overall
<b>Year</b>	<b>Plan</b>	<b>Addition/Change</b>	<b>Cost Effect</b>
2014	HMO 1	Changed carriers	7.78% Increase overall*
2014	HDHP	Changed carriers	7.78% Increase overall*
2014	POS	Changed carriers	7.78% Increase overall*

\* Increase was negotiated down to 7.78% from 38.4% due to medical loss ratio of 138% and plans were moved from state to national network.

## KEY ACCOMPLISHMENTS

### Management:

For this year's renewal, NMGS performed and provided The City of Doral with a detailed analysis of deductible levels, and determined the value of suggested/proposed plan changes, endorsements, or funding changes for the three major health plans (HMO, POS and HDHP HSA) amongst other tasks. As in previous renewals, we looked extensively at the utilization of the group and actively marketed and analyzed options for decreasing The City of Doral's loss ratio. NMGS provided the census to every carrier available in the market. We actively involved the incumbent carriers as well as opening the marketing to other qualified carriers in a competitive bidding process. Several carriers declined to quote including Cigna, Unum, and Avmed. During the renewal/marketing period (roughly August 2014 to October 2014) we met with the City of Doral personnel approximately four times and communicated regularly by phone and email.

### Recent Consulting accomplishments included:

#### 2014 to 2015 program year:

- Obtained a 30 day extension with Coventry to allow council to make the best informed decision regarding the City's medical insurance moving forward
- Negotiated Coventry's initial renewal rate from 38.4% down to 26%. These increases were due to a 138% medical loss ratio
- Renegotiated new plans and rates with Aetna Health down to a 7.78% increase from current with similar or improved benefits, which represented a savings of approx. \$68,000 a month, \$816,000 annually
- Converted the life, AD&D, STD, and LTD plans to Aetna with the exact same benefits at a 7.5% discount, plus a \$12,000 credit applied to the first months premium which represented a total savings of \$29,297.40
- Negotiated another rate pass with both Guardian (dental) and Humana (vision) renewal rates
- Provided HR with all necessary materials, including employee benefit books for open enrollment at no additional cost
- Presented and consulted all employees on plan benefits during open enrollment
- Further enhanced the online enrollment tool, Employee Navigator, by updating the software at no additional cost



- Continued to provide HR with an online HR library called HR 360 to reference any and all HR compliance issues at no cost
- Provided Cobra administration for the City at no additional cost
- Hosted monthly service and educational meetings for City employees
- Hosted annual health fair which provided valuable wellness information to City employees as well as biometric and blood analysis exams
- Administers all new hires, terminations and medical claims throughout the year
- Sends monthly compliance newsletter (The Advisor) to HR and directors
- Creates monthly wellness newsletter to HR for distribution to all City employees
- Provides HR with a utilization report from the carrier to monitor claims, utilization, experience and medical loss ratio
- Assists in assuring the City of Doral is in full compliance with all regulations of the Patient Protection and Affordable Care Act, commonly known as Obama Care

#### **Policy, Claims, and Advocacy Support**

NMGS typically reviews utilization reports on a quarterly basis with The City of Doral to review their claims experience. The goal is to make sure employees feel the insurance is providing the appropriate services. NMGS works with the carriers to make sure claims are paid in a timely and accurate manner, and always strives to resolve disputes in The City's favor.

NMGS works to gather, organize and transmit relevant exposure and claims data from the City's insurance carrier. In addition, NMGS runs data to the company's internal management team who provides ongoing analysis to include renewal assessment, negotiation, cost projection and budgeting. All actuarial projections are reviewed, and where appropriate, methodologies and outcomes are analyzed and resolved.

#### **Risk Control/Training**

Each month NMGS attends the employee orientation sessions to explain plan benefits, rates, wellness benefits, and health risk factors. These sessions help the employees make an informed decision about which plans are best suited for their individual needs. We also help coordinate and attend several wellness and educational meetings throughout the year. These meetings are incorporated into recommendations to The City on actions that can be taken to lower risk and utilization. In addition, we facilitate a Wellness Fair once a year where we: secure the wellness budget, raffle prizes and giveaways to incentivize employee participation, invite local health related vendors and provide medical screenings for the employees. Lastly, the City has implemented monthly newsletters on different health topics as a better way of educating the employee population.

#### **Due Diligence Support**

Over the past several years, NMGS has performed due diligence reviews on all potential carriers. In the 2010-2011 plan year, a HDHP HSA was implemented. The integration of the program and its favorable terms further reduced costs. In addition, after many years of discussion, The City staff was able to receive approval from council for a change in employee contribution in 2010. This change significantly affected overall usage of the plan for 2011 while at the same time maintaining an above average contribution for its employees. In 2012-2013, NMGS negotiated rate passes on all three medical plans as well as dental, vision, STD, LTD, and life. We also assisted in assuring the City of Doral was in full compliance with all regulations of the Patient Protection and Affordable Care Act, commonly known as Obama Care. In 2013 NMGS negotiated a 2% decrease in renewal rates against a medical loss ratio of 141%. This was accomplished by leveraging alternate carrier quotes and aggregate medical results from that year's health fair. In addition, we implemented a new online enrollment tool to help alleviate the workload for HR and increase enrollment efficiency. We also provided HR with an online HR library and resource tool to assist with all Human resource matters including the PPACA.

## **FORWARD LOOKING ACTIVITIES AND GOALS**

### **Marketing**

NMGS recently finished the implementation of the October 2014 renewal. However, as always, we will begin laying the groundwork for renewal of the upcoming year in July 2015. We will aggressively market the account with incumbent and qualified insurance carriers. This year, our primary focus will continue to be preventive and wellness services with an emphasis on education and making the right plan elections. As we have in the past, NMGS will perform a detailed analysis of deductible levels and determine the value of any suggested plan or funding changes prior to the October 2015 renewal.

### **Policy, Claims and Advocacy Support**

NMGS will perform quarterly medical claims reviews, and aggressively pursue alternative methods of dealing with claims with a goal of reducing claims costs to The City of Doral.

NMGS will continue to provide exceptional service to The City and its employees. Our trained and experienced personnel have the ability to solve problems efficiently and effectively.

### **Risk Control**

We recommend the formation of a Health Committee. This will allow NMGS to initiate programs within The City as a way of reinforcing the seriousness of prevention and



education, as well as having provable and tangible outcomes that underwriters may use in their review of The City of Doral's benefit programs. Currently, the Human Resource Department in conjunction with NMGS facilitates all forms of communication within the employee community. They have taken a proactive initiative in maintaining risk and utilization cost low by educating the employee population through: monthly newsletters on various health related topics, periodic wellness expos, and monthly orientation meetings for new hires.

**Due Diligence Support**

NMGS will continue to provide due diligence support for The City of Doral. This includes legislative and regulatory updates pertaining to your Employee Benefits. We will then work closely with HR and the City Manager to analyze the impact of these changes and assist in the development of any necessary communication pieces. NMGS will also provide continuous guidance on PPACA compliance and access to their HR Library, HR 360.

**NMGS's Service Capabilities and Commitment**

NMGS is an experienced, creative, and cost-effective boutique firm with clients throughout the nation. Our practice was developed to help our clients achieve the highest quality care and security while eliminating cost wherever possible. NMGS is aggressive in delivering real savings to our clients and their employees. Our overhead isn't a hindering factor to our ability to deliver a very competitive service model. We are confident in our ability to improve the health status of the City, increase workforce productivity and lower plan overall costs. Our capabilities are reflected in our service commitment. NMGS has dedicated practices in all areas of risk management and insurance staffed by recognized experts in their professions. The NMGS team is dedicated to understanding the City of Doral industry, strategic and tactical needs, wants and values. Our continuous observation, measurement, and testing of trends will provide precise and relevant negotiations on:

- Coverage
- Rates
- Terms
- Placement
- Emerging issues
- Monthly enrollment meetings

Our respect, integrity, and clout with insurance carriers yields favorable terms, conditions and rates to address The City of Doral's unique requirements. We have found that our services have been relevant and valuable in the following areas:

- Approach
- Design
- Implementation
- Performance
- Validation

**Broker Account and Background History**

The City of Doral, Florida is a duly organized public entity. It was incorporated on June 24, 2003, in one of thirty-four municipalities in Miami-Dade County, Florida. The City of Doral has operated under the Mayor-Council-Manager form of government since incorporation.

National Marketing Group Services, Inc. is a privately held company. Roger Gonzalez is the President and founder. He has been in the insurance industry since 1969. In 1988 he decided to start his own agency, National Marketing Group Services, Inc., and has successfully grown that business for the last 25 years.

Whenever and wherever The City of Doral may need us, NMGS's key executives and team leaders will be available to provide support. The success of NMGS is rooted in the philosophy that the company and sales team always fight for their client's best interest and maintain high credibility with all of their partners.

**Client Employee Benefits Advisory Team**

NMGS operations are centralized at our headquarters in Doral, Florida. Roger Gonzalez is the principal officer of NMGS, and will serve as the Executive Lead for The City of Doral. The Employee Benefits Team is organized into health, dental, vision, life, short term and long term disability. They are supported by various specialists. The team is comprised of:

- Executive Benefits Consultant
- Senior Account Manager
- Operations Manager
- Client Development
- Assistant Account Manager

**Service Team Qualifications and Responsibilities** – NMGS's service team for The City of Doral is both extensive and well qualified. By virtue of our organizational structure

and service team deployment design, we can assure ready access to the needed experts and decision-makers. Our technical resources attend seminars throughout the year and pursue independent studies to broaden their knowledge to keep pace with the current status of trends, coverage terms and product development. Our account managers are licensed insurance professionals and PPACA consulting specialists.

## PREMIUM AND RENEWAL OVERVIEW

### Client Cost Analysis

Insurance cost for a particular line of coverage is a function of paid claims, claims trend and demographics. It also includes factors such as: employee age and gender, group location, and changes in group size. NMGS will always make sure that the carrier is not running above trend.

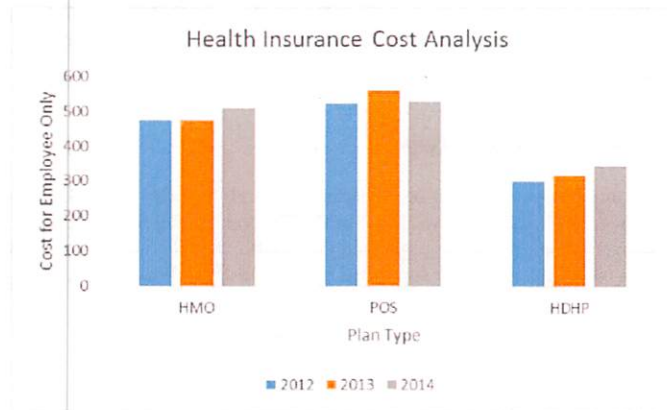
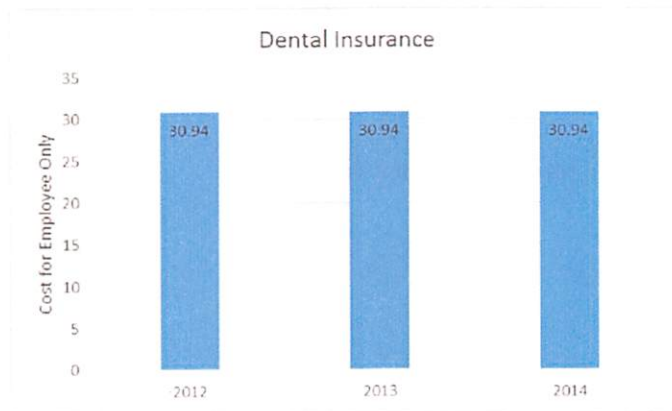
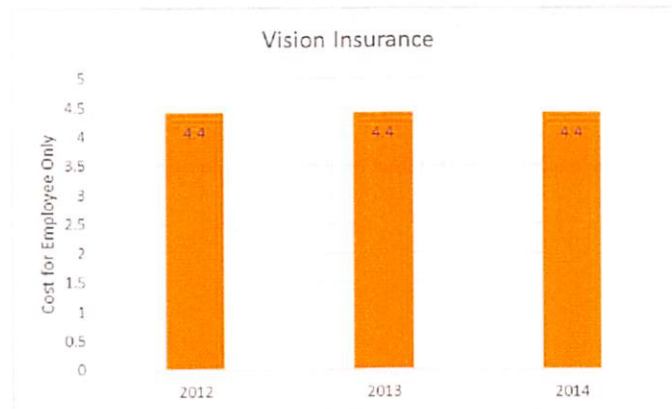


Chart 1. Illustrates the cost of insurance by plan type, per employee, for the past three years.



**Chart 2.** Illustrates that the cost of dental insurance has maintained level for the past three years regardless of trend and utilization



**Chart 3.** Illustrates that the cost of vision insurance has maintained level for the past three years regardless of trend and utilization

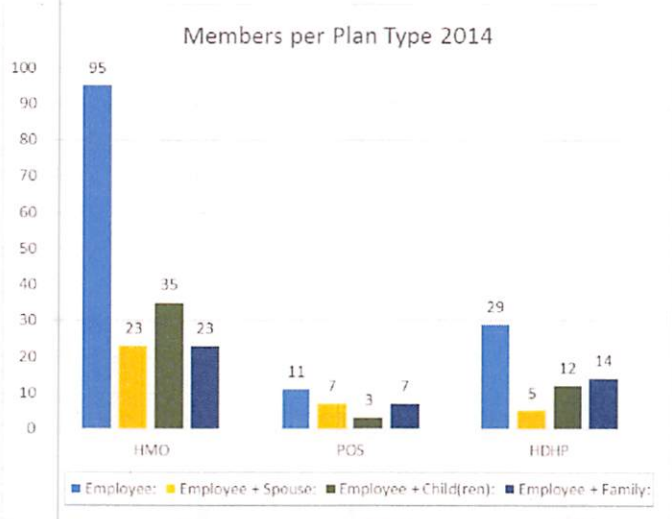


Chart 4. Illustrates the membership for The City of Doral for 2014 per plan type and employee category

**Insurance Cost Analysis:**

The City of Doral insurance costs have increased since 2011 due to high claims experience. In 2014 the City received a 38% initial increase from their current rate. NMGS was able to negotiate that rate down 7.78% with Coventry's parent company, Aetna. Currently, the city is paying approximately 2.4 million in medical insurance premiums. Had the program stayed with the same carrier, benefit plans and contributions, insurance costs would be projected close to \$3.4 million; approximately \$970,000 higher than presently renewed. This is a very positive trend considering the MLR, and it is a goal of National Marketing to continue to improve upon this result.

The Dental insurance continues to maintain at the same price after three years. Guardian Health Plans offers one of the largest preferred provider organization networks with over 83,000 providers at more than 171,000 locations nationwide. We continue to make sure the insurance carrier is committed to helping their members improve oral health and encourage preventive care through coverage of early cancer detection exams, adult fluoride treatments and free preventive cleanings.

The City of Doral's vision benefits are with Humana Health Plans. NMGS was able to negotiate a rate pass for 2014 with the same benefits. The goal of this vision plan is not only to protect your vision, but your overall health. Regular eye exams are part of the preventive measures one can utilize to help detect serious conditions early. The provider network gives members access to independent doctors as well as large name retailers.

The City of Doral had the Life, AD&D, STD, and LTD accounts with Lincoln Financial from 2006-2014. However, after several service issues throughout the year NMGS recommended, and The City agreed, that it was time to make a change. This was due to Lincoln not providing the level of service we required from our insurance carriers plus 7% increase on renewal rates due to claims. After receiving several quotes from various carriers, NMGS decided consolidating these accounts with the medical would be the best option. The result was the exact same benefits at a 7.5% discount, plus a \$12,000 credit applied to the first month's premium. This represented a total savings of \$29,297.40. The change has reduced enrollment errors and made the new hire and termination process more efficient.