



Employee Benefits Broker and Consulting Services

April 15, 2024



Consultation

- **MSI Consulting Team** - provides Ongoing Communication with Regularly Scheduled Quarterly Meetings
- Plan Analytics and Modeling
- Vendor Review and Recommendations
- Cost Projections and Plan Design Analysis
- Benefit Plan Review and Audit
- Provider Network Evaluation
- Medical Claims Analysis
- Health Plan Reserves Estimates
- Specific and Aggregate Leveling and Analysis
- Prescription Drug Evaluation
- Plan Eligibility
- Compliance Assistance (Federal and State Regs)
- Contribution Modeling
- Spending Accounts Review

Integrated Wellness Program

- Strategic Wellness Plan Consultation and Evaluation
- Development and Implementation of Program
- Communication Strategy Deployment for Increasing Engagement and Utilization
- Wellness Program Metrics Evaluation for Determining Effectiveness
- Strategic Partner with Industry/Health Experts
- Annual Health, Wellness and Safety Fair Participant
- Monitor legal/regulatory changes which may impact program
- Recommend and implement periodic improvements in the overall wellness program

Insurance Brokerage

- Annual evaluation of current carrier's products and competitiveness
- Marketing of insurance products
- Development of RFPs to market all lines of coverage
- Complete Market Analysis and Carrier Negotiations
- Implementation of Insurance Programs

Administration

- **MSI Eligibility Team** - tracks and processes new hire enrollments, changes in coverage/personal information and terminations and feeds information/data to the Billing Team
- **MSI Enrollment Team** - non-commissioned MSI associates who conduct bi-weekly new hire enrollments and annual open enrollment meetings all on a one-on-one, face-to-face basis
- **MSI Customer Service Team** - responds to service requests, coverage questions, claims issues, requests for administrative assistance and coordination with doctors and hospitals to facilitate claim payments
- **MSI Billing Team** - reconciles monthly invoices with on-going eligibility and provides audited "premium-due" information reports to your HR/finance/accounting department
- **MSI IT and Compliance Team** - manages all data flow of eligibility and member information via EDI with insurance carriers, TPAs and clients
- Handles 1094/1095 reporting
- Advise benefits staff on regulatory compliance-related requirements
- Dependent Eligibility Audits

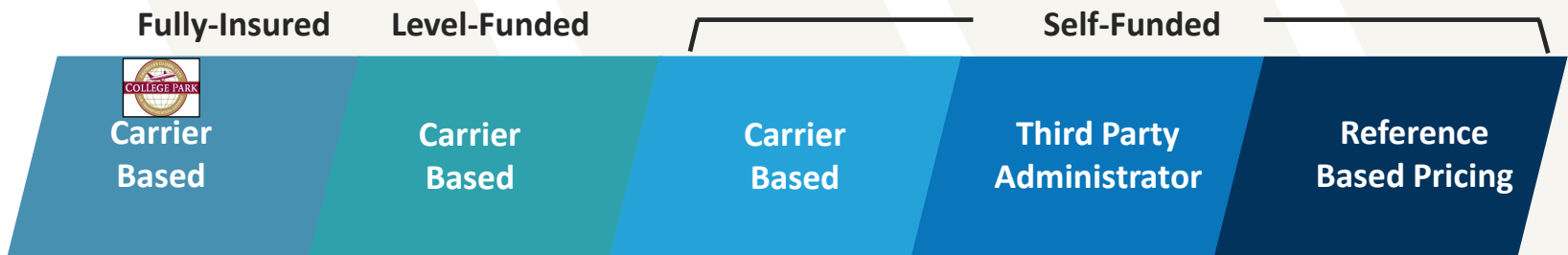
Communication

- Conduct New Hire and Open Enrollment Meetings
- Design and publish Employee Benefits Handbook
- Design/Publish Total Compensation and Benefit Statement
- Live Customer Service - MSI representatives answer the phone (Mon-Fri, 8a-5p) to assist with benefit-related questions and claim issues
- HR Hotline

Technology

- Provide and Manage Benefits Admin System
- True EDI Feeds Established - Information mapped directly into the eligibility data base of the appropriate carrier
- All programming and data mapping is performed by MSI employees who are licensed and trained in the insurance products being enrolled
- Payroll Data Import/Upload
- MSI Employer Portal - provided to the HR and Benefit Staff for communicating to New Hires and managing Terminations and Changes
- MSI Employee Portal - Online portal with username access that allows employees the ability to view/print benefit summaries, plan documents, claim forms, etc.

- Vetting carriers is a continual process overseen by MSI so as to ensure our clients are partnered with the solutions best positioned to meet their overall organizational goals and objectives.
- As with all Renewals, MSI utilizes a comprehensive marketing approach, soliciting proposals from all viable options, which includes evaluating Fully Insured and Self-Funded options.
- The objective of the Market Evaluation is not to have clients changing carriers every year, but to ensure the most competitive options are presented, while holding the incumbent carrier accountable.



- Client pays premium
- Carrier pays claims
- Carrier assumes risk
- Options include Anthem, Aetna, Cigna, Kaiser and UHC

- Client pays premium
- Carrier pays claims
- Carrier assumes risk
- Client shares in favorable experience

- BUCA-based administration (carrier provides admin, network, stop-loss and PBM services)
- Client pays claims up to stop-loss deductible

- Independent TPA provides admin services
 - Leased carrier network
 - Multiple stop-loss and PBM options
 - Client pays claims up to stop-loss deductible
- Most Flexible**

- Independent TPA provides admin services
- No carrier network
- Multiple stop-loss and PBM options
- Client pays claims up to stop-loss deductible

Sample Reporting – Health Plan Spend Analysis

Paid Date	Medical/Rx Enrollment	Fixed Costs			Attachment Point	Gross Claims
Month	Employees	Admin/Network Fees	Stop Loss Premium	Total Fixed Costs	Max Claims Liability	Total Medical/Rx
July 2023	294	\$20,698	\$117,762	\$138,459	\$377,494	\$184,475
August 2023	290	\$20,416	\$116,837	\$137,253	\$374,409	\$157,248
September 2023	296	\$20,838	\$120,035	\$140,873	\$384,518	\$279,207
October 2023	299	\$21,050	\$122,087	\$143,136	\$390,943	\$157,579
November 2023	307	\$21,613	\$124,841	\$146,454	\$399,854	\$430,210
December 2023	304	\$21,402	\$124,148	\$145,550	\$397,540	\$235,591
January 2024	0	\$0	\$0	\$0	\$0	\$0
February 2024	0	\$0	\$0	\$0	\$0	\$0
March 2024	0	\$0	\$0	\$0	\$0	\$0
April 2024	0	\$0	\$0	\$0	\$0	\$0
May 2024	0	\$0	\$0	\$0	\$0	\$0
June 2024	0	\$0	\$0	\$0	\$0	\$0
Totals:	298	\$126,016	\$725,710	\$851,726	\$2,324,760	\$1,486,389
Annualized	298	\$252,032	\$1,451,420	\$1,703,452	\$4,649,519	\$2,972,779

Total Spend	YTD	Annualized
Fixed Costs	\$851,726	\$1,703,452
Net Agg Paid Claims	\$1,310,512	\$2,621,024
Total Gross Costs	\$2,162,238	\$4,324,476
Employee Contributions	\$151,037	\$302,075
Total Net Costs	\$2,011,201	\$4,022,402
Total Net Costs PEPY	\$13,483	\$13,483

Out of Aggregate Claims:	\$2,287
Stop Loss Reimbursements:	\$173,590
Total Net Aggregate Paid Claims:	\$1,310,512
Total Net Aggregate Paid Claims:	\$1,310,512
Attachment Point:	\$2,324,760
Medical Loss Ratio:	56.4%

- Rx Claims account for \$314K in Gross Claims Spend Plan YTD