



Burnham Benefits Response to Sylvan Union School District RFP NO. 2020/2021-03  
Employee Benefits Insurance Broker/JPA and Consulting Services

---

May 21, 2020

Carol Smith  
Sylvan Union School District  
605 Sylvan Avenue  
Modesto, CA 95350

RE: RFP NO. 2020/2021-03 Employee Benefits Insurance Broker/JPA and Consulting Services

Dear Carol,

Thank you for allowing Burnham Benefits the opportunity to respond to Sylvan Union School District's RFP NO. 2020/2021-03 for Employee Benefits Insurance Broker/JPA and Consulting Services. Enclosed in our response is a detailed description of our firm, the team that will work directly with the District, our account management approach and unique offerings, strategic partnerships, and sample work product.

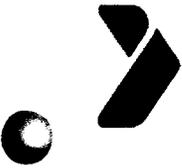
Burnham Benefits is heavily invested in the public sector segment. We support 81 public sector clients throughout California, representing 71,000 public sector employees. Our response highlights our expertise, capabilities, client references, and strategic approach. Our case studies and client references will speak to our ability to support the District.

Burnham views itself not only as a trusted partner with our clients but as an extension of the Human Resources and Finance departments. We are client-centric and believe that only one size fits one client. We collaboratively help clients with the creation and implementation of benefits strategies designed to control costs, attract and retain the best talent and incent employees towards better health and well-being. Our clients are our highest priority, and their interests come first and foremost.

Based on our team's background, experience, and knowledge of the District thus far, we believe we are the consultants with the right skills and services to help the District achieve its goals. These skills and services include:

- Strong negotiating skills to ensure the most competitive pricing for the District's benefits
- Experience working with direct markets, JPAs and trusts
- Deep understanding of voluntary benefits solutions and enrollment
- Sophisticated underwriting and actuarial skills and tools to understand and control claims exposure
- ACA compliance expertise, analytics and support





Burnham Benefits Response to Sylvan Union School District RFP NO. 2020/2021-03  
Employee Benefits Insurance Broker/JPA and Consulting Services

---

- Compliance resources to help navigate the ever-changing and highly regulated benefits environment
- Employee communications designed to boost employee engagement
- Technology resources to help the District evaluate, procure, implement and maintain benefits and administrative products and systems
- Support to streamline day-to-day benefit plan administration

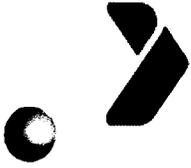
We invite and highly encourage the District to contact our provided client references. Please let us know if there is any additional information that can be provided to assist you in selecting Burnham Benefits as a finalist in the District's search for an employee benefits partner. Thank you again for your consideration. We look forward to hearing from you.

Best Regards,



Tina Koenig  
Vice President





# Table of Contents

1. General Information .....5

    ATTACHMENT A—GENERAL INFORMATION FORM .....5

    ATTACHMENT D—CONSULTANT QUESTIONNAIRE .....6

2. Profile of Firm .....16

3. Qualifications of the Firm .....20

    Attachment C—CLIENT REFERENCES.....23

4. Project Staffing .....24

5. Services .....32

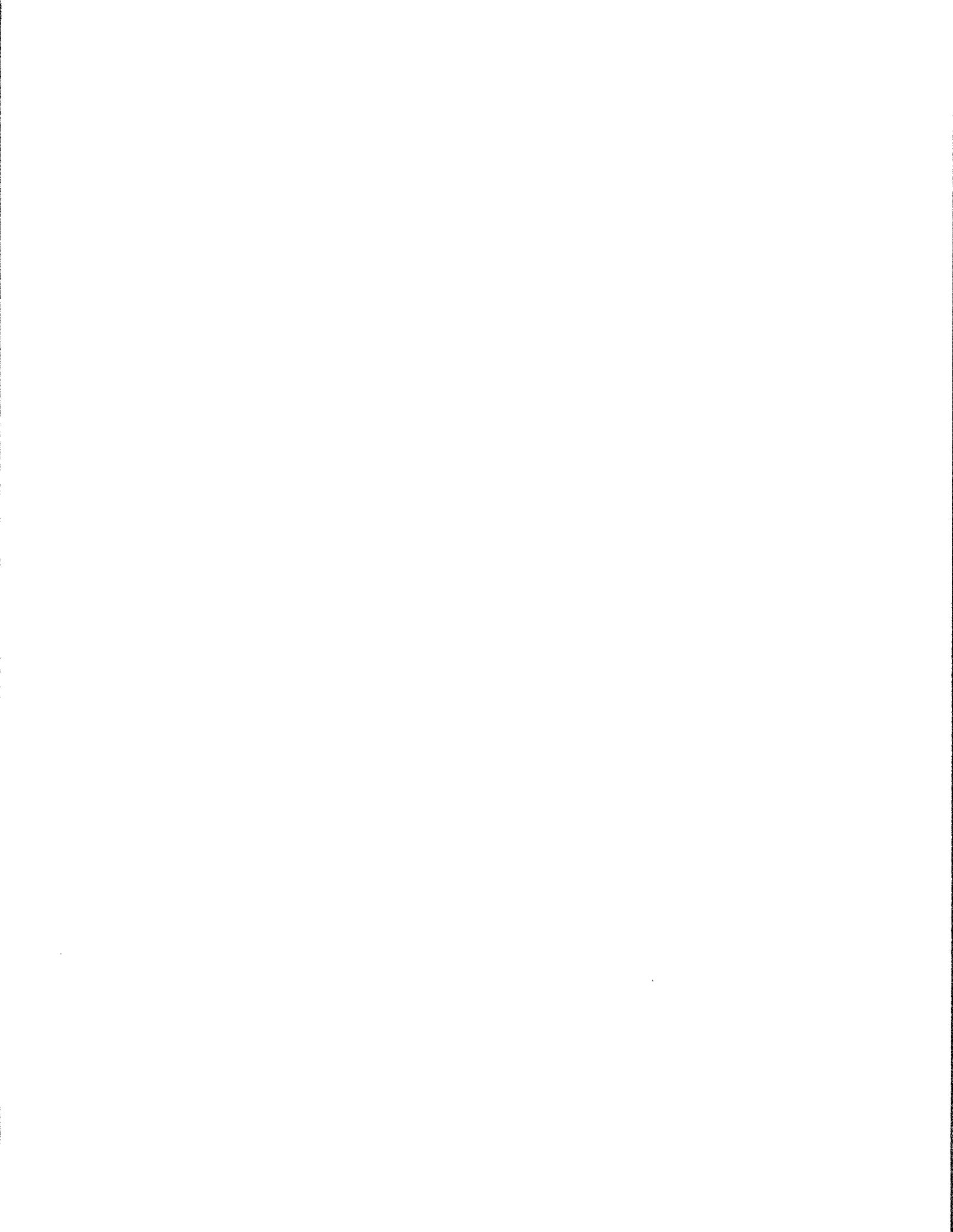
6. Client Communication.....54

7. Cost/Pricing Information .....55

8. Other .....59

Appendix .....61







1. General Information

ATTACHMENT A—GENERAL INFORMATION FORM

(To be completed by the bidder and placed at the front of your proposal)

Legal Firm Name: Burnham Benefits and Insurance Services

Street Address: 2220 Douglas Blvd, Suite 170

City/State/Zip: Roseville, CA 95661

Telephone Number: 916-642-1003

Fax Number: 916-642-1001

Web Site Address: www.burnhambenefits.com

Type of Organization (Corporation, Sole Proprietorship, Partnership, etc.): S Corp

Business License (documented) Tax ID Number (Federal): 33-0643611

Name and Title of Project Manager: Tina Koenig, Vice President

Name, Title and Phone Number of person project correspondence should be directed to: Tina Koenig, Vice President, 916-642-1003

E-mail Address: Koenig@burnhambenefits.com

Listing of Major Subcontractors proposed and areas of responsibility/Phone number:

ThinHR – Human Resources Resource

EASE – Benefits Administration

Tina Koenig  
Signature

5-20-20  
Date

Name and Title of person signing completion of General Information Form:

Tina Koenig, Vice President



## ATTACHMENT D—CONSULTANT QUESTIONNAIRE

Question	Response
<p>1. Has your firm established any limitation on the number of clients you intend to accept? What is your client to consultant ratio?</p>	<p>Burnham is purposely staffed to quickly adapt to a client's increase in needs and onboard new clients. When team members reach their capacity, we leverage additional resources and make the appropriate changes so our clients continue to receive the attention and high touch service for which they are accustomed. The number of clients can vary greatly depending upon the needs of the client. There may be instances where an employer with 50 employees is twice as time involved as a client with 500 employees. For this reason, we evaluate an employee's workload, versus just referencing "case size" when determining capacity. As such, the client to consultant ratio varies greatly depending upon the size and complexity of the accounts handled by a particular team. Our team of Koenig/Corp currently works with 13 clients, of which approximately 50% are public agencies.</p>
<p>2. Describe your plans for managing the future growth of your firm.</p>	<p>Burnham has been very thoughtful in the growth of our organization. Except for our expansion into Property &amp; Casualty insurance over the past year, our growth has been organic. We continue to remain open to hiring "right fit" employees that can assimilate into our culture and that of our clients. Burnham does not intend to grow rapidly and values the importance of a structured and strategic growth pattern.</p>
<p>3. Does your firm have any conflict of interest policy? If so, please provide a copy. Also, please describe any conflicts that have arisen within the firm and how they were resolved.</p>	<p>Our employee handbook addresses internal conflicts and the resolution model, but we do not have a formal exterior facing conflict of interest policy. Because Burnham remains an independently owned firm, we do not foresee any conflict of interest as it pertains to clients.</p>
<p>4. What are three to four key things we should look for when hiring a consultant?</p>	<p>Experience, integrity, independence, and stability.</p>

5. What is your firm's policy/standard for returning:
- Phone calls?
  - E-mails or written Questions?
- Our account management team generally returns client inquiries within a few hours of receipt, regardless of method of receipt (phone/email). On a rare occasion, the account manager may return the call/email the following business day if they had already left the office before the inquiry came in.
6. Provide two examples of when you have provided services that have gone beyond the "spirit of the contract" (pro bono work).
- The Burnham Team working with Sylvan USD goes above and beyond with their clients regularly. For example, a client was recently faced with a substantial budget cut to their benefits program. It was also very important to receive the feedback of the employees for where these cuts should come from. After reaching out to the Burnham team, Tina and her team developed a strategy that involved an employee survey, followed by employee focus groups and a final recommendation incorporating their findings into the board recommendation. This allowed the board to make decisions based on where employees felt they could absorb changes with the least amount of impact on the greatest number of employees.
- Another example involves an individual employee who was in a difficult situation with her teenage child and her therapist who became out of network. Sara Corp worked diligently with the carrier and the provider's office to ensure a 6-month transition of care for the teenager. The employee was extremely pleased to allow her child the opportunity to continue seeing the provider for consistency and give them enough time to either bring the issues to closure or to transition to a new provider in a slower, more methodical way.



7. Give two examples that demonstrate your firm's ability to be proactive in finding opportunities to enhance services to the client.

Last year, one of Tina's clients was looking for a way to offer a discount program to their employees. After researching, Tina identified a no-cost discount and employee perks/reward program for her client. In fact, the program became so successful and popular that Tina expanded the relationship, and now all Burnham Benefits clients have access to this free discount and perk program.

With the most recent activity around COVID-19 and the industry response, the Burnham Benefits team found many ways to enhance our services to our clients. This included creating COVID-19 resource centers for clients and building custom communication pieces that specifically addressed each client's respective carriers and how each was handling COVID-19 coverage. Our clients found this an extremely valuable tool and allowed them to quickly wade through (and dismiss) most of the emails flooding their inbox daily.

8. If you are the successful new consultant, outline your transition plan with dates, tasks and responsible parties.

Burnham understands that changing employee benefits brokers may cause uncertainty. Our goal is to manage this conversion and limit the work required by the benefits staff. Our proven process results in a smooth and seamless transition to Burnham. We have provided a sample timeline assuming an effective date of July 1<sup>st</sup> (with work commencing mid-June).

#### **APPENDIX: Sample Transition Timeline**

9. How many days of advance notice would your company require in order to attend ad-hoc (subcommittee) meetings?

Given our proximity to the District, traveling to attend ad-hoc meetings is a non-issue. Of course, our availability would depend on other meetings that are scheduled during the same time and our ability to reschedule other meetings, if appropriate. Generally, the team's calendar can be booked with about two weeks advance notice without issue. Anything less would just require coordination with already scheduled meetings, as noted above.

10. How do you track and communicate legislative updates to your clients? Provide a sample of legislative updates.

If a new federal, state or local ruling or regulation has the potential to impact Burnham's clients, we issue either ACA Pathways or Legislative Updates. Burnham follows-up with clients directly with ready templates they can use if needed. We also conduct monthly webinars for our clients. Most of Burnham's webinars focus on compliance-related issues.

**APPENDIX: Legislative Update**

11. How do you track and communicate industry trends to your clients? Provide a sample of industry trend updates.

Healthcare is ever-changing and evolving—Burnham stays abreast of industry trends to ensure our clients are kept well informed. There are many ways our firm and colleagues remain current on marketplace events and trends. This includes access to Burnham's various compliance resources and tools and attendance and participation in industry events, continuing education, benchmarking, and idea and information sharing across colleagues.

Beyond simply informing the District of what happens in the industry, we outline specific implications to the District and its employees. Burnham will keep the District updated on market and vendor trends and developments.

**APPENDIX: Pooled Carrier Trends-2nd Quarter 2020-(Rec. Feb 2020)-NorCal**

12. Describe how your firm would handle ad-hoc projects that arise due to changes in legislation or other events which create additional service needs for SUSD.

Burnham's goal is to include all brokering services within our overall Scope of Services and quoted fee. We want the District to feel confident they are receiving a comprehensive Scope at an all-inclusive price.

If a project arises that is clearly outside the proposed Scope, we will discuss with the District to find a mutually agreeable approach. Burnham will not commence any work without expressly discussing with the District why the project is considered out of Scope and any associated additional fees. To date, the Koenig Team has managed to perform all ad-hoc projects for their clients without their clients incurring additional charges.



13. Provide an example that demonstrates your firm's ability to be proactive in finding opportunities to enhance benefits and services.

**APPENDIX: Case Studies—Proactive Enhancements**

14. Provide examples that demonstrate your firm's negotiation skills to bring down costs.

**APPENDIX: Case Studies—Negotiations**

15. Should your firm engage the service of a subconsultant for SUSD's account, provide the firm's name/names, relevant experience and contact information for the persons who would be the primary and secondary contacts for this engagement, and copies of their biographies/resumes.

While Burnham Benefits does subcontract with several firms to provide services to our clients, we believe these are not the types of "subconsultants" addressed in this question. They include firms such as ThinkHR, EASE (benefits administration), BenefitHUB (discounts/rewards).

16. For the above subconsultant(s), list the current and past professional affiliations, including boards and committees. Include positions held and years of membership.

N/A

17. Would the subconsultant's primary and secondary contacts for this engagement make decisions on behalf of your firm?

N/A

18. Tell us how you monitor and report on provider performance. Provide a sample of provider performance reports your firm has completed for current clients.

One of the primary functions of Burnham's the District's team is to manage and monitor the performance of the District's vendors on your behalf.

The team is experienced at identifying vendor problems and resolving employer or employee issues with all vendors. This goes beyond simply resolving a problem as it arises. It means considering the larger picture and identifying whether the issue is isolated or is systemic. Once identified, Burnham works closely with the vendors to revolve the concerns while proactively communicating to the District and providing regular updates.

It also means following problems through to complete resolution and not assuming that escalating and issue within a vendor means they will handle it. Our job is to make the District and your HR and benefits staff look good with your employees. We take this seriously.

**APPENDIX: Provider Performance Guarantee Sample**

19. Do you have access to a benefits attorney who could render opinions to SUSD? If so, please provide the cost for this service.

Yes. Burnham Benefits employs an in-house attorney who is available to our clients without additional compensation.

Burnham offers a comprehensive menu of federal and state law compliance support. Vice President and Director of Compliance Richard Asensio, JD, MBA leads Burnham's Compliance Resource Team. Richard has more than 20 years of experience consulting with employers on both qualified and non-qualified plan compliance issues, and he has extensive knowledge of state and federal requirements that impact employee benefit plans.

His areas of special expertise include IRS, ERISA, COBRA and HIPAA compliance, ACA implementation, nondiscrimination testing. Also, he is highly proficient in performing plan document and operational compliance reviews of retirement and health and welfare plans.



Before joining Burnham, Richard worked for Aon Hewitt Consulting, Arthur Anderson and Fidelity Federal Bank. Richard is a member of the California State Bar.

Burnham's clients have direct access to Richard and his services. These services include, but are not limited to, the following:

- Compliance Audit – Burnham developed a proprietary tool, known as the Compliance Toolkit, containing a 50+ page comprehensive review of all current policies and procedures to ensure that the District's benefit plans and materials meet the latest regulatory requirements
- Cafeteria plan preparation and compliance
- ACA compliance, including the employer shared responsibility and employer reporting consulting
- ACA, COBRA, HIPAA, and other federal law and state legislative compliance
- Contract review and required notice disclosures
- Annual compliance calendar
- Non-discrimination testing and other compliance requirements related to welfare and health plans under the Internal Revenue Code
- Wrap plan document and summary plan description (SPD) preparation, review and updates
- CMS Medicare Part D disclosure reminder and instructions
- HIPAA privacy and data security compliance

20. For benefits plans (such as Life, Short-/Long-Term Disability and Accidental Death and Dismemberment Insurance) that require completion of claim forms to obtain benefits, what services does your firm provide for assisting eligible participants in filing for and obtaining plan benefits? Please provide the cost for this service.

Our involvement in assisting members with completing claim forms is dependent upon the information that we have access to. We help several of our clients with completing claim forms for life insurance. However, a claim for Short Term Disability is more difficult as it involves information in confirming their rate of pay and last day worked. We are assuming that information should come directly from the District, but will be available to assist in any way that is practical based on available data. There is no additional cost for this service.

21. What services does your firm provide for developing Open Enrollment and New Employee Orientation materials? Please provide a separate cost for each program (open enrollment and new employee orientations).

Burnham Benefits will develop Open Enrollment and New Employee Orientation materials at no additional cost, as part of the standard employee communications consulting services of the District contract.

Depending on the client's needs and preferences, we create custom open enrollment materials in various media that include, but are not limited to:

- Benefit summaries
- Open enrollment action guides
- Wallet cards
- Posters
- Postcards
- Branded email messaging
- Q & As

In addition, we prepare open enrollment presentations that can be presented live or recorded for distribution to multiple locations or accessed from desktops and mobile devices.

Burnham excels in employee meetings during open enrollment and throughout the year. We will:

- Work with the District Employee Benefits Team to develop the strategy and expectations for employee meetings



- Coordinate carrier attendance and delivery of carrier supplies
- Create open enrollment announcements to highlight the benefit changes and instructions for open enrollment
- Create custom Benefit Summaries that summarize the District's benefit plans, contributions, and carrier contacts
- Update online enrollment system
- Post carrier benefit summaries and required annual notices on the District's online enrollment site
- Host employee benefit meetings with a presentation encompassing all benefits
- Provide various health and wellness pieces to educate employees
- Provide our 1-800 number employee call-in line for claim assistance
- Work with your Benefits Team and the carriers on the timely submission all open enrollment paperwork (renewal confirmations, enrollment forms, Master Applications for new carriers)
- Update COBRA rates with your COBRA TPA
- Send COBRA enrollment packets for new coverage

22. What service does your firm provide for developing a Wellness Program? Please provide the cost for this service.

Wellness is more than just the traditional wellness program that tracks activity, and maybe BMI or tobacco status. It's more about how one defines wellness. How do employees value their job and feel supported in all elements?

Burnham has access to tools to track activity and help organize wellness programs, but the value and Burnham's approach centers more around defining what employees believe wellness is. Once defined, we can build programs, resources, and incentives that directly center around the District's wellness philosophy.

#### **Wellness Consulting**

- In-house wellness team
- Total health & productivity needs assessment, planning & implementation
- Ongoing support, active participation on wellness committee
- Health fairs and flu shots support

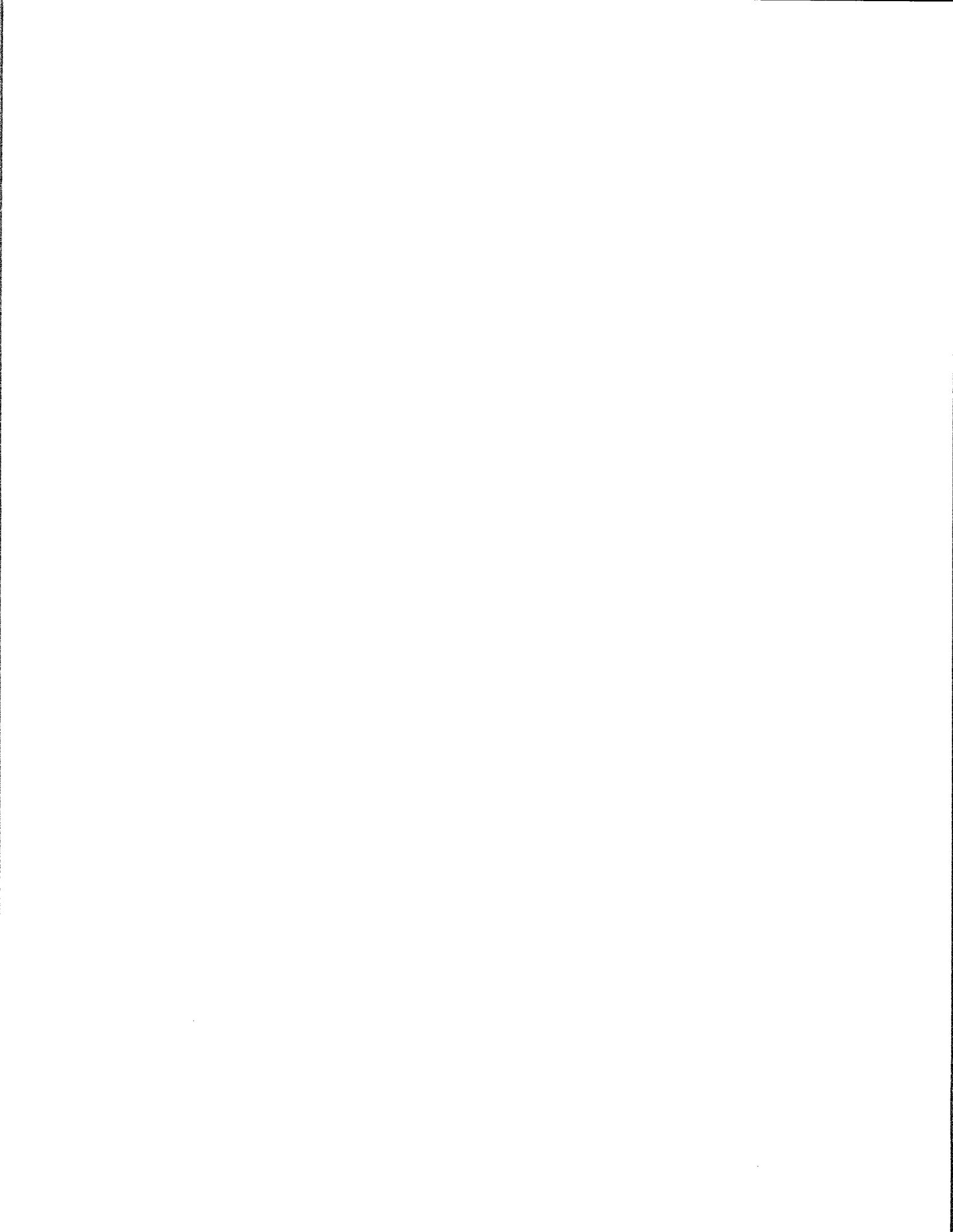
#### **Proven Process Driving Success**

Wellness program designs should target the needs of the District's employees and meet the vision of the organization. Every wellness program is different, and we work independently with each client to develop a strategy that uniquely works for them.

23. Are there any other relevant consulting services that are not listed that you will provide as part of your consulting services to SUSD? Please provide the cost for these services.

Our standard Scope of Services includes all aspects of Renewal Negotiations, Vendor Management, Communications, Compliance and Customer Services. In addition, we provide access to several valuable resources for our clients through ThinkHR, EASE and BenefitHub. We believe every client should have access to every service provided by Burnham Benefits as part of our standard contract. You will not find your team stating items are "out of scope" and involve any additional charges.







## 2. Profile of Firm

This section shall include the firm name, date established and the address of the office that would be assigned the Sylvan Union School District account. Include a brief description of the firm's history, size, growth, philosophy and culture, number of employees and number of years in business under the same name, including specific experience with the public sector. Include the firm's financial stability, capacity and resources. Additionally, this section shall include a listing of any lawsuit or litigation and the result of that action resulting from: (a) any project undertaken by the bidder or by its subcontractors or affiliates where litigation is still pending or has occurred within the last five (5) years; or (b) any type of project where claims or settlements were paid by the bidder or its insurers within the last five (5) years.



### Privately Held

Burnham Benefits is a privately held, full-service Employee Benefits Consulting and Brokerage firm headquartered in Irvine, California. Established in January 1995, Burnham is among the largest brokerage firms in California specializing in strategic employee benefits consulting and brokerage services.

Being an owner-operated, privately held company means our owners are also actively involved daily with our clients and the business operations. We are not owned by any outside interest, where a return on investment is the primary focus. Our partners understand the business need from a client perspective and can act quickly to change our business model to meet the changing needs of our clients and the industry.

### Servicing Office

2220 Douglas Boulevard, Suite 170, Roseville, CA 95661

### Public Sector Experience

Burnham Benefits' experience in the public sector began 13 years ago in 2007, with a K-12 school district in Santa Barbara County. Since then, Burnham Benefits invested in an internal Public Sector team of advisors that has proven to establish strong relationships and a deep knowledge and understanding of the unique demands and needs of public entities. Burnham Benefits now works with 81 public sector clients throughout California, representing 71,000 public sector employees. This accounts for 16% of the firm's total revenue.

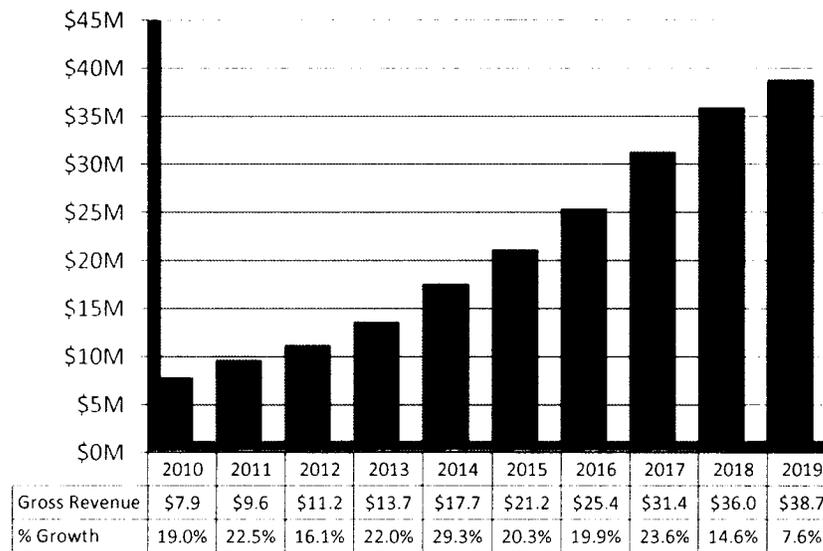


Strategic Growth and Financial Stability

To provide an overview of our financial performance, the chart below illustrates Burnham’s consistent growth over the last 10 years from 2010 to 2019, with an average 19% increase year after year.

- **\$1.9 billion** in premiums managed
- **113 employees**
- **9 offices:**

Orange County, CA	Los Angeles, CA	San Diego, CA
San Francisco Bay Area, CA	Lawndale, CA	San Luis Obispo, CA
Sacramento/Roseville, CA	Fresno, CA	Austin, TX



As a privately held corporation, Burnham reserves the right to disclose its assets, liabilities and net worth. We have, however, included a copy of a letter from our accounting firm Wertz & Company, LLP as to the current financial stability of the organization.

**APPENDIX: Financial Stability Statement**

Furthermore–Burnham Benefits attests that we are not involved in any ongoing bankruptcy, reorganization, and liquidation or dissolution proceedings. There is no pending or past litigation against Burnham Benefits for projects we have undertaken.

# Burnham Benefits Response to Sylvan Union School District RFP NO. 2020/2021-03 Employee Benefits Insurance Broker/JPA and Consulting Services

## A Great Place to Work

- “Best Place to Work in Insurance” (national recognition) | every year since 2013 | Business Insurance Journal
- “Woman of the Year” | 2015—President and CEO Kris Allison | *Orange County Business Journal*
- Certified Women’s Business Enterprise (WBENC), a distinction accepted by over 800 national corporations, non-profit organizations and government agencies across the country



## Modern Company Culture

The Burnham team prides itself on operating much differently than your average brokerage firm. We are highly collaborative, and revel in a culture that allows employees to blossom into the best possible version of themselves. Burnham truly understands the importance of work-life harmony, encouraging employees to get involved in the community and offering flexible schedules.



## Socially Conscious

Burnham is a Certified B Corporation. Certified B Corps are a new kind of business that balances purpose and profit. We are legally required to consider the impact of our decisions on our colleagues, customers, suppliers, community, and the environment. We are proud to be part of a community of leaders, driving a global movement of people using business as a force for good.

- The only certification that measures a company’s entire social and environmental performance
- B Corp Certification proves companies are meeting the highest standards of verified performance through charitable giving, employee benefits offered, and operations materials
- Evaluates how our company’s operations and business model impact our employees, community, environment, and clients
- Positive impact is supported by transparency and accountability requirements

B Corp Certification doesn’t just prove where we excel now—it commits Burnham to consider stakeholder impact for the long term by building it into our legal structure.



The Burnham Way | *Meaningful Acts Making an Impact*  
The Burnham Way is our employee philanthropic program.

#### Volunteer Events

- Organize group events and drives throughout the year
- 15 hours of paid work time can be used for volunteering

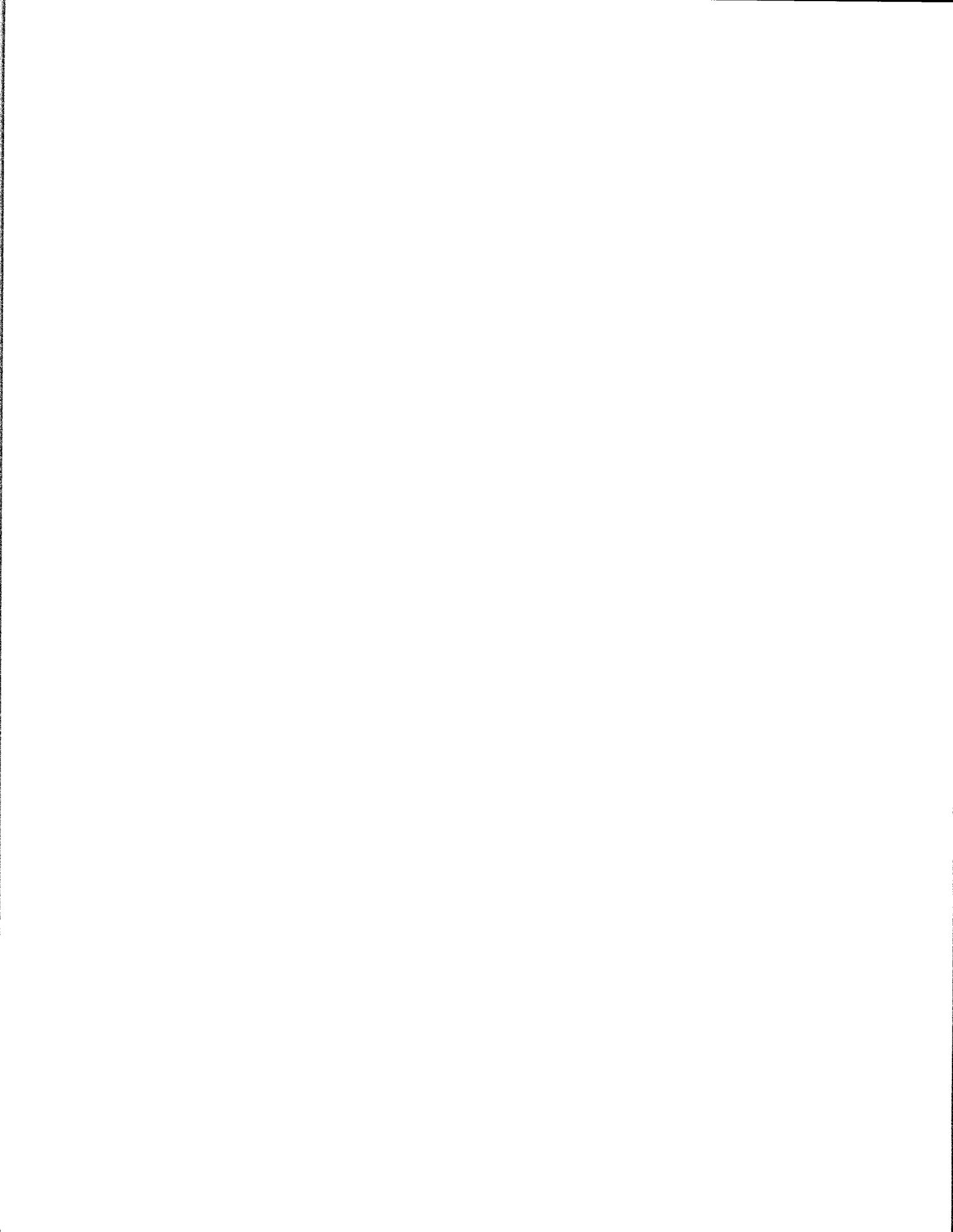
#### Giving Back

- Burnham match: \$500 per employee each year
- In 2019, almost \$80,000 in employee charitable contributions

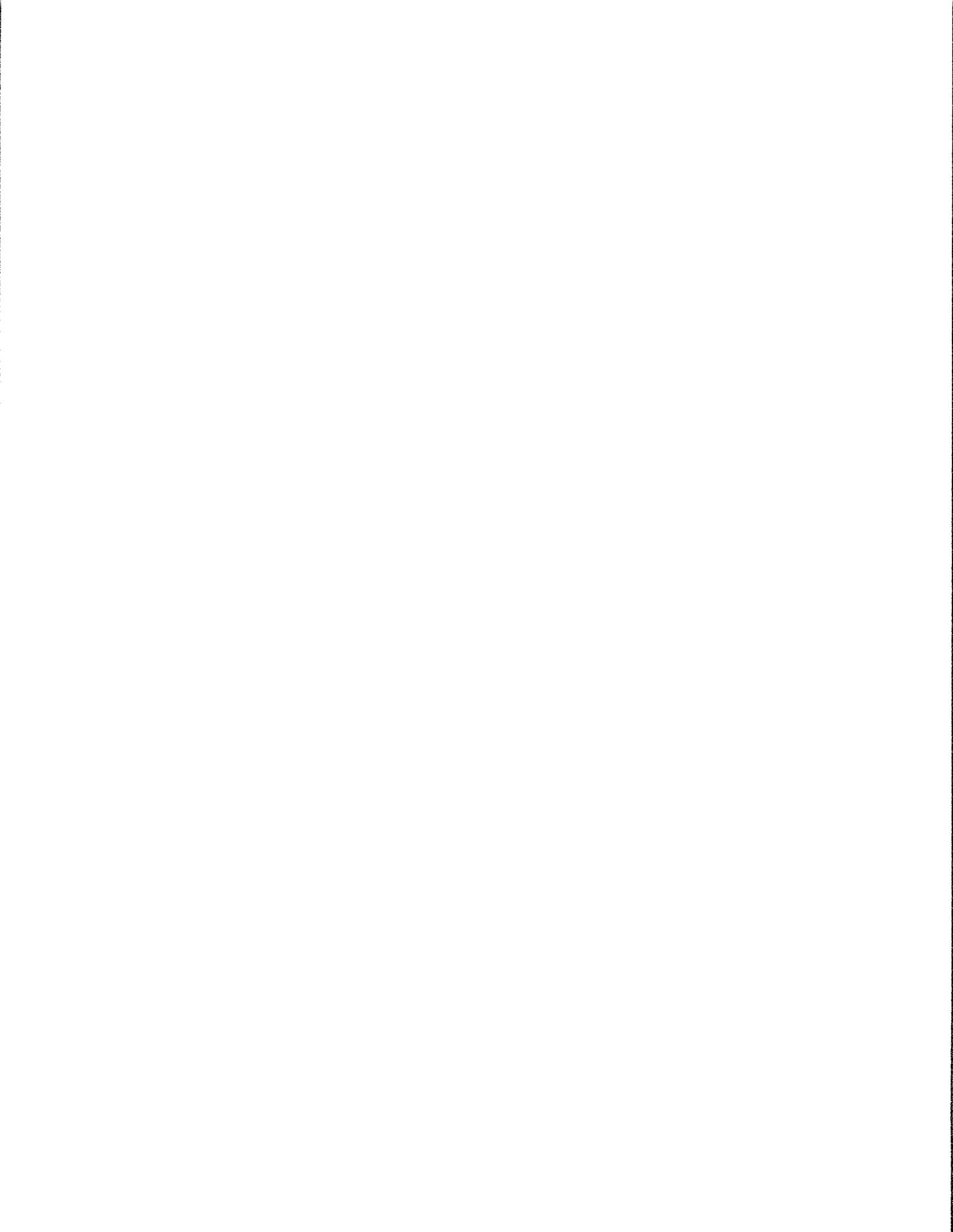


#### Capacity and Resources

As addressed in our response to Attachment D, Question 1 - Burnham is purposely staffed to quickly adapt to a client's increase in needs and onboard new clients. When team members reach their capacity, we leverage additional resources and make the appropriate changes so our clients continue to receive the attention and high touch service for which they are accustomed. The number of clients can vary greatly depending upon the needs of the client. There may be instances where an employer with 50 employees is twice as time involved as a client with 500 employees. For this reason, we evaluate an employee's workload, versus just referencing "case size" when determining capacity. As such, the client to consultant ratio varies greatly depending upon the size and complexity of the accounts handled by a particular team. Our team of Koenig/Corp currently works with 13 clients, of which approximately 50% are public agencies.









### 3. Qualifications of the Firm

This section shall include a brief description of the bidder's and any sub consultant's qualifications and summary of previous experience on similar or related projects. Provide a firm, and an account team client list from the past five (5) years, including any and all public entity client accounts, and a description of pertinent insurance programs negotiated for those entities; the number of covered employees/retirees for each client; the time period services have been provided to each account; the total project cost; and a brief statement of the firm's adherence to the schedule and budget for each project. Include as account contacts individuals who may be contacted by the DISTRICT for references (use Attachment C format). Be sure to list contact name, organization, title, e-mail address and telephone number for each account.

#### Experience

Burnham will stand out as a benefits consultant in the following areas:

- We are an objective consulting firm that sell clients any proprietary products, pools, or services. Nor are we compensated in any way by the pools for actuarial, marketing, underwriting, administrative, or other services provided. We pick best-fit vendors and carriers for our clients. We are an all-in model—no separate invoices for communications, legal, and wellness consulting.
- Extensive experience working with and presenting to bargaining units, benefit committees, and advisory committees
- Burnham has assisted many public entities in evaluating non-CalPERS pool options with a timeline and transition plan as well as direct contracts, similar to the District.
- Recognized presence in the public sector space including representation at industry conferences and seminars. Tina Koenig has been a regular speaker at the GalGovHR Conference each year.

A few recent noteworthy successes include the following:

#### College District

- Performed full benefits marketing
- Conducted rigorous analysis of the cost and benefits of the options presented
- Educated insurance committee, management, Board of Trustees through various meetings and presentations
- Supported through transition process, anticipating needs and preparing the client in advance
- **Projected savings in year one is \$10million+**



County

- Performed full marketing as programs hadn't been out to bid in five years
- Utilized marketing leverage and knowledge of industry-standard programs to negotiate more favorable renewal positions
- Introduced Kaiser to address employee desires
- Enhanced dental program with multi-year rate caps
- Added life insurance coverage for a portion of the population who hadn't received it historically and negotiated multi-year rate caps and guarantees
- **Final renewal action was rated reduction of 2% with plan design enhancements resulting in savings of \$500,000**

Southern CA City

- Took over from prior broker and performed rate validation on all renewals
- Obtained rate relief from medical, dental, and life/disability vendors
  - Including Kaiser
    - Reduction on plans in multi-year guarantees with extended guarantee period
- **Annual savings amounted to \$250,000**

Public Sector Client List - Confidential and Proprietary

The clients highlighted in green on the following page are serviced by Tina Koenig and her team in the Sacramento/Roseville office. We have listed the requested information for several of the accounts that work with Tina and her team.



## Attachment C—CLIENT REFERENCES

### Reference #1

**Name of Client:** Aspire Public Schools  
**Client Address:** 1001 22<sup>nd</sup> Avenue, Suite 100, Oakland, CA 94606  
**Client Contact: Names and Titles** Monica Ruiz Sanchez, Employee Services Manager  
**Client Contact Phone Numbers** 510-434-5037  
**Brief Description of Work Performed for this client** Aspire Public Schools has been a client of Tina Koenig’s for more than 10 years, including with a previous employer. The Burnham contract is a full-service contract assisting with financial negotiations, renewal functions, communication, compliance, wellness, and daily claims and customer service

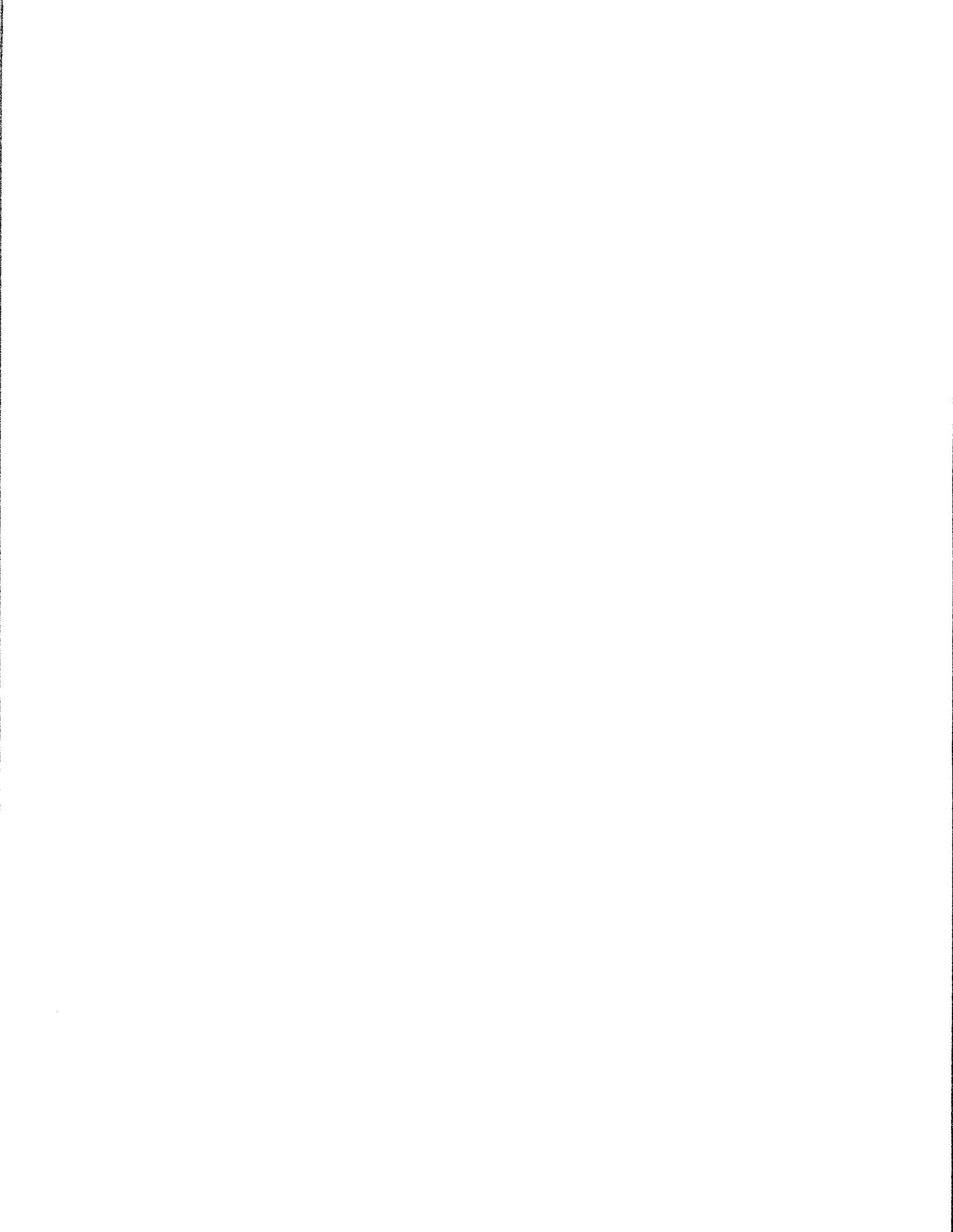
### Reference #2

**Name of Client:** City of Oakley  
**Client Address:** 3231 Main Street, Oakley, CA 94561  
**Client Contact: Names and Titles** Nancy Marquez, HR Manager  
**Client Contact Phone Numbers** 925-625-7007  
**Brief Description of Work Performed for this client** City of Oakley is also a full-service client with Tina’s team and has been a client since 2014. The contract originally began with an ad-hoc project involving focus groups with an incoming police force and determination of benefit offerings. It was subsequently transitioned into a full-service contract.

### Reference #3

**Name of Client:** Galt Joint Union Elementary School District  
**Client Address:** 1018 C Street, Suite 210, Galt, CA 95632  
**Client Contact: Names and Titles** Lori Mathies, HR Director  
**Client Contact Phone Numbers** 209-744-4545 x316  
**Brief Description of Work Performed for this client** Galt has been a client of Tina Koenig’s since early 2018. It is a full-service contract. Galt JUESD was a previous customer of Keenan, if the District would like a comparison of services, including benefits administration systems.

If the District would like additional contact information from any of the Public Agencies above, please indicate which agencies and contact information will be provided. In addition, Tina Koenig’s team has not had a client terminate their services since she began working with Burnham six years ago. If the District would like a reference from a public agency who terminated Burnham’s services from another office, we are more than happy to provide upon request.





## 4. Project Staffing

The bidder is required to list the key individuals who will be assigned to the account, their qualifications and disciplines, including their resumés in the proposal. The bidder's staff member who will be handling SCI-ISD's account will be an important factor considered by the Selection Advisory Committee. This section shall discuss how the bidder would propose to staff this project. The bidder shall include the following:

- a. Identify the names and office locations of key personnel who will be assigned to the District's account. Describe their areas of responsibility and their education, experience and professional qualifications in those areas (use Attachment B format) with emphasis on public sector organizations and unionized work forces.

The following wholly encompass each team members' responsibilities, education, experience and professional qualifications with emphasis on public sector organizations and unionized workforces.

### Sylvan USD Burnham Benefits Support Team



Dan Exceen  
Executive Vice  
President/Partner/Public  
Sector Practice Lead  
Irvine, CA

In Industry | **July 1994**  
At Burnham | **Aug. 2006**

#### Executive Liaison

- Leads Burnham Benefits' Public Sector Division
- Specialized experience with trusts, joint powers authorities (JPAs) and other bargaining units
- Creates and executes mutually agreeable benefit strategies to strategically lead clients toward the most effective health and welfare benefits programs
- Develops long term strategic goals around cost containment, while maintaining the organizational culture
- Significant emphasis on building a strong, empowered team to work beside him, which translates into a cohesive support system for each client
- Continually cultivates and maintains client relationships
- Bachelor of Arts in Political Science and History from the University of Nebraska



Tina Koenig  
Vice President  
Roseville, CA

In Industry | **Jan. 1987**  
At Burnham | **March 2014**

## Execution Leadership

### Core Team Member

- Responsible for senior consulting and the success of each client's benefits plans, maintaining strategic partnerships with current clients, and supporting strategic planning, negotiations, and consulting at the executive and management levels
- More than 33 years of experience in insurance consulting and an extensive background in underwriting
  - Provides a unique perspective for Burnham clients as they navigate the complicated landscape of employee benefits
- Expertise in strategic management, funding alternatives and consumer-driven healthcare
- Skilled negotiator—enjoys working to achieve the absolute best outcome available for her clients, while providing the touchstone consultative service Burnham is known for
- Began insurance career in 1987 with Aetna, Inc., a managed health care company
  - Gained experience in underwriting and account management before moving to the consulting side of the business in 2000
- Underwriting experience was immediately utilized when she designed and underwrote a new self-funded program with a large JPA
- California Life and Health License
- Designated Group Benefits Associate (GBA)
- In 2011 and 2012, she was named a Top Employee Benefits Consultant by *Risk & Insurance* magazine and *Human Resources Executive* magazine with an emphasis on her Public Entity work



Sara Corp  
Consultant  
Roseville, CA

In Industry | **March 1991**  
At Burnham | **March 2016**

#### Service Leadership

##### Core Team Member

- Responsible for account management and vendor collaboration as well as managing renewal activity and day-to-day client relationships
- Before Burnham, Sara worked at Benefit and Risk Management Services (“BRMS”), in Folsom
  - Was brought in to handle larger, more sensitive self-funded and fully-insured clients
  - Developed, coordinated and organized seamless transitions to mitigate disruption to groups, and enjoyed building relationships with both clients and brokers
- Her experience working with a TPA, a carrier, and a brokerage, as well as small and large clients, lends her a perspective that incorporates all facets of the benefits industry and has prepared her for her role at Burnham
- Bachelor of Arts in Liberal Studies from California State University, Sacramento



Jessica Patterson  
Account Representative  
Roseville, CA

In Industry | **April 2015**  
At Burnham | **July 2018**

#### Service Support

##### Core Team Member

- Supports Sara with administrative elements of the District’s account
- Responsible for the:
  - Account management of assigned groups
  - Organizing employee communication pieces for open enrollment meetings
  - Updating and renewing benefits enrollment technology sites, Cobra, FSA, and HSA
- Assisting employees with claim resolution



b. List the experience and education requirements and standards for Account Manager.

Burnham does not have a set requirement for experience and education for our account manager positions. If we are hiring from outside of our organization, we look for a combination of both education and experience, as both play an important role in the success of any account manager. We do, however, look to promote within whenever possible. In that instance, the experience and work ethic of the individual carry a greater weight in our evaluation to promote.

Burnham provides employees with regular training opportunities. We ensure our colleagues are trained and well-versed in the latest regulatory guidance. We hold trainings in our offices on various topics that resonate with our clients for impactful consulting.

We urge our colleagues to develop themselves and their knowledge through the provided training opportunities that align with their client focus and areas of interest.

Examples of current and ongoing training:

**Burnham Benefits Employee Training Opportunities**

Burnham Analytics and Claros Analytics	The Burnham Analytics team members are experts on these resources. They hold monthly training sessions for all colleagues to gain a clearer understanding of how and when to best leverage the tools for clients
Compliance Training	Burnham’s director of compliance hosts monthly compliance trainings to keep everyone apprised of ongoing regulatory developments and provide education on standing legislation
Excel	Excel training is available at varying levels of competency to increase efficiencies since a large portion of our work product is produced in Excel

Burnham works proactively to keep clients’ benefits programs and administration compliant with federal and state regulations. We make every effort to shield every client from severe legal and financial risk through specialized resources and tools used by our compliance team.

Burnham's team subscribes to:

- Lexis Nexis online research library
- Thompson Reuters' Checkpoint (resource for federal related laws and regulations)
- Zywave (supplements internal legal resources)
- ThinkHR and HR360 (comprehensive HR resource with access to HR advisors, documents, tools, templates and checklists, HR training, research on complex issues, compliance alerts, webinars, and whitepapers)

These resources are available to Burnham's colleagues and clients free of charge. We also subscribe to several online benefit newsletters that provide daily updates to our team members regarding industry trends, products, new legislation, guidance issues, as well as commentary from legal and other sources in the benefits community. Other valuable subscriptions are in place with BenefitsLink.com's daily health and welfare plans newsletter and the State Net Capital Journal that provides weekly updates on relevant state law information. Also, we require all team members to participate in internal team and carrier meetings to stay current on all relevant strategies, products, and network options.

In addition, Burnham encourages and pays for industry-specific certifications such as Certified Employee Benefits Specialist (CEBS), Wellness Council of America (WELCOA), Certified Disability Management Specialist (CDMS), and any required Actuarial Exams.



- c. Provide a complete description of the organizational structure of the company and the method by which work is accomplished. Include an organizational work flow chart with description of duties of the proposed account team members, as well as the size or total number of accounts or clients each individual handles.

Burnham Benefits has provided employee benefits consulting services since 1995. Our organizational structure is purposefully flat with President and CEO Kristen Allison as the majority partner. The team that will work with the District reports directly to Dan Exceen, Executive Vice President, Partner/Public Sector Practice Lead, and Steve Vilas, who is also a partner and the Chief Financial Officer.

#### **APPENDIX: Burnham Leadership Team 2020**

As a firm that is privately owned and operated, your team has direct access to the partners of the organization. In addition, all partners manage their own clients, have a pulse on what happens in the insurance industry, and know which resources are most important to employers.

The team of Tina Koenig and Sara Corp bring a wealth of experience and knowledge to the District. As noted in Tina's biography, she has been in the insurance industry since 1987. From the 13 years she worked on the carrier side as an underwriter to the years since that she has spent consulting with clients, her background has touched almost every client size, funding mechanism, type of employee population, and spans both the public and private sector.

The method by which work is performed is a team basis. The team of Tina Koenig, Sara Corp and Jessica Patterson is responsible for coordinating all aspects of the relationship with our clients. While each as assigned roles, they are all interchangeable and are available to assist the District with any needs that arise. Tina Koenig will primarily drive your renewal process including negotiations with carriers, communications and compliance. Sara Corp will drive the implementation of plans and the set up of systems with Jessica Patterson rounding out the team with administrative support to both Tina and Sara. The team handles 13 clients currently, of which seven are identified in a previous section as Public Sector.



Sylvan USD Dedicated Team Organizational Chart

**Dedicated Account Team**

---

**Execution Leadership**

Tina Koenig  
Vice President

**Executive Liaison**

Dan Exceen  
Executive Vice President and Partner

**Service Leadership**

Sara Corp  
Sr. Account Executive

**Service Support**

Jessica Patterson  
Account Representative

**In-House Resource Team Leads**

---

**Risk Management**

Luis Milla  
Chief Strategy Officer

**Compliance**

Richard Asensio, JD  
Vice President and  
Director of Compliance

**Communications**

Caitlin Far  
Regional Director of Client  
Communications

**Benefits Technology**

Meagan Jackson  
Benefits Technology  
Consultant

**Wellness**

Julie Johnson  
Wellness Consultant

**Voluntary Benefits**

Kym Pardini  
Voluntary Benefits Specialist



d. Describe the staff retention program to assure continuity of service to the District.

Burnham believes open, regular, and honest communication is crucial to ensuring a successful partnership. Our goal is to limit personnel changes on the District's Burnham team to the greatest extent possible.

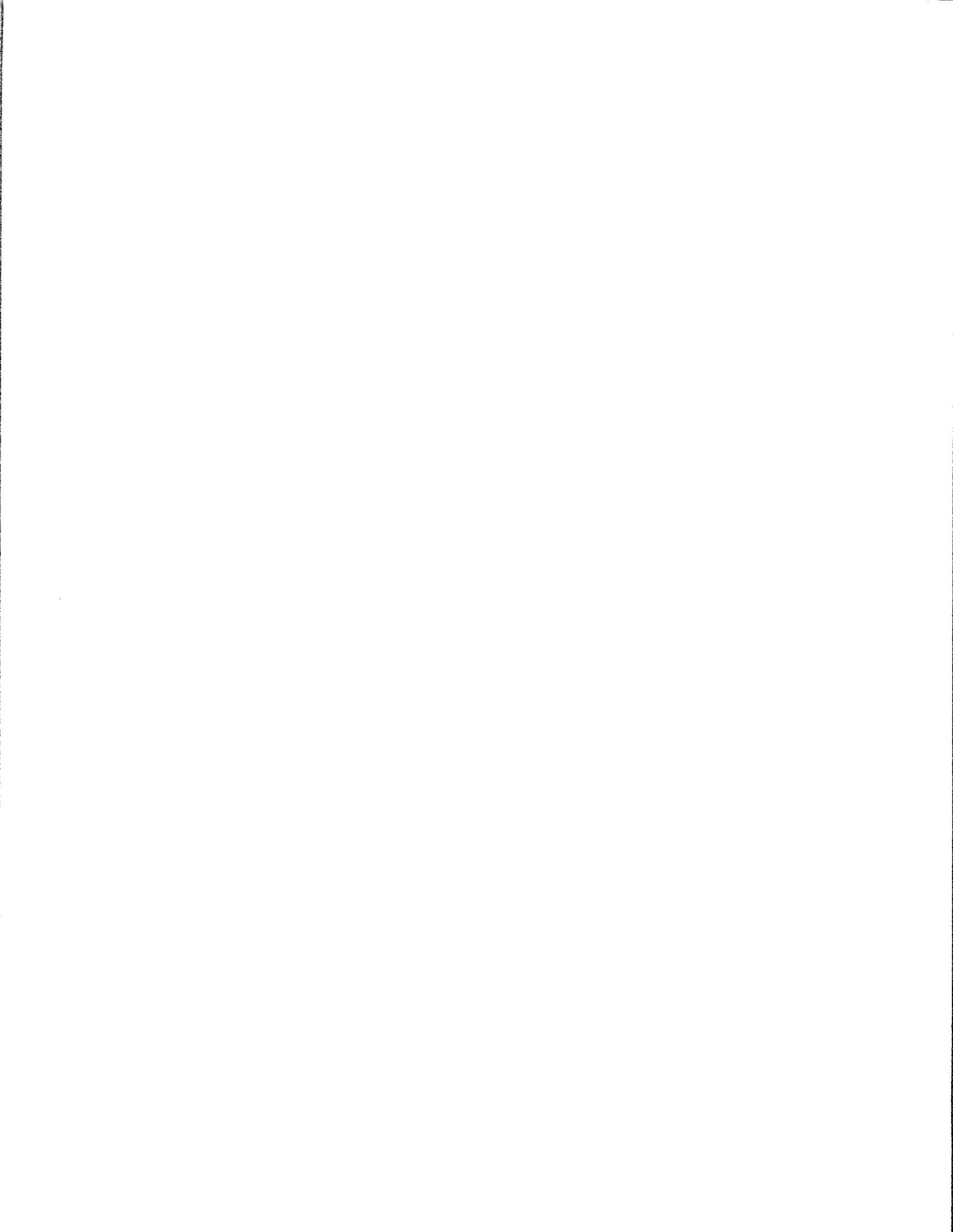
Once we identify the team and establish relationships, we do not change account teams unless it is at the request of the client or in the event a member of the team leaves Burnham Benefits.

In the event of necessary personnel changes, we will involve the District immediately. We will be upfront regarding potential changes and ensure the District plays an active role in determining any newly proposed team members.

Due to Burnham's unique and collaborative culture, we maintain a low employee turnover and an excellent reputation for being one of the top career firms in the insurance industry.

For the Roseville office, Tina Koenig was the founding consultant six years ago and Sara Corp has worked with Tina's team for the last five years. As such, Tina's clients have only experienced an account management change once in those six years, and it was due to staff turnover as the result of an employee relocating to the Bay Area.

Since turnover within Burnham is rare, averaging less than 5%, the response and collaboration around client experience are paramount. Leadership is quick to apply resources to ensure no loss in service.





## 5. Services

Describe the following:

- a. A complete description of services to be provided. Include both services outlined in this written request, as well as additional recommended services, including a description of any and all unique brokerage or consulting services the firm will offer DISTRICT. Please specify if these services are to be provided by the firm's staff or through an affiliate of the firm.

### ANALYSIS, RECOMMENDATION, MARKETING, NEGOTIATION AND PLACEMENT OF INSURANCE

Burnham takes a comprehensive approach when working on the District's renewals, including any RFP projects. In essence, we start with a conversation around the overall strategy desired for the upcoming plan year and future years. We make it a priority to have a firm grasp on the direction of the District's vision, objectives, values, and desires, as well as the ability to evolve employee benefits offerings within the changing environment. These conversations, along with Burnham's understanding of legislative requirements and industry trends, contribute to a well-planned renewal, marketing, and long-term strategy.

### Provider Negotiation

Your Burnham team will handle your annual negotiations and RFP in the following manner:

- Review district-specific claims experience monthly for trends through our Financial Dashboard
- Proactively request renewals six months in advance
- Review the provided renewal calculations and check for accuracy and compliance
- Run district experience through our own renewal model for comparison
- Enter into a dialogue with the carriers to find the most appropriate renewal to meet the district's needs, budget and timeline
- Incorporate performance standards, guarantees, and quality assurance standards into the negotiation process
- Explore options to reduce cost through consolidating ancillary lines, usage of alternative networks and funding
- Conduct a compliance review by Burnham's Director of Compliance of all plans for any new laws and coverage requirements
- Review plan design for most meaningful changes based upon our thorough knowledge of the district's culture and benefit philosophy
- Conduct a competitive marketing review of viable carriers and various pooled purchasing arrangements, including preparation of bid specifications to align with the district's goals and strategy. During this process, we will:
  - Conduct preliminary review of proposals
  - Conduct reference checks



- Evaluate proposals
- Develop report & recommendations regarding finalists
- Conduct on-site review of finalists
- Evaluate results of on-site visits
- Review contracts of finalists
- Negotiate contractual provisions

### **Implementation**

Should the provider negotiations necessitate a change in vendor or change within a current vendor to effectively execute cost containment strategies, our team will drive the implementation process including:

- Contract review
- System set up
- Enrollment and communication support
- Coordination with eligibility system and file feeds
- Summary Plan Description assistance

As part of our implementation and ongoing support, we will review policies and endorsements for accuracy and conformance with negotiated coverages. We will work with the vendors to ensure the timely issuance of policies and endorsements to the District.

### **Reporting**

Burnham's objective is simple: deliver an easy-to-read, consolidated report that indicates how the plan is performing and if the plan performance is at, above, or below our projections. The report conveniently provides a historical perspective from prior plan years, benchmarked to the current year to date.

CUSTOMER SUPPORT, COMPLIANCE, COMMUNICATIONS AND ADMINISTRATIVE SUPPORT

**Day to Day Consultation and Customer Service**

Burnham takes a client-centric approach to supporting our clients and their programs year after year. Our focus is customer satisfaction through a dedicated account team and behind-the-scenes support from our subject matter experts, as needed.

Account Support

---

Day-to-Day Support

Customer service is the cornerstone of the Burnham Benefits philosophy. Dedicated Burnham teams act as an extension of clients' HR teams. While there are a host of behind-the-scenes Burnham team members acting on our clients' behalf, a single primary contact handles the day-to-day questions that arise, including:

- Communications
- Document review
- Claim inquiry
- ACA questions
- Policy and plan design interpretation
- Vendor management

Burnham's goal is to provide exceptional customer service. Phone calls and e-mails are returned promptly with clear and concise responses.

Administrative Services and Benefits Technology

Burnham leverages technology to alleviate the day-to-day administrative burden associated with onboarding and overall eligibility. Burnham provides Ease, a benefits administration platform, at no additional cost to clients. Ease offers ongoing reporting, annual notices, enrollment, education, and HRIS capabilities. Ease is available in Spanish and is one of the only methods to enroll CalPERS plans in an on-line platform for employees.

Ongoing Employee Support

Employees have direct access to a Burnham professional that understands their culture and benefits package. Employees can also communicate via email with the Burnham Advocate.

---



Compliance

Burnham offers a comprehensive menu of federal and state law compliance support. Vice President and Director of Compliance Richard Asensio, JD, MBA leads Burnham’s Compliance Resource Team. Richard has more than 25 years of experience consulting with employers on both qualified and non-qualified plan compliance issues, and he has extensive knowledge of state and federal requirements that impact employee benefit plans.

Your core team can work internally with Richard to address your compliance questions, or you can contact Richard directly, whichever you prefer.

Burnham Analytics

Burnham’s in-house actuary and the Burnham Analytics team specialize in financial review, regular claims experience monitoring and review, and plan utilization reporting and analysis. Claims dashboards are built to suit the specific needs and plans in place with each client. Updated regularly and reviewed with clients quarterly, we help ensure you are prepared for your renewal increase.

Communications

Burnham’s in-house marketing and communications team provides traditional forms of employee communications, for open enrollment and on an ongoing basis, and collaborates with our clients to create unique pieces, such as recruitment guides.

If there is a service issue that requires carrier involvement (for instance, prior authorization issues), Burnham will include company or carrier representation and monitor the situation to a desired result. It is our goal to not send an employee to another department (even at the carrier level) without our representation—we will be there every step of the way.

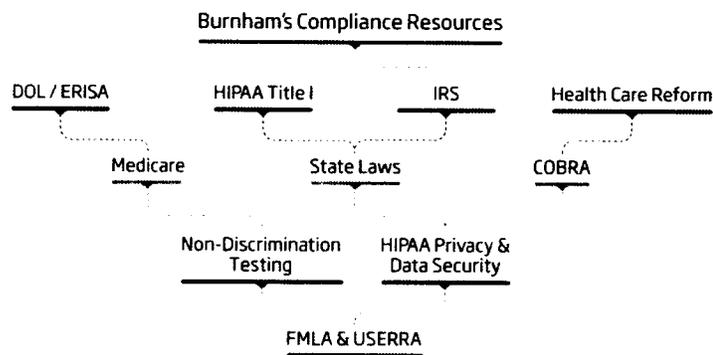
### Employer Education and Marketplace Trends

Burnham Benefits provides over 300 on-demand courses for both management and employees through our partnership with ThinkHR and HR360. Popular subject categories include Employment, Workplace Safety, Environmental Compliance, Unlawful Harassment Prevention, Customer Service, and Wellness.

We also provide monthly webinars, regular legislative updates, and onsite education for your staff and leadership. We will provide executive education sessions, management meetings, and town hall meetings for various updates on health care trends, reforms, and updates. We also find that targeting certain topics for either your benefit committee or union representatives can improve relations between management and the various stakeholders. This approach allows for a cohesive message and a better understanding of why specific recommendations are made during the renewal process.

During our review of trends, we will identify and recommend contemporary products, goods and/or services to ensure a fiscally balanced and culturally fit comprehensive and complementary plan design.

### Legal Compliance



Burnham offers a comprehensive menu of federal and state law compliance support. Vice President and Director of Compliance Richard Asensio, JD, MBA leads Burnham's Compliance Resource Team. Richard has more than 25 years of experience consulting with employers on both qualified and non-qualified plan compliance issues, and he has extensive knowledge of state and federal requirements that impact employee benefit plans.

His areas of special expertise include IRS, ERISA, COBRA and HIPAA compliance, ACA implementation, and nondiscrimination testing. Also, he is highly proficient in performing plan document and operational compliance reviews of retirement and health and welfare plans.



Burnham's clients have direct access to Richard and his services. These services include, but are not limited to, the following:

- Compliance Audit – Burnham developed a proprietary tool, known as the Compliance Toolkit, containing a 50+ page comprehensive review of all current policies and procedures to ensure that NCPA's benefit plans and materials meet the latest regulatory requirements
- Cafeteria plan preparation and compliance
- ACA compliance, including the employer shared responsibility and employer reporting consulting
- ACA, COBRA, HIPAA, and other federal law and state legislative compliance
- Contract review and required notice disclosures
- Annual compliance calendar
- Non-discrimination testing and other compliance requirements related to welfare and health plans under the Internal Revenue Code
- Wrap plan document and summary plan description (SPD) preparation, review and updates
- CMS Medicare Part D disclosure reminder and instructions
- HIPAA privacy and data security compliance

Burnham works proactively to keep clients' benefits program and administration compliant with federal and state regulations. We make every effort to shield every client from serious legal and financial risk through specialized resources and tools used by our compliance team.

Burnham's team subscribes to:

- Lexis Nexis on-line research library
- Thompson Reuters' Checkpoint (resource for federal related laws and regulations)
- Zywave (supplements internal legal resources)
- ThinkHR and HR360

### HR360 and ThinkHR

Comprehensive HR consulting resources, hotline and unlimited online training with access to HR advisors, documents, tools, templates and checklists, HR training, research on complex issues, compliance alerts, webinars and whitepapers (including mandatory sexual harassment training)



#### HR Hotline & Advisors

- Live calls with advisors
- Senior level experienced HR professionals with PHR® and SPHR® designations



#### HR Online Library

- Interactive guidance & resources
- Downloadable content
- Employment law per state
- Community forum
- Leave of absence management



#### Training for HR, Staff & Employees

- Professionally produced videos
- Sexual harassment training
- Safety & OSHA
- Environmental compliance
- Wellness

Burnham provides a variety of resources targeted toward keeping clients informed of legislative changes. These include:

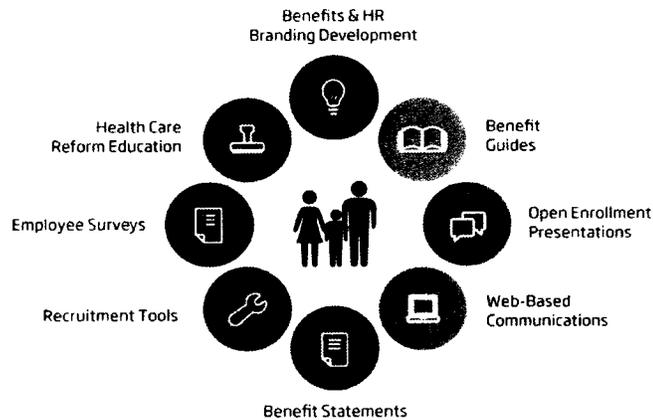
- Webinars and webcasts
- Ongoing bulletins and updates
- Educational seminars
- Online library of benefits and HR forms, documents, tools, and templates
- 200+ on-demand HR web courses for managers and employees and online

If a new federal, state or local ruling or regulation has the potential to impact Burnham's clients, we issue either ACA Pathways or Legislative Updates. Burnham follows-up with clients directly with ready templates they can use if needed. We also conduct monthly webinars for our clients. Most of Burnham's webinars focus on compliance-related issues.



**Benefits Communication**

Burnham recognizes that benefits must be understood and appreciated by employees before they can produce any return on investment. We also know that the process of educating and enrolling employees must be efficient. Burnham helps DISTRICT get the most out of your benefits through the following resources:



Burnham will review your current communication strategy and make suggestions for improvement as it relates to the content, design, and distribution channel. As part of Burnham’s standard services, we can provide a full array of employee communications, including those listed below:

Animated educational videos through our Burnham Learning Portal

Proprietary, branded, fun and interactive videos for educational topics such as:

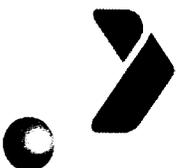
- **Benefits Terms:** overviews meaning of benefits terms like copay, deductible, and out of pocket maximums
- **FSA:** walks employees through how both kinds of FSAs work and how they provide tax savings
- **HDHP + HSA:** explains the complicated concept of HSAs, how they work with a high deductible plan, and how it can benefit employees

Benefit guides

Includes benefits plan details, contributions, and contact information for employees

Open enrollment presentation

Custom PowerPoint presentation that includes key information to employees regarding plan changes, contributions, deadlines, etc. for open enrollment



Burnham Benefits Response to Sylvan Union School District RFP NO. 2020/2021-03  
Employee Benefits Insurance Broker/JPA and Consulting Services

---

Open enrollment action guides	Provides key information to employees regarding plan changes, contributions, deadlines, etc. for open enrollment
Web-based technology	Brainshark recorded presentations
Benefit reference cards	Branded, laminated wallet cards with plan contact information
Employee surveys	Web-based tool for employers to measure employee attitude and benefits satisfaction via custom, quantitative surveys
Recruitment communications	Highlights client's benefits program, communicating a branded message about the value and benefits of working for a particular employer

---



#### SUPPORT OPEN ENROLLMENT ACTIVITIES

Depending on the client's needs and preferences, we create custom open enrollment materials in various media that include, but are not limited to:

- Benefit summaries
- Open enrollment action guides
- Wallet cards
- Posters
- Postcards
- Branded email messaging
- Q & As

In addition, we prepare open enrollment presentations that can be presented live or recorded for distribution to multiple locations or accessed from desktops and mobile devices. Burnham excels in employee meetings during open enrollment and throughout the year. We will:

- **Work with the District's Employee Benefits Team** to develop the strategy and expectations for employee meetings
- **Coordinate** carrier attendance and delivery of carrier supplies
- **Create open enrollment announcements** to highlight the benefit changes and instructions for open enrollment
- **Create custom Benefit Summaries** that summarize the company's benefit plans, contributions, and carrier contacts
- **Update online enrollment system** if being used
- **Post carrier benefit summaries and required annual notices** on the District's on-line enrollment site
- **Host employee benefit meetings** with a presentation encompassing all benefits
- **Conduct face-to-face Open Enrollment meetings** at all your locations nationwide with more than 100 employees
- **Provide various health and wellness pieces** to educate employees
- **Provide handouts** pertaining to the topic of the meeting
- **Provide our 1-800 number employee call-in line** for claim assistance
- **Create dedicated benefits-inquiry email address** (DISTRICTbenefits@burnhambenefits.com) that goes directly to your Burnham team for quick resolution
- **Work with your Benefits Team and the carriers on the timely submission all open enrollment paperwork** (renewal confirmations, enrollment forms, Master Applications for new carriers)
- **Update COBRA rates with your COBRA TPA**
- **Send COBRA enrollment packets for new coverage**

Provided in the appendix is an example of how we track roles and responsibilities between your dedicated Burnham service team and DISTRICT.

**APPENDIX: Renewal and OE Timeline SAMPLE**

UNIQUE CONSULTING SERVICES

**BenefitHub**

**Online Discounts & Rewards**

With Burnham BenefitHub you can offer your employees a free and easy online platform to save on a wide range of discounts and perks. There are thousands of deals from well-known brands and the ability to add a full range of voluntary benefits; this is a great way to increase engagement with your employees. You can also access hundreds of employee tools, fully customize your website, and then easily share it with your employees. Burnham BenefitHub is flexible and compatible with your present and future needs.

**Ease Employee Self-Serve**

**Online Benefits Administration**

Burnham employs a technology expert that works with our clients to evaluate system needs and determine the most appropriate technology solution partner. She also identifies areas where potential subsidies of the systems can be obtained through certain carriers. If the District had a desire to evaluate 3rd party, independent solutions, Burnham is in a position to provide a non-biased evaluation and recommendation.

Burnham Benefits also provides a no-cost solution for our clients through our partnership with EASE. To our knowledge, EASE is the only system that has the ability to comply with both CalPERS and CVT enrollment requirements. We also currently have Galt JUESD utilizing EASE with both Kaiser and Sutter Health Plus enrollment feeds. The EASE general information website is <https://www.ease.com/benefits-administration>. Included below are a few screenshots from the system both from the employer and employee perspective:

**Employee Management Dashboard**

Name	Status	Hire Date	Hire Type
Brooks, Grant	Not Started	1/1/2017	Cash Back - Hire Price Full Time
Claw, Patsy	Not Started	1/1/2017	Cash Back - Hire Price Full Time
Ford, Scott	Not Started	1/1/2017	Cash Back - Hire Price Full Time



Employee Management Tools

The screenshot shows the 'ease' HR system interface for employee Garth Brooks. The navigation bar includes Home, Tasks, Companies, Reports, Libraries, and Marketing. The employee's profile is displayed with tabs for Profile, Employment, Benefits, Documents, ACA, and History. The 'Employment Details' section shows the following information:

Type	Location	Manager
Full-Time	Cash Back - Hired Prior 1/1/2017	...
Status	Department	HR Manager
Active	Appointed Department Heads	...
Hire Date	Sick Hours	0
07/05/2013	Personal Hours	0
EID	Scheduled Hours Per Week	Overtime Status
X94NUF		

Benefit Selection with Plan Comparison and running total of cumulative cost of programs elect.

The screenshot shows the 'Benefit Enrollments' page for a Medical Plan. It includes a 'Specify your coverage' section with a table for selecting enrollment for three employees:

Employee Name	Please Select	✓	✗
Garth Brooks	Please Select	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Test Brooks	Please Select	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Babbling Brooks	Please Select	<input checked="" type="checkbox"/>	<input type="checkbox"/>

The 'Benefits Summary' section shows the following information:

Employee Cost Per Pay Period (Monthly)	
Medical	
<b>Total</b>	<b>\$0.00</b>
Per Pay Period (Monthly)	

### **Wellness**

Burnham's highly developed wellness plans are geared toward helping employees make healthy lifestyle changes.

Using our defined planning process, Burnham will develop a program that speaks to the District's unique needs. As part of our strategic approach to wellness, we will:

- Assess individual and company risks, then build strategies to mitigate those risks
- Engage employees to ensure a successful launch and sustained momentum
- Develop a culture of health awareness and accountability
- Measure and evaluate outcomes to improve the plan yearly

This approach leads to healthier employees, and ultimately a healthier and more productive organization.

The design of your wellness program should target the needs of your employees and meet the vision of your agency. Every wellness program is different, and we work independently with each client to develop a strategy that works for them. At Burnham we have experience assisting our clients in a variety of different ways:

- Wellness Vendor RFP and evaluations
- Implementation of third-party vendors
- Employee surveys (interest, culture, activity evaluations, etc.)
- Targeted communications to both leadership and employees
- Worksite evaluation
- Wellness seminars/webinars
- Health and fitness activities
- Coordination of screening events and health fairs
- Participation incentives including premium differential analysis and points program development
- Three- to five-year wellness plan development
- Return on investment analysis
- Outcome-based wellness planning

- b. A description of the group medical, dental, vision, life, accidental death and dismemberment premium volume handled by the firm and by the specific office to which DISTRICT's account would be assigned.

Burnham Benefits represents over 650 clients with an excess of \$1.9 billion in premium volume. Burnham's Sacramento team has clients with an excess of \$50 million in premium volume.



- c. A list of the principal insurance markets utilized by the firm in the order of premium volume placed with each market. This listing should be categorized by line of coverage: medical, dental, vision and life.

As a privately held firm, we do not disclose our premium volumes by line of coverage by carrier. There are several reasons this information is not disclosed.

First and foremost is keeping our client's best interest and avoiding any perceived conflict of interest in regard to overrides. By not disseminating premium by carrier to our staff, we avoid the risk of business being placed with a particular carrier in order to increase a potential override.

Second, many of Burnham's Public Sector clients are part of larger pools or purchasing arrangements where individual reporting is not available or are self-funded where premiums are not applicable. We do, however, have stronger relationships with certain carriers based on executive leadership and volume business. The top carriers by category are:

- **Medical** – Anthem, Kaiser and Aetna
- **Dental** – Aetna, Guardian, MetLife and Delta
- **Vision** – VSP, EyeMed
- **Life & Disability** – Unum, MetLife, Cigna

- d. A description of technical or professional support available at no extra cost through the firm, such as legal counsel, communications, technology support or others.

As described in other sections, Burnham offers legal counsel, communications, and technology support as part of our core services.

Burnham utilizes and provides, at no additional cost, ThinkHR and HR360 subscriptions to all clients. These valuable resource supports clients with a number of HR issues including:

- 300+ on demand HR web courses for managers and employees.
- Mandatory sexual harassment training, leave management, etc.
- Community Forums
- Documents, tools, templates, and checklists
- Direct access to HR consultants via phone or email

#### HR360 and ThinkHR

Comprehensive HR consulting resources, hotline and unlimited online training with access to HR advisors, documents, tools, templates and checklists, HR training, research on complex issues, compliance alerts, webinars and whitepapers (including mandatory sexual harassment training)



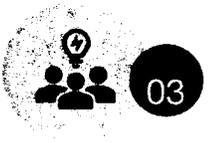
#### HR Hotline & Advisors

- Live calls with advisors
- Senior level experienced HR professionals with PHR® and SPHR® designations



#### HR Online Library

- Interactive guidance & resources
- Downloadable content
- Employment law per state
- Community forum
- Leave of absence management



#### Training for HR, Staff & Employees

- Professionally produced videos
- Sexual harassment training
- Safety & OSHA
- Environmental compliance
- Wellness



Richard F. Asensio,  
JD, MBA

VP/Director of  
Compliance  
Los Angeles, CA

In Industry | **May 1999**  
At Burnham | **Feb. 2013**

#### Compliance Consultant

- Primary responsibilities include delivering health and welfare benefit consulting services to Burnham's clients
- Consults with clients regarding various health and welfare compliance issues regarding eligibility and plan administration, including implementing the provisions of health care reform (ACA) and nondiscrimination testing
- Monitors and analyzes new / ongoing federal and state legislation
- Reviews employee benefit communication and enrollment materials, benefits descriptions and SPDs
- Drafts various health and welfare plan documents
- Coordinates benefit-related filings with government agencies
- Performs in-depth legal research and analyses of complex federal tax and ERISA matters
- Helps clients choose appropriate strategic options and safely navigates increasingly complicated compliance requirements
- Responsible for the content and delivery of Burnham's legislative and compliance webinars
- More than 19 years of experience consulting on both qualified and non-qualified plan compliance issues, as well as extensive knowledge of state and federal requirements that impact employee benefit plans
- Previously worked for Aon Hewitt Consulting, Arthur Anderson and Fidelity Federal Bank
- Areas of special expertise include IRS, ERISA, COBRA and HIPAA compliance, healthcare reform (ACA) implementation, and document and operational compliance reviews of retirement and health and welfare plans
- Juris Doctorate from the University of San Diego
- MBA from Babson College in Wellesley, MA
- Member of the State of California Bar



Caitlin Fai  
Regional Director of  
Communications  
Larkspur, CA

In Industry | **Sept. 1993**  
At Burnham | **April 2013**

#### Communications Consultant

- › Guides the development and implementation of branded employee communications
- › 25+ years in the employee benefits industry
  - › Possesses rare understanding of how clients must position their benefit communications to employees to maximize employer ROI on benefits investment
- › Strategic thinking and ability to galvanize a team is integral in bringing highly effective deliverables
- › Guides the development and implementation of branded employee communications and B2B marketing and directs marketing collateral development and sales proposals
- › Works closely with her team to develop innovative new tools and approaches to support Burnham client
- › Previously rose through the ranks at Gallagher Benefit Services in Larkspur, CA, where she worked as a senior communications consultant



Meagan Jackson  
Benefits Technology  
Consultant  
Irvine, CA

In Industry | **April 2015**  
At Burnham | **Aug. 2016**

#### Technology Consultant

- › Works with clients to evaluate technology solution needs
  - › Finding a solution for a new issue, or
  - › Replacing a solution that no longer meets client's needs
- › Helps clients troubleshoot and resolve ongoing issues
- › Assists with carrier integration implementations
- › Stays up to date on current trends and changes in the marketplace
- › Evaluates new products and solutions that emerge



Kym Pardini  
Account Manager,  
Voluntary Benefits  
Larkspur, CA

In Industry | **Aug. 1995**  
At Burnham | **April 2018**

#### Voluntary Benefits Consultant

- Works with Burnham's account teams to consult and manage Voluntary Benefits services, including:
  - New business placement, implementation, and renewals
  - Open enrollment presentations/communications
  - Resolving claims and enrollment issues
- Works with selected carrier partners to identify, design and negotiate plans to ensure Burnham's clients are getting the best voluntary products at the best rates
- 20+ years of insurance contracting, billing and claims handling
- Highly organized, concise way of thinking and communicating, and takes an innovative approach to work
  - Strong resource for streamlining, improving productivity, and identifying and correcting workflow roadblocks
- Previously worked at Woodruff Sawyer where she started her focus on voluntary benefits
- Prior to Woodruff she was a medical practice administrator handling everything top to bottom for a specialty surgical practice
- Also worked for in sales and marketing for Brown-Forman
- Resides in Novato, California with her husband, Jonathan, daughter, Noelani, and dog, Ilio, and enjoys live music and trips to Hawaii



Julie Johnson  
Wellness Consultant  
Irvine, CA

In Industry | **Sept. 2000**  
At Burnham | **July 2017**

#### Wellness Consultant

- 15+ years of industry experience with a combination of:
  - Benefits administration
  - Health and wellness consulting
  - Managing wellness programs for a large, national, multi-state organization
- Well equipped to address challenges employers face with workplace wellness programs including:
  - Multiple locations
  - Technology challenges
  - A diverse workforce—generational, knowledge of technology, education and salary levels
- Strategically aligns wellness programs with vendor selection/management, creative incentive designs and communications to:
  - 1)** increase engagement to maintain a healthy and productive workforce, and
  - 2)** create a desirable program for recruitment/retention.
- Bachelor of Arts in Economics from the University of California, Irvine



Luis Milla  
Chief Strategy Officer  
Irvine, CA

In Industry | **July 1995**  
At Burnham | **Jan. 2018**

#### Financial Consultant

- Thought leader and strategist for Burnham's growing national accounts
- Has the perspective of both the carrier and employer side as a former underwriter at CIGNA

The value of having the inside perspective provides the team tools to negotiate and design valuable programs at optimal costs

- Provides a measured approach to consider financials, compliance and benchmarking for best-in-class solutions
- Healthcare Reform Team Lead
- Secures emerging analytic tools
- Facilitates innovation and contributes to the high-quality benefits consulting clients expect
- Strategizes with Burnham clients in a consultative and imaginative manner

Ensures employers have access to resources and information they need to feel comfortable with the direction of their benefits package

- Involved in:
  - Health care reform modeling, benefit planning for renewals, marketing and benchmarking analysis, carrier exhibit evaluation, and strategizing with clients on their long-term benefit goals and objectives
- Bachelor of Arts with honors in Economics with a minor in Applied Mathematics from the University of California, Irvine
- Bilingual in Spanish



- e. A sample work plan for insurance renewal and negotiations.

As described on page 32, Burnham conducts a thorough renewal analysis beginning six months prior to the plan anniversary.

#### ANALYSIS, RECOMMENDATION, MARKETING, NEGOTIATION AND PLACEMENT OF INSURANCE

Burnham takes a comprehensive approach when working on the District's renewals, including any RFP projects. In essence, we start with a conversation around the overall strategy desired for the upcoming plan year and future years. We make it a priority to have a firm grasp on the direction of the District's vision, objectives, values, and desires, as well as the ability to evolve employee benefits offerings within the changing environment. These conversations, along with Burnham's understanding of legislative requirements and industry trends, contribute to a well-planned renewal, marketing, and long-term strategy.

#### **Provider Negotiation**

Your Burnham team will handle your annual negotiations and RFP in the following manner:

- Review district-specific claims experience monthly for trends through our Financial Dashboard
- Proactively request renewals six months in advance
- Review the provided renewal calculations and check for accuracy and compliance
- Run district experience through our own renewal model for comparison
- Enter into a dialogue with the carriers to find the most appropriate renewal to meet the district's needs, budget and timeline
- Incorporate performance standards, guarantees, and quality assurance standards into the negotiation process
- Explore options to reduce cost through consolidating ancillary lines, usage of alternative networks and funding
- Conduct a compliance review by Burnham's Director of Compliance of all plans for any new laws and coverage requirements
- Review plan design for most meaningful changes based upon our thorough knowledge of the district's culture and benefit philosophy
- Conduct a competitive marketing review of viable carriers and various pooled purchasing arrangements, including preparation of bid specifications to align with the district's goals and strategy. During this process, we will:
  - Conduct preliminary review of proposals
  - Conduct reference checks
  - Evaluate proposals
  - Develop report & recommendations regarding finalists
  - Conduct on-site review of finalists



- Evaluate results of on-site visits
- Review contracts of finalists
- Negotiate contractual provisions

### **Implementation**

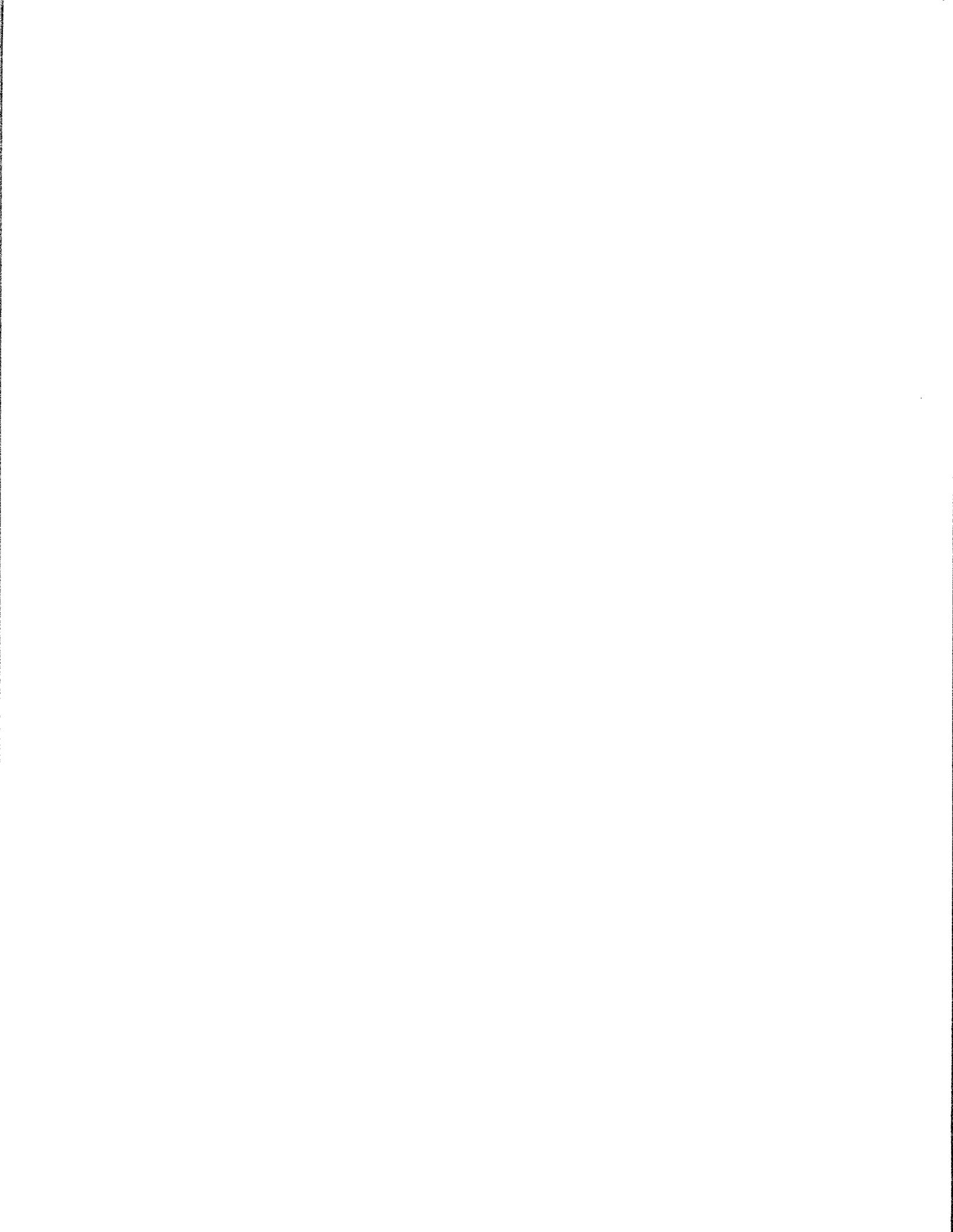
Should the provider negotiations necessitate a change in vendor or change within a current vendor to effectively execute cost containment strategies, our team will drive the implementation process including:

- Contract review
- System set up
- Enrollment and communication support
- Coordination with eligibility system and file feeds
- Summary Plan Description assistance

As part of our implementation and ongoing support, we will review policies and endorsements for accuracy and conformance with negotiated coverages. We will work with the vendors to ensure the timely issuance of policies and endorsements to the District.

### **Reporting**

Burnham's objective is simple: deliver an easy-to-read, consolidated report that indicates how the plan is performing and if the plan performance is at, above, or below our projections. The report conveniently provides a historical perspective from prior plan years, benchmarked to the current year to date.





## 6. Client Communication

Describe the following:

- a. Proposal to maintain open and prompt communication with employees, retirees and DISTRICT staff seeking assistance from the selected broker.

Burnham Benefits provides Call Center services to several of our large clients as part of our core services. The District would have the option to create a dedicated line in which our call center staff would answer "Sylvan USD Benefits Hotline." Our current capabilities include both telephonic and email inquiries and responses. Burnham Benefits is in the process of expanding our Call Center capacity over the next year in our Roseville office.

- b. Proposal to maintain open and prompt communication with all DISTRICT staff involved in benefit issues.

Burnham takes a client-centric approach to supporting our clients and their programs year after year. Our focus is customer satisfaction through a dedicated account team and behind-the-scenes support from our subject matter experts, as needed.

### Account Support

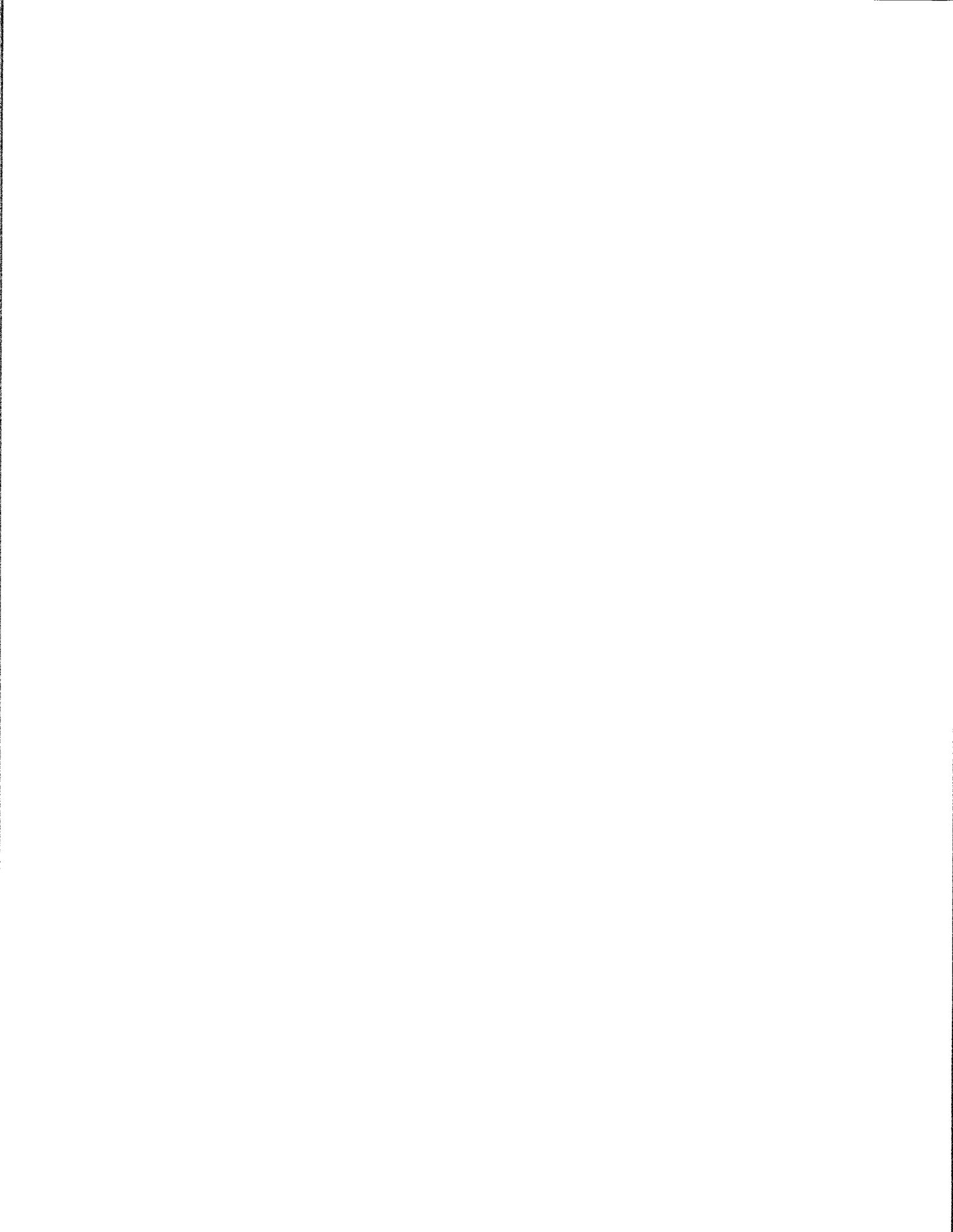
#### Day to Day Support

Customer service is the cornerstone of the Burnham Benefits philosophy. Dedicated Burnham teams act as an extension of clients' HR teams. While there are a host of behind-the-scenes Burnham team members acting on our clients' behalf, a single primary contact handles the day-to-day questions that arise, including:

- Communications
- Document review
- Claim inquiry
- ACA questions
- Policy and plan design interpretation
- Vendor management

Burnham's goal is to provide exceptional customer service. Phone calls and e-mails are returned promptly with clear and concise responses. In addition to regularly scheduled check-in meetings, the team deploys an annual client satisfaction survey to ensure Burnham is meeting and exceeding clients' expectations.







## 7. Cost/Pricing Information

This section shall include the bidder's price for performing the services discussed in the scope of work. Include a comprehensive specific description indicating how the firm would price DISTRICT's account and the estimated annual cost of the services. Indicate whether pricing is based on an annual fee, fee for service, commission or a combination of two or more. Include any and all commissions and fees that the firm would expect to receive from the existing programs for services requested herein, as well as additional services that are being recommended. Identify any split commission or joint marketing arrangements with other agents, brokers, firms or associations. With this description, please include an explanation as to how the firm would provide the DISTRICT with the best price at the time of negotiations.

The DISTRICT reserves the right to review and/or audit any records of the selected broker related to commissions, fees, etc. related to DISTRICT's account.

Proposals in which the costs do not reflect a reasonable relationship to the work to be conducted may be viewed as failing to comprehend the requirements of the scope of work and, therefore, cause the proposal to be rejected as being nonresponsive.

Additionally, prior to award of a contract, the successful bidder shall be required to submit two (2) years of the firm's most recently completed financial statements, including footnotes and auditor's opinion, or other financial instrument that would establish the firm's ability to complete the obligations of the contract resulting from this solicitation.

Burnham is very flexible in terms of how the firm is compensated for the work it performs for the District. Given the anticipated scope of work for the District, Burnham proposes an annual compensation of \$95,000.

The monthly/annual compensation can be paid either through the current commission/fee arrangement or any method the District prefers.

Engagement with the District is what is most important to Burnham. We are confident that the assembled team and client tools and resources will exceed the District's expectations. Burnham will continually "earn the right" to work with and represent the District. Our final determined compensation structure, although a critical component of this overall project, is not as important to us as the chance to work together and represent the District's best interest for years to come.



Service Description	Fee
Benefits Consulting, Development & Cost Management	
<ul style="list-style-type: none"> <li>➤ Strategic plan development &amp; management</li> <li>➤ Health and Welfare renewal evaluation and negotiations</li> <li>➤ Benefits marketing services</li> <li>➤ Carrier trend analysis</li> <li>➤ Cost analysis</li> <li>➤ Comprehensive plan design assessment and evaluation</li> <li>➤ Network comparisons and utilization</li> <li>➤ Benchmarking data research and reports</li> <li>➤ Provide renewal reporting</li> <li>➤ Targeted consumerism assessment (HSA, FSA, HRA, CDHP, etc.)</li> <li>➤ Continual account stewardship reporting</li> <li>➤ Attend all necessary meetings</li> </ul>	<p>Full-Services Consulting Contract: \$95,000 Annual Fee</p>
Risk Management Services, Underwriting and Analytics	
<ul style="list-style-type: none"> <li>➤ Actuarial services</li> <li>➤ In-house industry underwriters</li> <li>➤ Budgeting &amp; contribution modeling</li> <li>➤ Funding analysis</li> <li>➤ Claims analysis</li> <li>➤ Financial and trend reporting</li> <li>➤ Leverage analytical tools and technology to proactively manage healthcare costs and claim risk</li> <li>➤ Manage claim reporting to evaluate trends and patterns</li> </ul>	<p>Included in above fee</p>
Affordable Care Act Compliance	
<ul style="list-style-type: none"> <li>➤ ACA readiness analysis &amp; financial modeling, including: <ul style="list-style-type: none"> <li>ACA compliance &amp; applicability</li> <li>Actuarial value assessment</li> <li>Affordability Report</li> <li>Full-time Employee Analysis and Variable Hour Tracking Assessment</li> </ul> </li> </ul>	<p>Included in above fee</p>

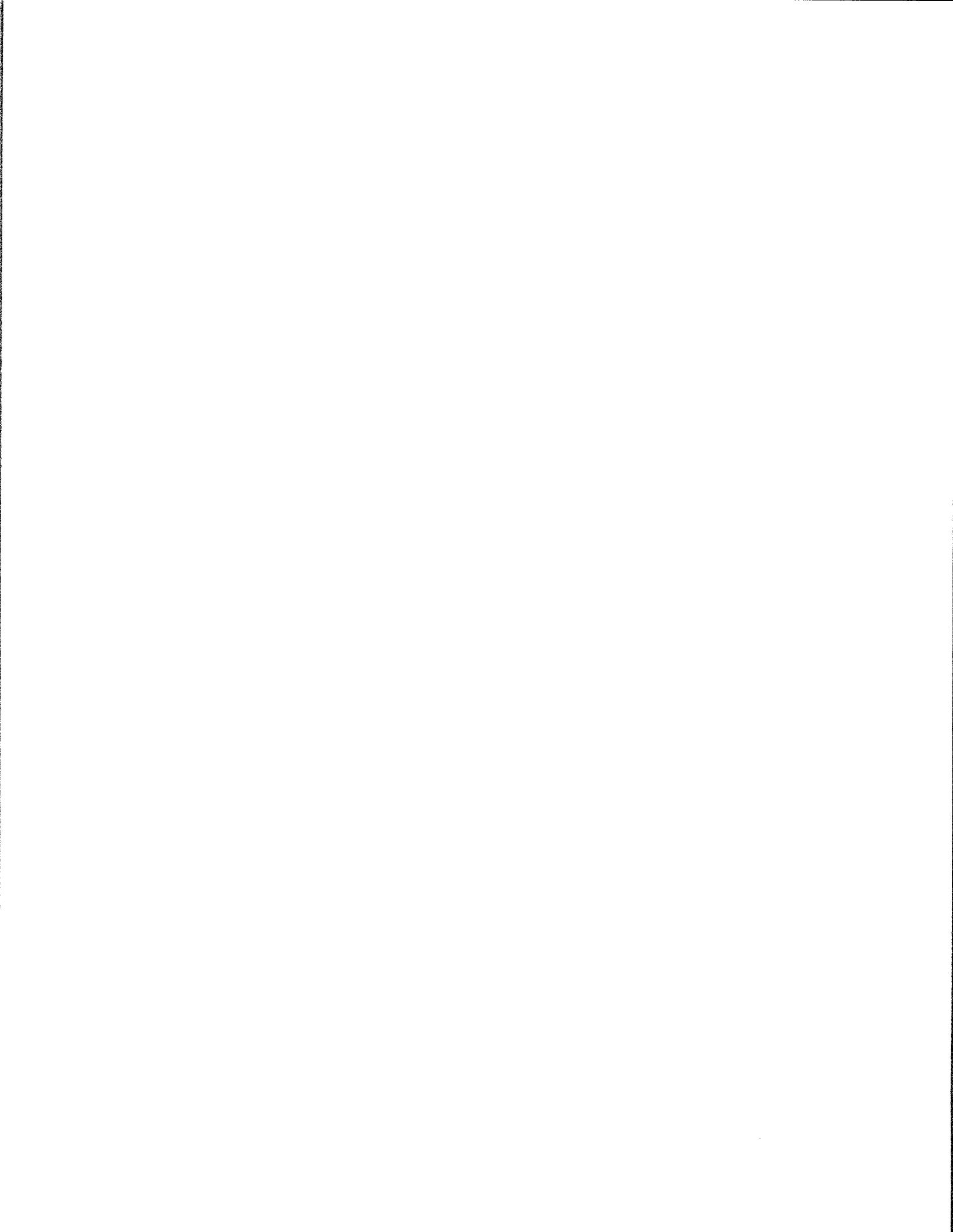
Burnham Benefits Response to Sylvan Union School District RFP NO. 2020/2021-03  
Employee Benefits Insurance Broker/JPA and Consulting Services

Service Description	Fee
<ul style="list-style-type: none"> <li>➤ ACA Reporting Assessment &amp; Preparation</li> <li>➤ ACA Compliance Audit</li> <li>➤ Summary of Compliance Recommendations</li> <li>➤ Webinars, Educational Meetings, and Presentations</li> </ul>	
Other Compliance Services (State and Federal)	
<ul style="list-style-type: none"> <li>➤ In-House Attorney, Compliance Department</li> <li>➤ ACA, COBRA, HIPAA, State &amp; Federal Legislative Updates</li> <li>➤ Contract review &amp; notice disclosures</li> </ul>	Included in above fee
Communications	
<ul style="list-style-type: none"> <li>➤ In-house marketing &amp; communications design team</li> <li>➤ Onboarding - EE &amp; open enrollment meetings - face-to-face / webinars</li> <li>➤ Custom benefit enrollment brochures</li> <li>➤ Employee surveys</li> <li>➤ Total compensation statements, Hidden Paychecks</li> <li>➤ Market ready collateral (ACA, wellness, financial tips, etc.)</li> <li>➤ Web-based enrollment materials</li> <li>➤ Educational benefits videos</li> <li>➤ Review and guidance on internal website</li> </ul>	Included in above fee
Innovation & Technology	
<ul style="list-style-type: none"> <li>➤ In-house or independent review of technology solutions</li> <li>➤ EDI &amp; systems management and integration</li> <li>➤ EASE Enrollment Platform</li> <li>➤ Online HR portal with market ready collateral</li> </ul>	Included in above fee
Wellness, Health & Well Being	
<ul style="list-style-type: none"> <li>➤ In-house wellness consultant</li> <li>➤ Wellness initiatives and ongoing support, active participation on committees or committee development</li> </ul>	Included in above fee



Service Description	Fee
<ul style="list-style-type: none"><li>➤ Wellness total health and productivity needs assessment, planning, and execution</li><li>➤ Strategic program management</li><li>➤ Implementation of vendors</li><li>➤ Health fairs and flu shots support</li><li>➤ Program planning, incentive development</li><li>➤ Wellness compliance review</li><li>➤ Coordination of screening and onsite events</li></ul>	
<p>Value Added Services Included</p> <ul style="list-style-type: none"><li>➤ Benefits hotline / call center</li><li>➤ Eligibility, claim, billing and access to care resolution</li><li>➤ COBRA administration</li><li>➤ HR consulting, hotline and unlimited online training</li></ul>	Included in above fee

*Note that above fees do not include third party actuarial services to the extent the District might utilize them. In addition, the above compensation does not contemplate any special projects that would be billed separately (e.g., printing of communication materials).*





## 8. Other

Proposals shall also include:

Descriptions of any affiliations or business relationships with any employee, officer, contractor or official of DISTRICT.

The selected brokers office hours (all locations) and availability of all staff members assigned to DISTRICT's account, including a list of dates the office is closed and/or staff is unavailable due to holidays, vacations and other reasons.

Burnham Benefits does not have any affiliation or business relationship with any employee, officer, contractor or official of the District.

Our footprint spans eight locations with 113 employees. All locations operate Monday through Friday between the hours of 8:30 AM and 5:00 PM.

### Companywide Office Closure Dates

<b>January 1</b>	New Year's Day
<b>February 17</b>	President's Day
<b>April 10</b>	Good Friday – ½ Day
<b>May 25</b>	Memorial Day
<b>July 3</b>	Day before Independence Day
<b>September 7</b>	Labor Day
<b>November 25</b>	Day before Thanksgiving ½ Day
<b>November 26</b>	Thanksgiving Day
<b>November 27</b>	Day After Thanksgiving
<b>December 24</b>	Christmas Eve
<b>December 25</b>	Christmas Day
<b>December 31</b>	New Year's Eve
<b>January 1, 2021</b>	New Year's Day



Details of any changes in ownership that have occurred in the last three (3) years. Details of any anticipated mergers, transfers of organization or ownership, management or departure of key staff members within the next twelve (12) months.

In the last three years, no changes in ownership have occurred at Burnham Benefits. Within the next twelve months, there are no anticipated mergers, transfers of organization or ownership, management, or departure of key staff members.

Identify and describe any parent or affiliated companies and/or joint ventures. Please discuss any potential conflict of interest with consulting/management that may occur as a result of your firm's relationship with such affiliates and/or joint ventures.

Burnham Benefits is not a division or subsidiary of a parent firm. The partners within Burnham do have business holdings that compliment Burnham Benefits' offerings—these entities share a common philosophy of providing high quality, client-centric solutions customized to the unique needs of each business. Each entity has its own executive management team, staff, and resources that are unique to its discipline.

Burnham Lines of Business

Burnham Risk and Insurance Solutions  
**Property and Casualty Consulting**



Tailored risk management and insurance programs to protect your business

 **Burnham | Risk**



Ongoing Propriety Stewardship Process



High net worth personal lines

Burnham Gibson  
**Wealth Management Consulting**



Plan, strategy & design

**BURNHAM GIBSON**  
Wealth Advisors



Fiduciary compliance and benchmarking



Investment due diligence

360Rx Solutions  
**Pharmacy Benefits Consulting**



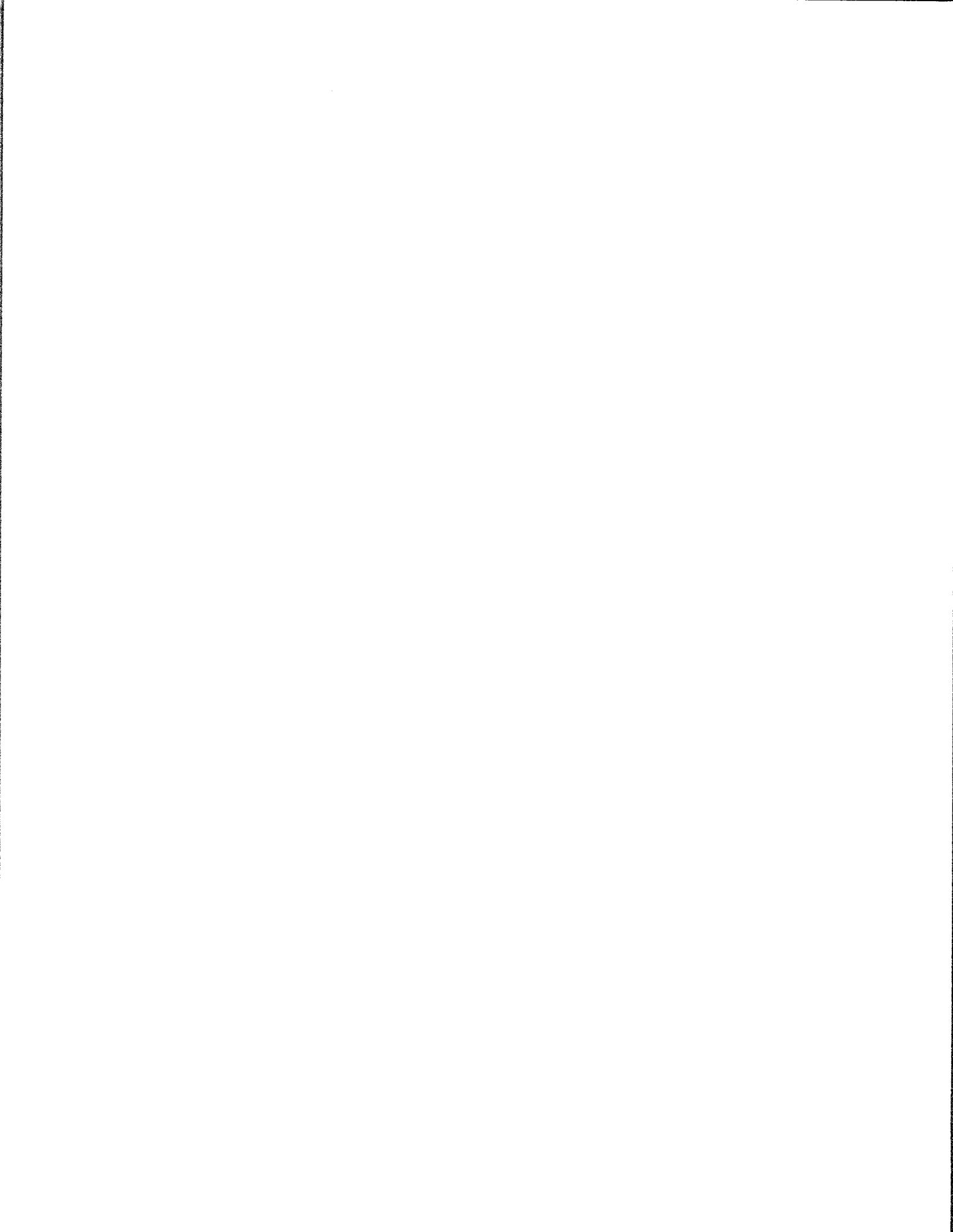
Leverage Rx costs and power through PBM plan pricing



Pharmacy rebates back to employers up to 25% of Rx spend



Analyze claims data and provide repricing





## Appendix

**APPENDIX:** Sample Transition Timeline

**APPENDIX:** Legislative Update

**APPENDIX:** Pooled Carrier Trends-2nd Quarter 2020-(Rec. Feb 2020)-NorCal

**APPENDIX:** Case Studies—Proactive Enhancements

**APPENDIX:** Case Studies—Negotiations

**APPENDIX:** Provider Performance Guarantee Sample

**APPENDIX:** Financial Stability Statement

**APPENDIX:** Burnham Leadership Team 2020

**APPENDIX:** Renewal and OE Timeline SAMPLE







# Sample Transition Timeline



## Transition Timeline: Big Picture

2020

October      November      December      January      February      March      April      May      June      July (Renewal)

*Initial onboarding categories starting April and May are marked with an asterisk and can be viewed in detail on the other side of this page*

Start Work Processes with Anthem for medical/vision, stop loss, HSA

Implement Burnham's Service Contract and Package\*

Self-funding Claims Analysis and Dashboard Development

Monthly Claims Dashboard

Pre-Renewal Meeting

Burnham Marketing Process Takes Place

Renewal Results meeting (varies, depending on plan)

Discuss recommendations

Final decisions made

Narrow down carrier, plan and design options

Signature-ready 500/SAR Prepared and Mailed to Client

Dependent Audit—determine vendor/process

Final negotiations

Budget/employee contribution modeling

Open Enrollment Planning Process

Open Enrollment Materials development

Enrollment meeting preparations

Open Enrollment Communications distributed

Annual Notices Communicated

Carrier Feeds and/or Census Enrollment Processes Managed with Online System and HR

Submit Enrollment files to Carriers

Open Enrollment

Weekly Service Call

### Ongoing Services

Strategic Planning Review and Implementation

Compliance Education and Guidance

Day-to-Day Administrative Support

Vendor Management

Burnham Webinars/Seminars/Education/Guidance

ACA Pathways Newsletter  
ACA Education & Guidance  
ACA Financial Modeling

Annual Operational Cycle Continues







# APPENDIX

## Legislative Updates

 Burnham News

### Stay In The Know: Legislative Update

December 9, 2019

#### PROPOSED TRANSPARENCY RULE IMPACTS SELF-FUNDED PLAN SPONSORS

In response to President Trump's Executive Order on Improving Price and Quality Transparency issued earlier this year, the Department of Health and Human Services, together with the Departments of Labor (DOL) and the Treasury (collectively, the Departments) recently released the "Transparency in Coverage" proposed rule, available [here](#), applicable to health insurers and non-grandfathered group health plans, together with a final rule that will require hospitals to disclose their standard charges, including negotiated rates with third-party payers. Together the rules are intended to bring greater transparency across the health care industry by requiring that pricing information be made publicly available.

The final rule is scheduled to go into effect January 2021. However, hospitals have wasted no time in pushing back on these new requirements, and to date there has been at least one court challenge initiated. The proposed rule is currently open for public comment, which may be submitted electronically or by mail to be received by January 14, 2020. Most of the provisions included in the proposed rule are proposed to apply for plan years (or, in the individual market, policy years) beginning on or after one year after the finalization of the rule.

This Legislative Update summarizes key features of the proposed rule.

#### PROPOSED TRANSPARENCY RULE

The proposed rule builds on actions required of hospitals by the final bill and would impose new transparency requirements on group health plans, including self-funded group health plans, and health insurers in the individual and group markets with respect to non-grandfathered coverage. Specifically, the proposed rule would require plans and issuers to disclose:

- Cost-sharing estimates to participants, beneficiaries and enrollees upon request; and
- In-network provider-negotiated rates and historical out-of-network allowed amounts on their website.

The rule includes two approaches intended to make health care price information more accessible to consumers and other stakeholders:

- First, each non-grandfathered group health plan or health insurance issuer offering non-grandfathered health insurance coverage in the individual and group markets would be required to disclose personalized out-of-pocket cost information for all covered health care items and

Burnham Benefits does not engage in the practice of law and this publication should not be construed as the providing of legal advice or a legal opinion of any kind. The consulting advice we provide is intended solely to assist in assessing its compliance with the Patient Protection and Affordable Care Act and other applicable federal and state law requirements, and is based on Burnham Benefit's interpretation of federal guidance in effect as of the date of this publication. To the best of our knowledge, the information provided herein, and assumptions relied on, are reasonable and accurate as of the date of this publication. Furthermore, to ensure compliance with IRS Circular 230, any tax advice contained in this publication is not intended to be used, and cannot be used, for purposes of (i) avoiding penalties imposed under the United States Internal Revenue Code or (ii) promoting, marketing or recommending to another person any tax-related matter.

 Burnham  
949.833.2983  
burnhambenefits.com

that would provide a benefit to consumers that is not currently captured in any existing MLR revenue or expense category. Note, while provisions included in the proposed rule are proposed to apply for plan years (or, in the individual market, policy years) beginning on or after one year after the finalization of the rule, the MLR provision would be applicable beginning with the 2020 MLR reporting year.

In addition, the proposed rule also solicits comments on whether group health plans and health insurance issuers should also be required to disclose cost-sharing information through other means, such as a standards-based application programming interface (API) and how health care quality information can be incorporated into the price transparency proposals included in the proposed rule.

#### ADDITIONAL INFORMATION

For additional information, please contact your Burnham Benefits Consultant or Burnham Benefits at 949-833-2983 or [inquiries@burnhambenefits.com](mailto:inquiries@burnhambenefits.com).

Burnham Benefits does not engage in the practice of law and this publication should not be construed as the providing of legal advice or a legal opinion of any kind. The consulting advice we provide is intended solely to assist in assessing its compliance with the Patient Protection and Affordable Care Act and other applicable federal and state law requirements, and is based on Burnham Benefit's interpretation of federal guidance in effect as of the date of this publication. To the best of our knowledge, the information provided herein, and assumptions relied on, are reasonable and accurate as of the date of this publication. Furthermore, to ensure compliance with IRS Circular 230, any tax advice contained in this publication is not intended to be used, and cannot be used, for purposes of (i) avoiding penalties imposed under the United States Internal Revenue Code or (ii) promoting, marketing or recommending to another person any tax-related matter.

 Burnham  
949.833.2983  
burnhambenefits.com

ate  
1, 2019

-service tool and in paper form available to participants, authorized representative) upon request. This includes liability for health care for different providers. health plan or health insurance issuer offering non-network in the individual and group markets would be required to disclose such as consumers, researchers, employers and negotiated rates with their network providers and to out-of-network providers through standardized, as.

has posted three Appendices. In furtherance of the first approach transparency in coverage model notice which can be used to provide an pricing liability for a covered item or service, upon request. With respect proposed "negotiated rate data elements" and "allowed amount data for required disclosure to the public via posting on the health plan or

share savings with consumers that result from consumers shopping for for those "shared savings" payments in their medical loss ratio (MLR) ers would not be required to pay MLR rebates based on a plan design



# APPENDIX

## ACA Pathways Updates

**BurnhamNews**

Stay In The Know:  
**ACA Pathways**

December 23, 2019



### FLURRY OF ACTIVITY ON THE ACA FRONT: CADILLAC TAX AND CERTAIN OTHER ACA TAXES REPEALED PCORI FEE EXTENDED THROUGH 2029 APPEALS COURT RULES ACA UNCONSTITUTIONAL

This past week was a very active week for the Affordable Care Act (ACA). On December 19, 2019, President Trump signed two short-term spending bills to prevent a government shutdown and continue funding through September 2020. One of the bills, [H.R. 1885](#), the "Further Consolidated Appropriations Act of 2020" includes provisions that repeal the following three largely unpopular taxes and fees under the ACA:

- The Cadillac tax on high-cost group health coverage, beginning in 2020;
- The medical devices excise tax, beginning in 2020; and
- The health insurance providers fee, beginning in 2021.

The bill also extends the PCORI fees to be effective for 2020-2029.

Separately, on the previous day, the Fifth Circuit United States Court of Appeals has upheld a district court's determination in *Texas v. United States* ([available here](#)) that the individual mandate is unconstitutional because it is no longer a tax with the zeroed-out penalty. However, it did not invalidate the rest of the law. As a result, its other provisions remain in effect as of this time. The ruling is expected to be challenged by California and other states, and likely end up with the Supreme Court.

#### CADILLAC TAX

The ACA imposes a 40 percent excise tax on high-cost group health coverage, also known as the "Cadillac tax." This provision taxes the amount, if any, by which the monthly cost of an employer's applicable employer-sponsored health coverage exceeds the annual limitation (called the employer's excess benefit). The tax amount for each employer's coverage will be calculated by the employer and paid by the coverage provider.

Although originally intended to take effect in 2013, the Cadillac tax was immediately delayed until 2018 following the ACA's enactment. A federal budget bill enacted for 2016 further delayed implementation of this tax until 2020, and a 2018 continuing spending resolution delayed implementation of the Cadillac tax for an additional two years, until 2022



since its enactment, and several bills have been introduced into

the Cadillac tax, beginning with the 2020 taxable year.

excise fee on the health insurance sector, allocated across the health insurance providers fee, which is treated as an excise tax, is required to be due Sept. 30, 2014.

health insurance providers fee for the 2017 calendar year. Thus, the health insurance providers fee. However, in many cases, the fee on the employers sponsoring the coverage. As a result, employers on their health insurance rates.

health insurance providers fee, beginning with the 2021 health insurance providers fee. However, in many cases, the fee on the employers sponsoring the coverage. As a result, employers on their health insurance rates.



plan years ending on or after October 1, 2012, and before

the PCORI fees for the 2020-2029 fiscal years. As a result, specified self-insured health plans continue to be responsible for paying these fees

for about any other health care reform-related provisions, please contact Burnham Benefits at 949-833-2983 or [info@burnhambenefits.com](mailto:info@burnhambenefits.com).

Burnham Benefits does not engage in the practice of law and this document should not be construed as the providing of legal advice or a legal opinion of any kind. The consulting advice we provide is intended solely to assist in assessing its compliance with the Patient Protection and Affordable Care Act and other applicable federal and state law requirements, and is based on Burnham Benefits' interpretation of federal guidance in effect as of the date of this presentation. To the best of our knowledge, the information provided herein, and assumptions relied on, are reasonable and accurate as of the date of this document. Furthermore, to ensure compliance with IRS Circular 230, any tax advice contained in this document is not intended to be used, and cannot be used, for purposes of (i) avoiding penalties imposed under the United States Internal Revenue Code or (ii) promoting, marketing or recommending to another person any tax-related matter.

**Burnham**  
949.833.2983  
[burnhambenefits.com](http://burnhambenefits.com)

#### MEDICAL DEVICES EXCISE TAX

The ACA also imposes a 2.3 percent excise tax on the sales price of certain medical devices, effective beginning in 2013. Generally, the manufacturer or importer of a taxable medical device is responsible for reporting and paying this tax to the IRS. The 2016 federal budget suspended collection of the medical devices tax for two years, in 2016 and 2017. As a result, this tax did not apply to sales made in those two years. A 2018 continuing resolution extended this moratorium for an additional two years, through the 2019 calendar year. The moratorium had been set to expire beginning in 2020.

The 2019 continuing spending resolution repeals the medical devices tax, beginning in 2020.

#### PCORI FEES

The ACA created the Patient-Centered Outcomes Research Institute (PCORI) to help patients, clinicians, payers and the public make informed health decisions by advancing comparative effectiveness research. The Institute's research is funded, in part, by fees paid by health insurance issuers and sponsors of self-insured health plans. Under the ACA, the

Burnham Benefits does not engage in the practice of law and this document should not be construed as the providing of legal advice or a legal opinion of any kind. The consulting advice we provide is intended solely to assist in assessing its compliance with the Patient Protection and Affordable Care Act and other applicable federal and state law requirements, and is based on Burnham Benefits' interpretation of federal guidance in effect as of the date of this presentation. To the best of our knowledge, the information provided herein, and assumptions relied on, are reasonable and accurate as of the date of this document. Furthermore, to ensure compliance with IRS Circular 230, any tax advice contained in this document is not intended to be used, and cannot be used, for purposes of (i) avoiding penalties imposed under the United States Internal Revenue Code or (ii) promoting, marketing or recommending to another person any tax-related matter.

**Burnham**  
949.833.2983  
[burnhambenefits.com](http://burnhambenefits.com)

Burnham Benefits does not engage in the practice of law and this document should not be construed as the providing of legal advice or a legal opinion of any kind. The consulting advice we provide is intended solely to assist in assessing its compliance with the Patient Protection and Affordable Care Act and other applicable federal and state law requirements, and is based on Burnham Benefits' interpretation of federal guidance in effect as of the date of this presentation. To the best of our knowledge, the information provided herein, and assumptions relied on, are reasonable and accurate as of the date of this document. Furthermore, to ensure compliance with IRS Circular 230, any tax advice contained in the document is not intended to be used, and cannot be used, for purposes of (i) avoiding penalties imposed under the United States Internal Revenue Code or (ii) promoting, marketing or recommending to another person any tax-related matter.

**Burnham**  
949.833.2983  
[burnhambenefits.com](http://burnhambenefits.com)







Northern California Region  
 Carrier Targeted Pooled Claim Trends  
 2nd Quarter - Spring 2020



Plan Type	Aetna	Blue Shield	Cigna	Health Net	Kaiser Permanente	United Healthcare	Anthem Blue Cross
	100 - 300	100 - 250	100 - 250	101 - 250	100 +	100 - 250	100 - 300
Employees							
HMO / EPO	8.27%	8.30%	5.68%	N/A	2.90%	5.00%	12.90%
PPO / Indemnity	9.86%	9.40%	5.94%	N/A	N/A	8.80%	14.90%
POS	9.86%	8.30%	N/A	N/A	N/A	8.80%	12.90%
CDHP (HRA & HSA)	9.86%	9.00%	5.94%	N/A	N/A	8.80%	14.90%
Pharmacy	10.75%	12.00%	6.80%	N/A	5.00%	11.50% (HMO) 13.00% (PPO)	Included in medical
Outliers	35-45%	39%	25-40%	N/A	-5% up to 15%	35-40%	40%

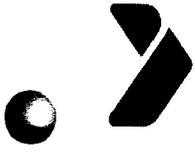
<sup>1</sup> Anthem provides book of business renewal increases, not trend

- Individual results will vary based on the group's changing rate factors and beginning rate level.
- Rate factors include: age/sex demographic factors, plan factors, industry load (SIC code), and location factors.
- Based on group size, carriers will also blend in additional risk factors, such as prescription utilization, to adjust rate actions up or down.









## Case Studies—Proactive Enhancements

### Client Profile

Industry: Medical

Lab Equipment

Employees: 155  
employees

Locations:

Headquartered in

Torrance, CA with

Sales Force

throughout US

Ownership:

Privately Held

Business Founded:  
1983

### **Burnham Pharmacy Budget Management (PBM) Arm Reduces Client's Pharmacy Benefits Costs by 31%**

#### Challenge

- A combination of industry competition and cultural factors made rich employee benefits essential to this self-funded client.
- Like all employers, the organization faced the challenge of balancing ever growing health insurance costs with the costs of benefits offered to employees.
- As a self-funded employer, the client was engaged in ongoing efforts to identify efficiencies and cost improvement with minimal impact to employee benefits — a mission of paramount importance for their organization.
- The most common strategies for managing health care cost increases via plan design changes and employee contribution increases were not feasible in this case.

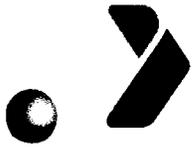
#### Solutions

- Determining that a strategic change in vendors could reduce pharmacy benefits costs, Burnham marketed the client's PBM with several vendors, including Burnham's "PBM arm," 360 Rx Solutions.
- The client's PBM at that time was CVS. 360 Rx Solution's preferred pricing (leveraging 800,000 members) with CVS and OptumRx allowed Burnham to **project savings of 31% of the client's current pharmacy benefits costs** while staying with CVS.
- 360 Rx Solutions' proactive cultivation of transparency gave the client the ability to fully see and understand all PBM costs.

#### Results

- Greater transparency gave the client significantly more understanding and control over their pharmacy benefits costs.
- The client realized a projected **\$119K** in savings on their pharmacy benefits costs, a significant cost savings on prescription drug spend in their health plans.
- Included in the projected \$119K decrease was a rebate increase of almost \$64K .
- Because the client was able to continue using CVS with no change in copays, the employee transition was virtually seamless.
- The switch to 360 Rx Solutions included a partnership with OneRx, an app providing employee education and tools to find the most beneficial and cost-effective prescription drugs available to them.





## Case Studies—Proactive Enhancements

---

### Client Profile

Industry:

City/Public

Transportation

Employees: 750  
employees

Ownership:

Public Entity

Locations:

Headquartered in  
California

### **Burnham manages major benefits transition with strategically funded enrollment system**

#### Situation

This client was in the midst of budget challenges and limited HR resources:

- Company enrollment was managed completely on paper
- Benefits renewal increase was 4%—which was \$325,000 a year—but had no budget to absorb the increase
- Adverse to change—no carrier changes in 10 years

#### Analysis

In consulting with the client, Burnham identified three primary goals to help them successfully move through their transition:

- Changed carriers for all lines of coverage to eliminate the renewal increase
- Negotiated with carriers to provide implementation credits and wellness dollars to fund an online enrollment system
- Strong project management during the transition to carriers and online system

Burnham negotiated funding for a benefits communication and enrollment firm through wellness credits, one month premium holiday and implementation credits. The Burnham team assisted during educational meetings with employees, both in person and through a call center.

#### Results

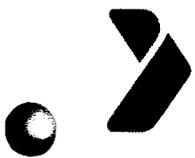
Burnham was successful in helping the client achieve their transition goals.

- Conducted ongoing weekly calls with the client and all vendors to ensure timelines were met
- Over 700+ eligible employees completed their enrollments online via iPads during open enrollment, utilizing the vendor call center or meeting with HR.
- New medical ID cards were delivered to employee homes prior to effective date
- HR received clean data files for all employees (and dependents), along with medical waivers, as appropriate
- Electronic eligibility files were made with all carriers for easier ongoing HR administration
- Client continues to utilize online benefits administration system









## Case Studies—Negotiations

---

### Client Profile

Industry: Real Estate  
Employees: 5,500 employees  
Locations:

Headquartered in Irvine, CA

### Situation

- › Fully insured medical program offerings
- › 35% of population in HMO plan
- › 65% of population in two high deductible health plans
- › Initial renewal increases of 4.6%

### Analysis

- › Evaluated Burnham renewal projections compared to vendor projections
- › Identified claim patterns utilizing Burnham's data analytics tool to understand true underlying cost drivers and prospective risk
- › Analyzed factors including:
  - Trend factors used
  - Reserve methodology
  - Pooling charges
  - Retention and administration fees
- › Analyzed demographics of population including age and gender mix
- › Evaluated historical and projected plan migration
- › Assessed potential of adverse selection and long-term viability of plan offerings
- › Considered any required legislative fees such as ACA

### Results

- › Utilized Burnham's claims analytics tool, cost predictive modeling, and large claim management
- › Significant leverage with regional and local healthcare market and vendors
- › **Final renewal action was rate pass with no plan design takeaways**
- › **Reduction of just under 5% in medical renewal increase from 4.6% to 0% resulting in savings of \$1,500,000**



## Case Studies—Negotiations

### Client Profile

Industry: Public  
Sector  
Employees: 1,800  
employees  
Locations:  
Headquartered in  
Southern  
California

### Situation

- Burnham replaced a national consulting firm
- First year of Burnham negotiation renewals
- Fully insured program offerings
  - Full and deductible HMO, PPO, and HDHP
  - Dental HMO and PPO
  - Vision
  - Life / disability
- Initial renewal increases across medical, dental, vision, and life/disability plans of 3%

### Analysis

- Evaluated Burnham renewal projections compared to vendor projections
- Performed marketing as programs hadn't been out to bid in over five years
- Requested a proposal from Kaiser based on employee survey results
- Requested program enhancements as part of marketing
- Analyzed claim experience and utilization including large claims
- Analyzed renewal features including:
  - Trend factors used
  - Reserve methodology
  - Pooling charges
  - Retention and administration fees
- Analyzed demographics of population including age and gender mix
- Considered any required legislative fees such as ACA

### Results

- Utilized marketing leverage and knowledge of industry standard program provisions to negotiate more favorable renewal positions
- Introduced Kaiser
- Reduced dependent employee contributions
- Introduced enhanced dental PPO plan with multi-year rate caps
- Added life insurance coverage for a portion of the population who hadn't received it historically with multi-year rate caps for all life and disability coverages
- Negotiated wellness/communication credits
- **Final renewal action was overall rate *reduction* of 2% (5% swing from initial to final renewal) with plan design enhancements resulting in savings of just under \$500,000**





# ABC Company

January 1, 2019 to January 1, 2020

## Performance Guarantee Results

Category	Guarantee Description	Credit Amount	Results	Penalty Amount
<b>Administrative Services</b>				
<b>Implementation</b>				
1. ID Cards.	99% mailed within 10 business days after final member eligibility is received, system loaded and passes a quality assurance check.	\$0	99.9% ID cards mailed in 5 business days after system checks.	\$0
2. "Electronic Claim Ready Date"	Electronic Claim Ready by the effective date or within 18 business days of account structure is entered into the system, final member eligibility is received, and benefit plan design is finalized.	\$0	Electronic Claim ready date 12/31/2002.	\$0
3. "Medical Eligibility Tape Loading"	Load all medical eligibility tapes to eligibility system within 3 business days of receipt. This is applicable to electronic tape loads only, does not apply to paper eligibility.	\$0	Medical eligibility loaded within 3 business days.	\$0
<b>Claim Operations</b>				
1. Time to Process: percent of claims paid in 10 business days	94 % in 10 business days Gradients are 94% within 11 business days 94% within 12 business days 94% within 13 business days 94% within 14 business days 94% in more than 14 business days	\$400 \$800 \$1,200 \$1,600 \$2,000	98.8% of claims were paid within 10 business days	\$0
2. Dollar Accuracy: percent of claims dollars processed accurately	99.0% Gradients are 98.99%-98.50% 98.49%-98.00% 97.99%-97.50% 97.49%-97.00% Below 97.00%	\$400 \$800 \$1,200 \$1,600 \$2,000	99.93%	\$0
3. Procedural Accuracy: percent of claims processed without non-financial error	97.0% Gradients are 96.99%-96.50% 96.49%-96.00% 95.99%-95.50% 95.49%-95.00% Below 95.00%	\$400 \$800 \$1,200 \$1,600 \$2,000	99.78%	\$0
<b>Customer Phone Service</b>				
1. Average Speed to Answer.	30 seconds or less Gradients are 32 seconds or less 34 seconds or less 36 seconds or less 38 seconds or less Greater than 38 seconds	\$400 \$800 \$1,200 \$1,600 \$2,000	16.98 Seconds	\$0
2. Abandonment Rate.	2.00% Gradients are 2.01%-2.50% 2.51%-3.00% 3.01%-3.50% 3.51%-4.00% Greater than 4.00%	\$400 \$800 \$1,200 \$1,600 \$2,000	0.70%	\$0
3. Call Quality Score	93.00% Gradients are 92.99%-91.00% 90.99%-89.00% 88.99%-87.00% 86.99%-85% Below 85%	\$400 \$800 \$1,200 \$1,600 \$2,000	99.37%	\$0
<b>Member Satisfaction</b>				
1. Claimant & Key Customer Overall Satisfaction	80% satisfaction score based on % responding: Completely Satisfied, Very Satisfied and Somewhat Satisfied	\$1,000	86.5%	\$0
<b>Overall UHC Satisfaction</b>				
1. Employer healthcare decision makers	Based on the response to the question, "Overall, how satisfied are you with UnitedHealthcare? If the response is a score of 5-10 on a 0-10 scale where 0 means very dissatisfied and 10 means very satisfied, the guarantee has been met.	\$1,000	Met	\$0
<b>Total At Risk</b>	<b>Performance Guarantees Total</b>	<b>\$14,000</b>	<b>Total Penalty to be Credited to Service Fee</b>	<b>\$0</b>







# Wertz & Company

February 21, 2020

**RE: FINANCIAL STRENGTH –**  
**BURNHAM BENEFITS INSURANCE SERVICES, INC.**

To Whom It May Concern:

Our firm has been engaged by Burnham Benefit Insurance Services, Inc. (BBIS) to perform services related to their corporate tax and accounting needs. While we have not audited their financial statements, we are very familiar with their business, accounting practices, customer base and the financial health of the company as represented by their financial statements.

The BBIS financials are representative of a very healthy company from all financial angles. They are adequately capitalized, generate tremendous cash flow, and maintain only debt necessary to facilitate ongoing growth or necessary capital expenditures.

Should you have any further questions relative to this matter, please do not hesitate to contact me directly.

Sincerely,



J. Katie Sterling, CPA  
Partner, Wertz & Company, LLP







# Burnham Leadership Team



**Kristen Allison**  
President & CEO  
Irvine



Partners



**Scott Aston**  
Senior Vice President & Partner  
Irvine

**Dan Exceen**  
Executive Vice President & Partner  
Irvine

**Nooshin George**  
Senior Vice President & Partner  
Irvine

**Darin Gibson**  
Executive Vice President & Partner  
Irvine

**Michael Michalski**  
Regional Vice President & Partner  
Larkspur



**Doug Ramsthal**  
Executive Vice President & Partner  
Irvine

**Melanie Thomas**  
Executive Vice President & Partner  
Irvine

**Ray Tunnell**  
Senior Vice President & Partner  
Irvine

**Steve Vilas**  
Chief Financial Officer & Partner  
Sacramento



Vice Presidents



**Nathan Ackeret**  
Vice President & Managing Director  
Los Angeles

**Rachel Aleknavicius**  
Vice President  
Irvine

**Richard Asensio**  
Vice President, Director of Compliance  
Irvine & Los Angeles

**Diane Ballen**  
Vice President, Business Development  
Los Angeles

**Kris Dopera**  
Vice President  
Irvine



**Ann Marie Estrada**  
Vice President  
Irvine

**Debra Farmer**  
Vice President  
Irvine

**Cathy Gee**  
Senior Vice President  
Los Angeles

**Jules Gootrad**  
Vice President  
Los Angeles

**Tina Koenig**  
Vice President  
Sacramento



**Chris Krusiewicz**  
Vice President  
Irvine

**Maggie Lepore**  
Vice President  
San Luis Obispo

**Jaime Medrano**  
Senior Vice President  
Los Angeles

**Sara Owens**  
Vice President Corporate Development  
Irvine

**Catherine Seitz**  
Vice President  
Irvine



**Margie Spear**  
Vice President  
Irvine

**Alan Thaxter**  
Vice President  
Fresno

**LeRoy Tucker**  
Senior Vice President  
Fresno

**Helen Vits**  
Vice President  
Irvine

**Brenda Zalewski**  
Vice President  
Irvine









