Bim Group

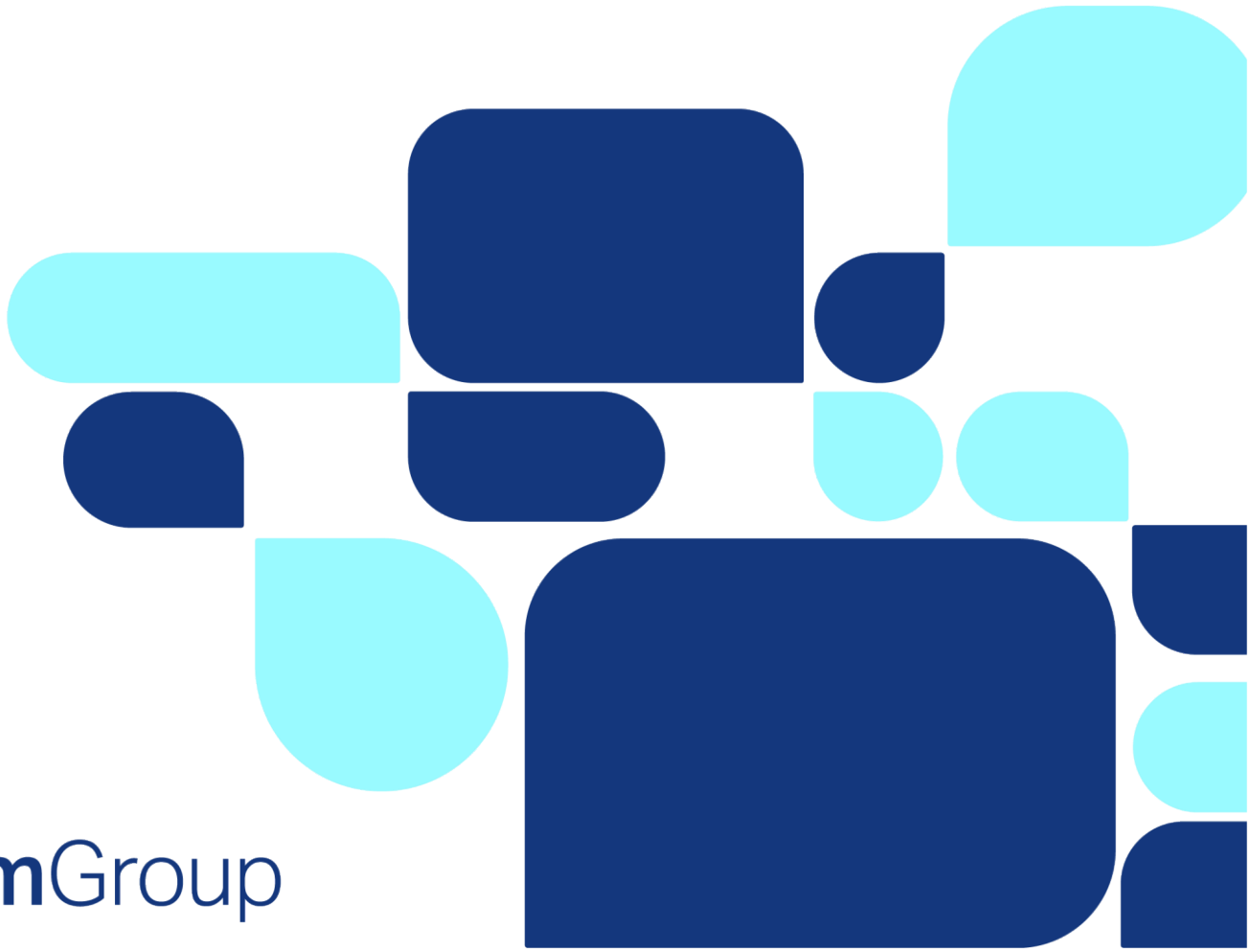
1151 Red Mile Road
Lexington, KY 40504
(859) 255-9455

Association of Independent Kentucky Colleges & Universities (AIKCU)

# REQUEST FOR PROPOSAL
# BENEFITS ALLIANCE CONSULTING SERVICES

Primary Contact: Dustin Stacy

June 6, 2025



BimGroup

BimGroup
1151 Red Mile Rd.
Lexington, KY 40504

June 6, 2025

Ms. Krista Hudson, Ms. Whitney Lairson
AIKCU Benefits Alliance
500 North Hurstbourne Parkway, Suite 115
Louisville, KY 400222

Dear Krista, Whitney,

Thank you for the opportunity to respond to the Request for Proposal for the Association of Independent Kentucky Colleges & Universities (AIKCU) Benefits Alliance.

Benefit Insurance Marketing, Inc., d.b.a. Bim Group, is a privately held S corporation that was founded in 1980. We focus exclusively on the practice of employee benefit consulting and are continuously challenged to be creative, innovative, and independent based upon each client's unique needs. We confidently believe the Bim Group is ideally positioned to exceed AIKCU's expectations of a professional services relationship.

This proposal constitutes a firm and binding offer by Bim Group to AIKCU considering the terms and conditions outlined in this RFP.

Kind regards,



Dustin Stacy
President

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# Background & Experience

Bim Group was founded in 1980 and is an independent, privately held, professional services corporation dedicated exclusively to employee benefit consulting. Bim Group is the largest privately held brokerage/consulting firm in Kentucky. Based on recent analyses, we manage triple the amount of Life/Health premium volume as our next closest competitor in the state of Kentucky. We currently employ 37 full-time team members, primarily serving employers with 50 to 5,000 employees in a variety of industries including government, legal, health care, education, manufacturing, equine, construction, banking, and retail. Please see **Exhibit A** for our Representative Client List.

Our purpose is to afford employers the opportunity to protect and enhance their employees' quality of life. To support this mission, we employ a diverse and dedicated team of professionals who possess expertise in all aspects of employee benefits, workforce health improvement, compliance, and human resources. Bim Group has a unique culture that allows us to recruit and retain some of the most talented professionals in the market. As evidence of such, Bim Group is a perennial recipient of Kentucky's Best Places to Work and has received national recognition as a winner of the Alfred P. Sloan Award for Workplace Excellence and Flexibility. Unquestionably, the depth and dedication of our team has been a catalyst to the continued success of Bim Group.

We are a proud "Partner Firm" of United Benefit Advisors (UBA), a community of more than 120 of the most successful and trusted independent employee benefits advisory firms in North America and Europe – the fifth largest firm based on global benefits revenue. UBA partner qualification requires strict adherence to the highest standards of business ethics, professionalism, and integrity – values that translate into exceptional service for employers. Partners share their collective innovation and best practices, which allows for the development of sophisticated, cost-effective solutions that are unparalleled by any local, regional or national broker/consultant. Through this partnership, Bim Group offers the best of both worlds – the confidence of working with a large national organization, while maintaining the personal experience of consulting with an independent advisor.



# Your Team of Specialists

**Dustin Stacy, President / Sr. Benefit Consultant**
After graduating Cum Laude from Georgetown College in 1999, Dustin's career path has spanned a variety of roles related to the health care industry. Dustin's initial experience focused extensively on consulting with hospitals and physician groups regarding licensure and reimbursement analysis. Dustin's insight regarding provider data analytics yields a unique perspective on the impact to health plan performance. Dustin maintains a Life & Health Consultant license as recognized by the Kentucky Department of Insurance. In serving as a Consultant team lead, Dustin possesses in-depth experience in all aspects of large employer benefit planning and consulting, with a particular emphasis on self-funded financing arrangements. Dustin's expertise in health care financing, budgeting, network analysis, reinsurance, PBM carve-out arrangements and strategy development, make him an invaluable resource to some of Bim Group's largest clients.

**Katie Casey, Account Executive**
Katie began her insurance career in 2009 working for Bluegrass Family Health, then Baptist Health Plan, in Provider Services. She then transitioned to the ASO department as the Network Lease representative. She completed her tenure at Baptist Health Plan as the Self-Funded Account Manager for the TPA/ASO Division, which included managing the statewide Baptist Employee Health Plan. As Baptist closed its insurance company, she accepted a position with a national benefit advisory firm as an Account Manager and ultimately served there as a Supervisor of Account Management. In her role she worked with clients from 2-1,000 lives including a varied assortment of industries, plan types, and funding arrangements. Katie joined Bim Group in March 2020.

**Lindsey Bohon, REBC, Sr. Account Manager**
Lindsey joined Bim Group in 2016, bringing eleven years of experience in business administration and employee development. In her 9 years with Bim Group, she has served clients of 50 to 6,000 employees in varied industries and funding arrangements. As a Sr. Account Manager, Lindsey assists clients by maintaining projects related to the strategic planning and renewal process, plan implementation, as well as ongoing complex service/administrative issues. Internally, she also serves as a Manager to our Account Manager and Account Specialist teams and works to promote employee development, education, and mentorship to ensure team members deliver efficient solutions of the highest quality.

Lindsey maintains a Life & Health Consultant license, as recognized by the Kentucky Department of Insurance, as well as a Registered Employee Benefits Consultant designation from the National Association of Benefits and Insurance Professionals.

**Morgan Tiemann, Manager, Client Communications & Health Improvement Strategies**
Morgan graduated from Indiana University with a Bachelor of Arts in 2008. With a focus on corporate communications, marketing, and customer experience, Morgan began her career in the health care industry. By 2016, Morgan was based in Indianapolis and leading a multitude of customer experience initiatives for all of IU Health's 18 hospitals. She then transitioned to agency work for two years, before moving to Louisville in 2018 to take on the role of VP of Marketing and Communication for a publicly traded community bank, with a focus on organic growth and M&A efforts. Prior to joining Bim Group in February 2024, Morgan was the Chief Marketing Officer for a regional tile distribution company based in Louisville. Morgan's role at Bim Group focuses on industry research, communication strategy, and employee engagement.

**Matt Clifford, Manager of Underwriting & Analytics**
Matt received his Bachelors of Science in Accounting from the University of Kentucky and has been with Bim Group for 10 years as a financial analyst/underwriter. Matt is the team lead of our analytics department and is

responsible for developing and maintaining client financial reports which identify plan costs and utilization patterns to facilitate data driven decisions. He utilizes actuarial tools to analyze proposed carrier renewals to ensure clients pay a fair and equitable rate. Matt also works closely with our benefit consultants to model the impacts of plan modifications and funding changes in both fully insured and self-funded plan designs.

**Lauren Johnson, Compliance Consultant**
Lauren Johnson is a benefits compliance expert with over 21 years of technical experience. She is a former partner with a regional employee benefits administration and consulting firm and is a subject matter expert on the Affordable Care Act, ERISA, Consumer Driver Healthcare Accounts, COBRA and other health and welfare benefit related issues. She earned her Bachelor's Degree from Eastern Kentucky and is a graduate of Leadership Lexington, a leadership program in Kentucky that offers individuals in the community the opportunity to broad perspectives and strengthen leadership skills. Lauren is a frequent speaker at industry events and has served as president of both the Central Kentucky Association of Health Underwriters and the Lexington Employee Benefits Council. She is certified in Flexible Compensation through the Employers Council of Flexible Compensation, received her certification as a Chartered Benefit Strategist through the National Association of Alternative Benefit Strategists and is an Accredited Pension Administrator through the National Institute of Pension Administrators.

**Tabatha George**, **ERISA Attorney**
Tabatha has 14 years' experience in commercial litigation and labor and employment law. As founder and partner in The Benefits Practice, Tabatha routinely consults with employers regarding ACA filings and has helped clients avoid or reduce millions of dollars in penalties. She also prepares plan documents for Wrap, Cafeteria, HRA, FSA, Retiree, Trust Account, Student Loan Repayment, and all other manner of employee benefit plans in addition to representing employers in DOL and IRS audits. Tabatha also specializes in preparing HIPAA compliance documents, audits privacy practices and IT systems, and conducts training for employer groups.

Tabatha completed her Juris Doctor at Harvard Law School and her BA with Concentrator in American and English literature with a citation in Spanish literature from Harvard College. While in Law School, Tabatha participated as a representative in the UN Convention on the Rights of Persons with Disabilities NGO and is a Graduate Board Member and Legal Chair of the Harvard Bee Club.

# References

HIGHER EDUCATION

Bim Group currently serves the following Kentucky based higher education clients:

- Transylvania University
- Berea College
- Lindsey Wilson College
- Georgetown College
- Union College
- Asbury Theological Seminary
- University of the Cumberlands
- Other UBA partner firms serve many higher education clients nationally.

**Berea College**

- **Location/Nature:** Berea, KY- Private Educational Institution
- **Size**: 614 Employees
- **Benefit Advisor**: Dustin Stacy
- **Contact**: Steve Lawson, Associate Vice President-Human Resources
- **Phone**: 859-985-3050
- **Email**: steve_lawson@berea.edu
- **Number of Years Serving Client**: 10+ years

Full-service brokerage/consulting engagement for all applicable employee benefit coverage lines, including: Health, Dental, Life, Accidental Death & Dismemberment, Disability, EAP, FSA, HSA and Supplemental insurance products.

- Plan Analytics-Annual Market Analysis, Plan Modeling and Benefit Design and Analysis, Budget Development
- Financial Reporting & Auditing—Monthly Data Analysis & Reserve Calculations
- Electronic Enrollment & Billing Platform—Vendor Specific Eligibility Feeds for Payroll & Carrier Integration
- Employee Communication & Engagement—Development and Printing of Customized/Branded Communication Materials, On-site Enrollment Meetings, Custom-built Employee Self-Service Web Portal
- Employee Customer Service Center—Complex Claim and Eligibility Resolution with Access to Dedicated Team Members

**Union College**

- **Location/Nature:** Barbourville, KY Higher Education
- **Size:** 200 employees
- **Benefit Advisor:** Benji Marrs
- **Contact:** Lynn Smith, Director of Humana Resources
- **Phone:** 606-546-1206
- **Email:** tlsmith@unionky.edu
- **Number of Years Serving Client:** 15+ years

Full-service brokerage engagement for all applicable employee benefit coverage lines, including: Health, Dental, Life, Accidental Death & Dismemberment, Disability, FSA, HSA and Supplemental insurance products such as accident, cancer, and critical illness.

- Fully insured vs. self-funding analysis
- Market analysis and funding recommendations
- Custom employee Communications and open enrollment education & support
- Facilitated a KY based FQHC to provide an on campus fulltime Nurse Practitioner and clinical team at no cost to Union College (insurance filing of claims)

    - Full service, open to faculty and students
- Recently introduced partnership with an enrollment firm to provide one on one enrollments and train faculty on use of online enrollment platform

**Lindsey Wilson College**

- **Location/Nature**: Columbia, KY Higher Education
- **Size:** 400 employees
- **Benefit Advisor**: Benji Marrs
- **Contact:** Karen Wright, Director of Humana Resources
- **Phone:** 270-384-8203
- **Email:** wrightk@lindsey.edu
- **Number of Years Serving Client**: 7+ years

Full-service brokerage/consulting engagement for healthcare planning and population health management.

- Plan Analytics-Annual Market Analysis, Plan Modeling and Benefit Design and Analysis, Budget Development
- Self-funded analysis for medical and PBM coverage
- Financial Reporting, Monthly Data Analysis, Reserve Calculations
- Employee Communication & Engagement-Development and Printing of Customized/Branded Communication Materials, On-site Enrollment Meetings, Custom-built plan communication materials
- Employee Health Improvement programs and onsite delivery
    - Creative integration of $0 cost access to certain clinicians with a regionally based healthcare system
    - Onsite & telephonic coaching for employees/spouses
    - Payroll differential strategy based on tobacco and engagement status (biometric screening results-metabolic syndrome)

**Transylvania University**

- **Location/Nature**: Lexington, KY Higher Education
- **Size:** 250 employees
- **Benefit Advisor**: Benji Marrs
- **Contact:** Karen McBrayer, Employment and Benefits Manager
- **Phone:** 859-233-8300
- **Email:** kmcbrayer@transy.edu
- **Number of Years Serving Client:** 3+ years

Full-service brokerage/consulting engagement for healthcare planning and population health management.

- Plan Analytics-Annual Market Analysis, Plan Modeling and Benefit Design and Analysis, Budget Development
- Self-funded analysis for medical and PBM coverage
- Financial Reporting, Monthly Data Analysis, Reserve Calculations
- Employee Communication & Engagement-Development and Printing of Customized/Branded Communication Materials, On-site Enrollment Meetings, Custom-built plan communication materials
- Employee Health Improvement programs and onsite delivery
    - Creative integration of $0 cost access to certain clinicians with a regionally based healthcare system
    - Onsite & telephonic coaching for employees/spouses
    - Payroll differential strategy based on tobacco and engagement status (biometric screening results-metabolic syndrome)
- Currently consulting on complete population health management and wellness strategy revision which was initially implemented prior to our consulting takeover

ASSOCIATION PLANS

**Kentucky Construction Industry Trust (KCIT)**
Contact: Richard Vincent, Executive Vice President | rvincent@agcky.org

Bim Group has provided brokerage and consulting services for the Kentucky Construction Industry Trust (KCIT) for 45+ years. KCIT was established over 50 years ago to provide comprehensive employee benefits to members of participating trade associations (e.g., Associated General Contractors of Kentucky, Kentucky Crushed Stone Association, Kentucky Association of Highway Contractors, Builders Exchange of Kentucky). Due to the mass purchasing power of this fully insured trust, even small businesses can take advantage of a high level of quality benefits at costs normally available only to large employers. Currently, there are approximately 10,000 covered lives participating in the program.

**Kentucky Thoroughbred Association (KTA)**
Contact: Chauncey Morris, Executive Director | cmorris@kta-ktob.com

Bim Group has provided brokerage and consulting services for the Kentucky Thoroughbred Association (KTA) for over 20 years. Similar to KCIT, KTA was established over 25 years ago to provide employee benefits to employers within the Thoroughbred industry. Currently, more than 175 Kentucky domiciled employers and approximately 3,400 covered members utilize the employee benefits program through KTA. KTA recently migrated to a self-funded Multiple Employer Welfare Arrangement (MEWA) to better manage the plan spend and to take advantage of opportunities to reduce cost.

# Completed Responses

**REQUEST FOR PROPOSAL**

**BENEFITS ALLIANCE CONSULTING SERVICES**

**RESPONSES**

**The Benefits Alliance is seeking a consultant to perform the full range of services related to management, maintenance, communication and continuous improvement of the Benefits Alliance as well as the benefit plans of each Alliance member. These services will, at minimum, include:**

- **Serving as the liaison between AIKCU and Point-C/Aspirant regarding administration and management of the programs offered by AIKCU.**
- **Serving as the liaison between AIKCU and the Pharmacy Benefit Manager (PBM) for the Alliance.**
- **In conjunction with Point-C/Aspirant serving as a liaison between AIKCU and Anthem Blue Cross & Blue Shield.**
- **Evaluating potential health care and pharmacy strategic components in the areas of cost and innovation that fit the demographics of each Alliance member.**
- **Developing strategies to contain escalating pharmacy costs.**
- **Meeting the administrative and service needs of each Alliance member and their respective plan members.**
- **Developing, implementing, and managing reporting systems that provide comprehensive reports regarding costs and utilization.**
- **Maintaining regulatory compliance in a proactive manner.**
- **Developing a program or programs that focus on plan member health and wellness initiatives.**
- **Providing best-in-class communication services to Alliance members and their respective plan members.**
- **As instructed by AIKCU, managing any RFP regarding Third-Party Administrative (TPA) services, Health, Dental, and/or Vision Plan Provider Network, and Pharmacy Benefit Management services.**

Bim Group confirms its understanding of the services outlined by the Benefits Alliance and agrees that it is prepared to provide said services.

1. **Please provide a strategic statement indicating how your firm will best meet the needs of AIKCU, the Alliance and Alliance members as it pertains to delivering employee benefit programs.**

   At Bim Group we are continuously challenged to be creative, innovative, and independent in our consultation based upon each client's unique strengths, weaknesses, opportunities, and challenges. However, we are also reminded to be consistently compassionate and ever mindful that while our objective is to protect our clients' most valuable asset, their people, from life's challenges and devastating risks, we should strive to pursue a

higher goal of finding ways to go beyond and enhance their quality of life.

We confidently believe the Bim Group is ideally positioned to exceed AIKCU's expectations of a professional services relationship. Operating independently, our people, and experience in innovation are three (3) critical success factors which distinguish us within the marketplace.

2. **Please provide a detailed analysis of how the employee benefits consultant function will be assumed for Alliance members.**

   Currently, Bim Group utilizes a team-based approach in managing and supporting multiple Alliance members. Our service model is led by the assigned Sr. Benefit Consultant/Advisor, along with the Account Executive and a robust team of specialists. While the aforementioned team will lead the consulting work at the AIKCU association level, Alliance members will continue to be managed by their respective teams. For any Alliance member that is new to our firm, we utilize a discovery process to understand the client's needs and goals before pairing up the account service team.

   As a result, the service team will ensure the successful development and implementation of the AIKCU employee benefit program at the Alliance member level. This includes establishing meetings at regular intervals with the HR & Finance Team to review financial reporting, plan success, troubleshooting, and ensure all expectations are being met. A working rhythm will be developed as the relationship is established.

   Supporting Alliance members' Human Resources staff is a top priority for the account service team. Demonstrating this begins in the strategic development phase of our newly established relationship, continues through the implementation, and culminates with ongoing support throughout each year. As an example, Bim Group employs a Compliance Consultant, Lauren Johnson, to directly support HR plan compliance. Significant priorities for this role include resolution for technical questions, online blog posts, consistent email communication, audit support, and staff training. Bim Group's experienced and knowledgeable service team is also supplemented by outsourced tools such as Mineral and HR Service. Direct access to these vendors is provided to Alliance members and is included in our proposal. Mineral and HR Service are online services providing answers to many Human Resources questions covering all concepts in the industry extending beyond benefits.

   Finally, the Bim Group service team will provide a concierge layer of support between Alliance members and selected vendors for claims and billing resolution. Our team will be available to troubleshoot day-to-day issues that arise. Bim Group's book of business enables us to utilize established carrier "concierge" relationships that provide claim resolution quickly for our clients. Our client management system (Brokerage Builder) also aids in monitoring carrier issues across the entirety of our client base to help identify systemic issues that may be affecting multiple plans. Our team is trained and prepared to assist Alliance members as needed on the carrier claims appeal/grievance process.

3. **Please list any Alliance member for which your firm provides employee benefit plan consulting services.**

   Bim Group provides employee benefit plan consulting services for the following Alliance members:

   - Berea College
   - Georgetown College
   - Lindsey Wilson College
   - Transylvania University
   - Union College
   - University of the Cumberlands

4. **Please provide a description of your approach and capabilities in terms of designing, developing and implementing new employee benefit programs as well as fine-tuning existing programs.**

   Accomplishment of AIKCU, the Alliance, and the Alliance member's goals for their respective employee benefit programs will be achieved through our standards-based management system, which helps ensure tactical execution of both the immediate annual renewal process, as well as multi-year strategic initiatives. Reliance on this management approach is indispensable in effectively implementing the strategies identified during our custom planning process, as well as assisting our clients in realizing administrative efficiencies.

   In support of this planning process, we will continue to utilize cutting edge delivery systems, best practice healthcare initiatives, consideration of industry trends, and prospective legislation to form our recommendations to each constituent's leadership team. Our approach to the annual market analysis process of carriers for medical, pharmacy, ancillary, and worksite coverage lines yields substantial savings opportunities for our clients.

   Our commitment to AIKCU is not limited to identifying savings opportunities; it embraces working collaboratively to negotiate, leverage, review, budget, and effectively implement our recommendations to include the establishment of appropriate annual premium rates and reserves prepared by our analyst and underwriting teams.

   Bim Group partners with Milliman, a globally recognized independent actuarial firm for various services but particularly for its medical plan benchmark reporting. Milliman's benchmarking report covers over 100 data points with 27,332 employer participants across 35+ markets. Utilizing Milliman's Comprehensive Health Assessment application, Bim Group will develop a customized regional healthcare benchmark to allow its AIKCU clients to view their plan relative to local institutions along with national higher education benchmarks. This approach has allowed our clients to continually fine-tune benefit offerings based on comprehensive benchmark data.

5. **Please provide proposed measurement tools/metrics to evaluate the quality of consulting services provided as well as the effectiveness of your recommendations provided to AIKCU, the Alliance and Alliance members.**

   Bim Group employs a dedicated underwriting and analytics team, who in working with the Sr. Benefit Consultant and Account Executive, will provide all constituents (e.g., AIKCU, the Alliance and Alliance members) with monthly reporting, clinical claim analysis, plan modeling, benchmarking, budget development and reconciliation, reserve estimates, and renewal budget projections. Analysis includes employee plan migration simulations and modeling potential rate changes. Our team routinely performs retrospective savings analyses to measure the impact of specific plan recommendations and/or point solutions (e.g., Specialty Drug carveouts) to augment the current plan offering. Thus, measurement of Alliance or Alliance member specific recommendations will be sourced through our analytics team. Metrics would include but not limited to:

   - Year-over-year cost changes on a Per Employee Per Month (PEPM) and/or Per Member Per Month (PMPM) basis
   - Return On Investment (ROI) analysis
   - Categorical retrospective savings analysis
   - Vendor Performance Guarantees
   - Fixed Cost rate changes
   - Employee Satisfaction Surveys

- Stop Loss Rates and Maximum Risk Exposure

From an AIKCU perspective, growth of the association will serve as a primary metric to judge the performance of any consulting services. With this being said, we are certainly open to collective developing evaluation metrics with AIKCU, the Alliance, and Alliance members.

6. **The AIKCU Benefits Alliance is an association sponsored arrangement offered by AIKCU with each participating Alliance member having a separate agreement with Point-C/Aspirant/Anthem. Do you currently provide consulting services for a similar association sponsored arrangement? If so, please provide a full overview of each.**

   Yes, Bim Group currently provides brokerage and consulting services for two notable Kentucky based associations, the Kentucky Thoroughbred Association (KTA) and the Kentucky Construction Industry Trust (KCIT).

   KCIT was established over 40 years ago to provide comprehensive employee benefits to members of participating trade associations (e.g., Associated General Contractors of Kentucky). Due to the mass purchasing power of this fully insured trust, even small businesses can take advantage of a high level of quality benefits at costs normally available only to large employers. Currently, there are approximately 10,000 covered lives participating in the program.

   Similarly, KTA was established over 25 years ago to provide employee benefits to employers within the Thoroughbred industry. Currently, more than 175 Kentucky domiciled employers and approximately 3,400 covered members utilize the employee benefits program through KTA. KTA recently migrated to a self-funded Multiple Employer Welfare Arrangement (MEWA) to better manage the plan spend and to take advantage of opportunities to reduce cost.

   Regardless of the funding approach, both association plans afford members the opportunity to lower cost through an aggregated purchasing arrangement while helping to spread risk across a larger pool of members.

7. **Please provide the fee structure on a Per Employee Per Month (PEPM) basis for: Alliance Consulting Services and Alliance Member Consulting Services. Please provide your proposed fee for each of these services and indicate any added service, such as placement of stop loss reinsurance, where a separate fee is contemplated and your proposed fee for each.**

   Bim Group understands and acknowledges that services outlined under the Request for Proposal (RFP) are to begin on or around September 1, 2025. The proposed fee schedule is applicable to the following coverage lines: Health, Dental, Vision, and Pharmacy Benefit Management Services, and includes the range of services identified in the RFP.

   <u>Alliance Consulting</u>

   Bim Group proposes a PEPM consulting fee of $2.50 (based on approximately 2,800 participating employees), with a minimum annual charge of $80,000. The annual consulting fee will increase for inflation by a rate not to exceed three percent (3.0%) per year.

   Request for Proposal (RFP) projects utilize an ad hoc fee arrangement as detailed below:

   - <u>TPA RFP Health – $10,000</u>
   - <u>TPA RFP Dental – $5,000</u>
   - <u>TPA RFP Vision – $5,000</u>

- TPA RFP PBM – $15,000
- RFP Stop Loss – Based on the current setup, placement of stop loss would occur at the Alliance Member level and would be subject to the underlying agreement (see below). However, should the Alliance explore a captive or aggregated purchasing approach for stop loss, additional fees would apply.

As noted in Question 22, additional fees may be applicable depending on the extent of marketing plan AIKCU chooses to employ. In any case, AIKCU would have the opportunity to review and approve any proposed fee.

Alliance Member Consulting Services

Due to the variability of services and group size, we are unable to offer a blanket consulting PEPM rate for all Alliance Members. After establishing a thorough understanding of the member's needs, we would develop a fee proposal for each organization.

General

Bim Group confirms this proposal, including all costs, holds good for not less than three months from the final date for receipt of vendor responses. No additional Travel fees, Management fees, and Administration fees would be invoiced by Bim Group for services rendered.

Disclosure

As is common practice in the industry, Bim Group will receive compensation in the form of commissions for Brokerage based lines of coverage from the companies in which business is placed. In addition to commission, Bim Group may also receive compensation based on firm wide premium volume, client retention, and/or underwriting profitability with various insurance companies. Any compensation paid is from the insurance company's general assets.

8. **Please detail any financial consideration you, your employees that will be assigned to the Alliance and/or Alliance members, or your firm has in any healthcare provider, such as a physician's practice, or pharmacy provider, such as retail pharmacies. A "financial consideration" is defined as substantial ownership exceeding 25% interest. If so, please provide a list of any such entity and ownership interest.**

   Bim Group and its employees do not have any financial consideration or interest in any licensed healthcare provider.

9. **If there is a financial consideration, please detail how your firm discloses that to clients and how you ensure that the financial consideration does not interfere with your ability to provide uncompromised recommendations or the appearance of a conflict of interest.**

   Not applicable per our response to Question #8.

10. **Within the past ten (10) years have you, your employees that will be assigned to the Alliance and/or Alliance members, or your firm, been subject to a regulatory or administrative inquiry, such as by the Department of Insurance, pertinent to the services outlined in this RFP? If so, please provide full details and official copies of the disposition of the inquiry by the regulatory agency.**

    No, neither Bim Group nor its employees have been subject to a regulatory or administrative inquiry.

11. **Within the past ten (10) years have you, your employees that will be assigned to the Alliance and/or**

**Alliance members, or your firm, been subject to any criminal proceedings involving theft or dishonesty? If so, please provide full details and official copies of the disposition of any proceedings.**

No, neither Bim Group nor its employees have been subject to any criminal proceedings involving theft or dishonesty.

12. **Please provide official copies of required licenses, (Individual Agent and Agency license for Health and Life, and Agency license for Life & Health Consultant) as issued by the Kentucky Department of Insurance for you, your employees that will be assigned to the Alliance and/or Alliance members, and your firm.**

    Please see **Exhibit B** for licenses for Bim Group and applicable employees.

13. **Have you, your employees that will be assigned to the Alliance and/or Alliance members, or your firm ever been denied licensure or had licensure revoked or suspended by any Department of Insurance? If so, please provide full details and official copies of the action taken by the Department of Insurance.**

    No, neither Bim Group nor its employees have been denied licensure or had licenses revoked or suspended by any Department of Insurance.

14. **The escalating cost of pharmaceuticals, both those dispensed through the pharmacy benefit and the medical benefit of each plan, is of great concern to the Alliance and Alliance members. Please provide an overview of any strategy you would propose that will interface with the current PBM for the Alliance. If this strategy is currently in place with any of your clients, please include that information.**

    Bim Group currently supports multiple point solutions to help curb the escalating cost of pharmaceuticals, including but not limited to: Specialty Drug carveouts, Patient Assistance Programs (PAP), International Drug Sourcing, and GLP-1 carveout management. An overview of each solution is summarized below including those that will interface with the current PBM for the Alliance.

    - Specialty Drug carveouts (Pharmacy & Medical) – Utilizes outside vendors to manage high-cost medications through both prescription drug coverage and the medical benefit. One such vendor currently being utilized by our clients is a company called Archimedes. Results are achieved by eliminating tightly held PBM conflicts of interest including drug spread, rebate retention, and pharmacy ownership while delivering the most rigorous clinical management at the lowest net cost. Average clients experience 25% to 50% reductions in specialty spend in the following implementation.

      Further opportunities to lower specialty drug spend incurred through the medical plan are available through Archimedes. These include both non-oncology and oncology drugs that are reimbursed through J-codes under the medical plan. See **Exhibit C** for supporting documentation on Archimedes. Bim Group currently has multiple clients utilizing Archimedes for specialty drug management alongside the Alliance's current PBM. Berea College is one such example moving forward with Archimedes (effective 7/1/2025) while continuing to use the Alliance's underlying PBM (CVS) for all other prescription drug management.

    - Patient Assistance Programs (PAP) – These programs help low-income members access financial assistance for high-cost specialty medications based on a needs assessment. Also known as Foundational Assistance programs, this approach helps alleviate the cost of the medications from employer sponsored plans like AIKCU's. Vendors such as Payer Matrix, PaydHealth, and SHARx provide facilitation and management of these carveout programs. While a significant savings can be achieved using this approach, our firm has engaged two different law firms that have identified multiple compliance concerns around these programs which were originally designed and funded for individuals who do not have insurance. For clients interested in a legal opinion of these options, Stites

& Harbison stands ready to provide our clients with legal guidance in this area. Notwithstanding these compliance concerns, Bim Group has clients utilizing the PAP approach for certain specialty drugs alongside the Alliance's current PBM.

- International Drug Sourcing – Similar to PAP, these programs help members locate foreign based pharmacies (usually Canada) to dispense certain medications via mail order. While this strategy can achieve cost savings for both the plan and the member, compliance issues remain with this acquisition approach. Specifically, the Federal Food, Drug, and Cosmetic Act (FFDCA) prohibits the importation of unapproved prescription drugs into the United States and the reimportation of prescription drugs originally manufactured in the United States by anyone other than the drug's manufacturer. The FFDCA is designed to protect U.S. citizens from unrestricted importation and reimportation of prescription drugs, which creates "an unacceptable risk that counterfeit, adulterated, misbranded, subpotent, or expired drugs will be sold to American consumers," even when balanced against the benefit of lower prescription drug prices. Bim Group does not have any clients currently utilizing this approach in combination with the Alliance's current PBM.

- GLP-1 medications and Weight Loss Programs – Given the significant utilization increase in GLP-1 medications such as Ozempic, Mounjaro, and Trulicity, it is recommended the Alliance consider PBMs and/or carveout programs (e.g., Northwind Pharmaceuticals) to manage this utilization. Specifically, PBMs should maintain the appropriate clinical edits to ensure only members with Type II Diabetes qualify for these medications. For employer sponsored plans that elect to add coverage for weight loss, management is paramount to effectively manage members accessing GLP-1s weight loss medications such as Wegovy, Zepbound, and Saxenda. Opportunities exist through local providers such as the University of Kentucky, which is in the process of developing a direct-to-employer strategy to manage weight loss medications outside of the PBM relationship. Although we do not have any clients currently utilizing GLP-1 carveouts, we believe it is only a matter of time before this strategy becomes more commonplace within the industry.

15. **The Alliance was created to represent the cumulative interests of AIKCU members. If a decision that benefits the Alliance but runs contrary to the position of an Alliance member(s) you represent, how would you balance the needs of the Alliance to those of the Alliance member?**

    We recognize the importance of balancing collective goals with individual Alliance member needs. In situations where Alliance-wide strategies may not align perfectly with the interests of specific member institutions, our approach is to design flexible solutions that offer optionality without undermining the broader objectives of the Alliance. We will develop recommendations that are not mutually exclusive, ensuring members can opt in at a level that aligns with their unique priorities and constraints. Our aim will always be to preserve cohesion across the Alliance while empowering individual members to make the best decisions for their institution.

16. **When evaluating a PBM what criteria do you apply? Please provide a copy of your standard evaluation process and the RFP you issue when evaluating a prospective PBM.**

    Bim Group routinely manages Request for Proposals (RFPs) for both carve-out and bundled Pharmacy Benefit Managers (PBMs), including pass-through and guaranteed pricing arrangements. Our process specifically examines the following categories for each PBM proposal using the applicable group's historical claims experience (i.e., typically two years) to create a baseline data set:

    - Drug discounts, dispensing fees, and rebate guarantees
    - Contract and performance guarantees
    - Added fees and other utilization-based costs
    - Formulary Disruption

- Value added programs designed to support proper plan management

In addition, we contract with Foundational Pharmacy Strategies (FPS) to provide a secondary review of Bim Group's PBM evaluation process. FPS enhances Bim Group's RFP process by supporting the updates of our internally developed PBM RFP document. Such support includes providing guidance related to changes in PBM pricing methodology, contract best practices and market changes impacting PBM pricing performance, and reconciliation practices. FPS conducts an additional review in blinded form of each PBM bidder submission against the baseline data set to ensure an accurate assessment is conducted. This output is then compared to any reprice analysis that was provided as part of a bidder's submission. An analysis is then provided for each formulary proposed by a bidder.

Based on the criteria outlined above, we identify the most cost-effective proposals and then negotiate terms based on each client's goals/standards. For example, some clients may only utilize year-to-year contract arrangements, which we fully support in negotiating terms with the PBM. Based on our working knowledge of various PBM vendors and the impact pharmacy disruption can cause on a workforce, we try to anticipate service or performance issues that may occur and help identify those concerns prior to a client transitioning to a particular vendor relationship. A copy of our standard PBM RFP template is included for reference (see **Exhibit D**).

17. **When evaluating a TPA what criteria do you apply? Please provide a copy of your standard evaluation process and the RFP you issue when evaluating a prospective TPA.**

Our team regularly assists our clients with vendor procurement, negotiating with insurance carrier peers, assisting in the development and implementation of programs, and preparing financial and contract analysis of both medical and pharmacy options. Throughout our work, we maintain a focus on opportunities to curb costs and better position clients from a performance guarantee and contract perspective. Following implementation of the renewal plan, our team will continue to utilize the analysts and underwriters to provide monthly reporting regarding budgets and claims.

As it relates to TPA evaluations, Bim Group utilizes a standards-based approach through our RFP process. Our approach specifically examines the following categories for each TPA proposal:

- Administrative Fees
- Added fees and other utilization-based costs
- Value added programs designed to support proper plan management
- Claims Processing
- Contracted Network (includes discount analysis and provider disruption/access)
- Eligibility and Enrollment Procedures
- Customer Service
- Utilization Review/Case Management/Disease Management
- Financial Reporting
- Stop Loss Carrier (integration and claim filing)
- Banking Arrangements/Funding
- Contract and performance guarantees

Bim Group is flexible in our ability to toggle RFPs criteria based on our customer requests or priorities, while retaining leverage with the carriers based on our book of business and partnership through UBA. Our clients represent a significant portion of managed premium for Anthem BCBS of Kentucky and United Healthcare. In addition, we have substantial self-funded book of business with various TPAs (e.g., Aspirant, UMR,

Anthem ASO etc.). We maintain platinum level status with all major medical and ancillary carriers for market leverage, which is essential not only for negotiations, but also for service-related issues. Both on a local and national basis, our firm has access to proprietary pricing contracts and contractual guarantees through these carriers. We also leverage the book of business our procurement partners SBR to help ensure our client's plans are exposed to a broad spectrum of carriers in the ancillary and stop loss markets. Unlike many firms that only use a select number of carriers, we believe broader exposure ensures our clients receive the best offers the market will bear. Due to this level of influence and market access, we are afforded the opportunity to be creative in addressing problems for our clients. Please see **Exhibit E** for a copy of our standard RFP we issue when evaluating a prospective TPA.

18. **When evaluating a medical provider (PPO) network what criteria do you apply? Please provide a copy of your standard evaluation process and the RFP you issue when evaluating a prospective medical provider network.**

    When evaluating a carrier's PPO network strength, Bim Group follows one of two approaches depending on the client's goals and objectives:

    - Internal Analysis: Facilitated by our Underwriting & Analytics team.
    - External Analysis: Milliman, our independent actuarial partner, is engaged to conduct the analysis using its established methodology.

    For internal evaluations, Bim Group obtains a blinded, service-line-level historical claims file covering the past 12 to 24 months, along with a current demographic census. Preferred carriers are then asked to perform a line item claims repricing analysis and supply aggregated discounts by place of service categories defined within the RFP request. Each carrier must also submit an actuarial attestation confirming the discounts provided reflect the actual experience.

    Bim Group consolidates the aggregated discounts and geographic access data into a comprehensive financial impact assessment for further review. For external analysis, Milliman is contracted to provide a third-party evaluation of the various PPO networks. The analysis is based on each carrier's book-of business discounts aggregated using the Uniform Data Specification (UDS) requirements for reporting 3-digit ZIP code discounts. Discounts are based on an incurred claims period of January 2023 through December 2023 (CY23). The carriers provided discounts by detailed type of service and code, contract status, payment status, and by ZIP code/market. The UDS discounts reflect the in versus out-of-network provider mix in each carrier's book-of-business data. Each carrier provided an actuarial attestation that the discounts supplied with UDS were consistent with their actual experience.

    The UDS information is fed into Milliman's Payer Network Check Tool. The Milliman Payer Network Check Tool is a series of modules and process that:

    - Enables an extensive review of each payer's UDS file, reconciling the values with the payers, and other UDS submissions to ensure the information is consistent and within expectations.
    - Applies a series of credibility thresholds and other components as the data is prepared for use in analyses.
    - Performs the discount analysis, producing the output contained in this report.

    The overall or total discounts reported for each carrier reflect the carriers' UDS inpatient, outpatient, and professional discounts for CY23, weighted by Client's geographic membership profile. Milliman uses the 2019 Market Basket to avoid the impact of COVID-19 public health emergency on the assumed distribution of

service. Carrier discount levels used in the calculations are adjusted for credibility and normalized for service mix differences. Each carrier's total discount reflects the in-network penetration of the carrier book of business. Milliman adjusts discounts reported for non-contracted claims that reflected usual, reasonable, and customary amounts and not negotiated contract rates.

Milliman's analysis is considered the "gold standard" for measuring relative price differentials of various PPO networks. Regardless of the internal or external approach utilized, Bim Group negotiates network discount performance guarantees to align financial penalties with non-performance of network discounts.

19. **Knowledge of proposed and actual changes in legislation and regulatory requirements are of the highest priority. What resources do you utilize to ensure that you remain informed? Describe your resources and strategy around legislative and regulatory updates for your clients.**

    Throughout the year, ongoing support overseen by our Compliance Consultant, Lauren Johnson, is continuously provided to the clients which is critical to managing a successful employee benefit program.

    Lauren is an active member in the National Association of Benefit and Insurance Professionals (NABIP ) and received her ACA certification through their organization. Furthermore, she is a member of the Central Kentucky Association of Health Underwriters. As an active member within these organizations, she has access to Federal and State legislative agendas. She stays abreast of changing legislation through a variety of resources including NAHU, United Benefit Advisors, International Foundation of Employee Benefit Plans, and individual research.

    Bim Group disseminates relevant information regarding state and federal laws (e.g., ACA, ERISA, ADA, COBRA, HIPAA, ARPA, etc.) through a variety of mediums and provide ongoing support to clients via email, blog posts, responding to technical questions, and staff training. Free monthly webinars (often approved for HRCI and SHRM credit) focused on trending employee benefit issues are available to the entire Human Resources staff. Compliance matters such as ERISA, ACA Compliance, 5500 guidance, and Section 125 regulations are primary topics of these webinars.

20. **The review of contracts and plan documents is a key consulting service required by AIKCU and the Alliance. What resources do you utilize to ensure compliance with regulatory guidelines including ERISA? Describe your resources and strategy around compliance with regulatory guidelines including ERISA for your clients.**

    With the myriad of regulations which govern employee benefit plans (ERISA, IRS, EEOC, ACA, and more), it is necessary for these plans to be compliant with a wide array of regulations. Therefore, AIKCU and Alliance members will have access to a dedicated resource through our Compliance Consultant, Lauren Johnson, who is supported by an ERISA attorney, Tabatha George of The Benefits Practice. Lauren is a knowledgeable client resource for a variety of employee benefit compliance issues ranging from ERISA and Health Care Reform to Section 125 and COBRA. As a partner with The Benefits Practice, a boutique employment practices law firm, and former Fisher Phillips leading benefits counsel, Tabatha offers legal guidance and specialized services to our employer clients. Furthermore, to support our compliance efforts, Bim Group has immediate access to UBA's Chief Compliance Officer, Bonita Hatchett.

    Providing resolution for technical questions, consistent email communication, comprehensive compliance assessments, audits, and staff training are a few of the services available to the Human Resources staff. ACA compliance and 5500 guidance are regularly discussed and shared with clients. Our Compliance Consultant will conduct an annual review of all plan documents to ensure compliance with applicable laws and contracted agreements and an annual risk assessment to identify vulnerable areas. Lauren Johnson aids with the facilitation of benefit-related forms (such as ACA 1094/1095 Forms and Form 5500) as required for compliance on all health and welfare plans.

Lauren also provides our clients with comprehensive plan documents and 5500 filings. Documents include a Wrap Plan, HIPAA Policies and Procedures, Cafeteria Plan, Dependent Care Account, Health Reimbursement Account, and Health Savings Account if applicable. Through our UBA partnership, Bim Group provides monthly education and training webinars with HRCI/SHRM continuing education credit, accompanied by timely blog posts and email updates with a focus on Health Care Reform and other trending employee benefit issues. Additional benefits of the UBA partnership include provision of in-depth material regarding the overarching aspects of the benefits law, producing client checklists and model notices, as well as facilitating discussions with legal counsel when appropriate.

Please see **Exhibit F** for supporting compliance documentation.

21. **The arrangement between Point-C/Aspirant and Anthem is formally known as a Jointly Administered Arrangement (JAA). What level of familiarity does your firm have with this type of arrangement? If applicable, describe your experience consulting with JAA clients and how it differs from consulting services with clients in standard TPA and carrier-based ASO arrangements.**

    Bim Group has worked extensively over the past decade with JAA clients, placing our first JAA case in 2014. At present, our firm has approximately 21 group plans administered through a JAA approach with multiple different TPAs, including Health Comp, AmeriBen, and Aspirant.

    Based on this experience, the primary differences in consulting with JAA clients as opposed to clients in standard TPA and carrier-based ASO arrangements would be in the funding, claim timing, plan design flexibility, customer service, and the ability to employ various point solutions that are not available within a carrier based ASO model.

22. **Participation in the Benefits Alliance includes AIKCU member colleges and universities, other not-for-profit educational institutions, and other for-profit educational institutions including state universities. AIKCU and the Alliance wishes to expand its membership to eligible Kentucky entities through a robust campaign managed and marketed by its consultant. Please provide a narrative outlining your vision for such a campaign and projected membership growth over the eighteen months beginning January 1, 2026.**

    **Proposed Growth Campaign Strategy (2026–2027)**
    Our vision for expanding Alliance membership begins with a targeted, data-informed outreach and engagement campaign designed to resonate with both not-for-profit and for-profit educational institutions across Kentucky. We will position the Alliance as a collaborative, cost-effective benefits solution that empowers institutions to enhance employee well-being while maintaining control over rising healthcare costs — a value proposition that speaks to mission-driven organizations of all types and sizes. To support meaningful and sustainable growth, we propose a four-phase campaign that allows for flexibility while staying aligned with AIKCU's goals. Pricing for this campaign will be presented and agreed upon prior to starting the Discovery phase, pending further conversation around AIKCU's goals for the campaign.

    The campaign would include:

    **Phase 1: Discovery & Alignment (Q4 2025)**

    To refine our campaign approach, we recommend beginning with a discovery and planning phase in close collaboration with AIKCU leadership. During this phase, we would gather the following information:

    - A list of eligible institutions and segmentation by type, size, location, and status (member/prospect)
    - Insights into prior or current outreach efforts, including messaging and response history
    - Marketing assets already in use or in development

- Communication channels available for use (e.g., newsletters, social media, leadership networks)
- Known decision-makers and key influencers at potential member institutions
- An overview of the current onboarding and enrollment process for new members

This foundational input will ensure that our campaign builds upon what already exists, avoids duplicative efforts, and is informed by the realities of the member landscape.

**Phase 2: Strategy Development & Asset Creation (Q1 2026)**

Once aligned, we will develop a customized outreach strategy tailored to the identified audience segments. Key deliverables in this phase may include:

- Branded recruitment materials (slide decks, one-pagers, emails, landing pages)
- Messaging themes and talking points that resonate across institutional types
- Testimonials or case studies featuring current Alliance participants
- Campaign timeline with outreach milestones and activation dates
- Coordination plan for leadership engagement or peer-to-peer outreach

This phase would also include scheduling the first round of webinar or live engagement events to build awareness and answer questions.

**Phase 3: Engagement & Outreach (Q2–Q3 2026)**

This phase marks the campaign's active launch. Working from warm leads and AIKCU-identified prospects, we would:

- Deploy targeted email outreach
- Host virtual information sessions or roundtables
- Share success stories and member spotlights via digital channels
- Offer opportunities for direct consultation or follow-up conversations

Throughout this phase, we will monitor engagement metrics (e.g., opens, clicks, attendance) and adjust tactics as needed to maximize interest and participation.

**Phase 4: Momentum & Evaluation (Q4 2026 – Q2 2027)**

To maintain momentum and continue growing participation, we will:

- Re-engage institutions that expressed initial interest but have not yet joined
- Encourage peer referrals or warm introductions from current members
- Recommend that AIKCU evaluate and refine its onboarding process to reduce any friction that may prevent institutions from joining

- Deliver a progress report with campaign results, insights, and next-step recommendations

With a phased approach — beginning with warm leads and expanding into new market segments — we would set the goal of a 15–25% increase in Alliance participation over the 18-month period beginning January 1, 2026. The projected increase in Alliance participation is a conservative yet optimistic estimate based on standard campaign performance benchmarks for B2B engagement efforts in the nonprofit and education sectors. This range reflects anticipated growth from targeted outreach, improved awareness of the Alliance's value proposition, and a coordinated campaign strategy that leverages peer influence and direct consultation. Throughout the campaign, we will monitor engagement metrics, refine outreach tactics, and provide regular updates to AIKCU leadership to ensure alignment with strategic goals and sustained momentum.

**23. Should AIKCU elect to attract members from other states, is your firm appropriately licensed or can it be licensed as necessary to accommodate this type of expansion?**

Yes. Bim Group is licensed in multiple states throughout the US given the current footprint of our client base. When appropriate, we are willing to attain non-resident licenses in states where we need to provide services.

Current States Dustin Stacy is licensed in:

- California
- Georgia
- Indiana
- Kentucky
- Louisiana
- New York
- Ohio
- Tennessee
- Texas
- Virginia
- Wisconsin

Current States Bim Group is licensed in:

- Kentucky
- Indiana
- Tennessee
- West Virginia
- Ohio
- Texas
- Louisiana
- Wisconsin

**24. Please provide a narrative and your standard proposal for individual group employee benefit consulting services.**

Below we have included a summary of our Professional Services Offerings broken out by category, in addition to the examples of our work provided throughout the Exhibit section of this RFP response. Also included is a copy of our template consulting services agreement, see **Exhibit G**.

A. **Strategy & Innovation**

As previously stated in response to Question 4, benefit plan goals for AIKCU, the Alliance, and Alliance members will be achieved through our standards-based management system, which helps ensure tactical execution of both the immediate annual renewal process, as well as multi-year strategic initiatives. Reliance on this management approach is indispensable in effectively implementing the strategies identified during our custom planning process, as well as assisting our clients in realizing administrative efficiencies.

Our partnership with Milliman includes the use of the Comprehensive Health Assessment application, and Bim Group has developed a customized regional healthcare benchmark to allow AIKCU to view their plan relative to local competitors.

Detailed Services:

- Assist AIKCU in short- and long-term employee/retiree benefit strategic planning.
- Conduct trend analysis forecasts, project future level of reserves, and analyze the claims payment time lag pattern.
- Assist AIKCU in the development, implementation and ongoing management of an effective and measurable wellness program that will reduce health and welfare cost over the long term.
- Participate in management presentations involving benefit strategies and issues.
- Keep AIKCU informed about issues and changes in the benefits marketplace.
- Provide information regarding trends and benchmarks in the benefits field.
- Provide, maintain, and update comparison reports of other competitive benefit plan offerings and costs to determine their competitiveness to comparable programs as needed.
- Serve as a source of general expertise for various benefit issues AIKCU may encounter.
- Review and make recommendations regarding value-added benefit plans and programs, as well as modifications to the design, cost (rates), communications, and quality of current employee benefit plans, retiree plans and other related programs. In doing so, Bim Group will be expected to provide benchmark data from like companies including:
    - Plan design for all benefit programs
    - Cost sharing for all benefit programs
    - Cost per employee (in total)
    - Types of programs provided (insurer, TPA, flexible benefits, etc.)
    - Medical/dental trend factors
    - Employee benefit “preferences”
    - Balance employer and employee needs around choice, plan design and cost.

B. **Analytics**

Underwriting / Actuarial Services

As mentioned in response to Question 5, Bim Group employs a dedicated underwriting and analytics team, who in working with the Sr. Benefit Consultant and Account Executive, will provide AIKCU with monthly reporting, clinical claim analysis, plan modeling, benchmarking, budget development and reconciliation,

reserve estimates, and renewal budget projections. Our team maintains detailed historical claim files, records, and analyses through a Microsoft SQL server. The underwriting team routinely develops rates and tiering scenarios based on the client's desired structure. Analysis includes employee plan migration simulations and modeling potential rate changes.

The Bim Group analytics and underwriting team uses multiple actuarial resources but is primarily powered by Claros Analytics Actuarial Consulting Suite. This software utilizes a claims data set that has more than 14.1 million lives and $153 billion in billed charges. The data set is updated annually to capture and utilize the most recent healthcare trends. The size and richness of the database allow for the development of claim distributions reflecting 34 medical service categories, 8 pharmaceutical categories, and greater than 200 claim size ranges. Using actuarial software to model and normalize benefit design changes, combined with claim utilization repricing exercises, helps validate the effect of potential changes and cost savings opportunities. Our underwriters and analysts have developed robust plan modeling capabilities to retrospectively and prospectively model a multitude of alternative health care financing strategies. As referenced in "Strategy & Innovation", we partner with Milliman for actuarial and benchmarking services. When appropriate, Milliman is available to provide our team with a secondary opinion or to independently develop actuarial certified analyses.

Finally, our team regularly assists our clients with vendor procurement, negotiating with insurance carrier peers, assisting in the development and implementation of programs, and preparing financial and contract analysis of both medical and pharmacy options. Throughout our work, we maintain a focus on opportunities to curb costs and better position clients from a performance guarantee and contract perspective. Following implementation of the renewal plan, our team will continue to utilize the analysts and underwriters to provide monthly reporting in regard to budgets and claims.

Detailed Services:

- Provide actuary services as needed. Calculate and recommend appropriate premium rates, administrative fees, and self-funded plan liabilities to maintain the viability of the plans, ensuring quality and cost-effective benefits are provided by the plans.
- Provide actuarial cost of legislative proposals for mandated benefit programs as well as value-based modeling.
- Support independent actuarial medical repricing analysis.
- Analyze high-cost claimants.
- Validate rates needed to cover insured plan liabilities.
- Maintain full and accurate records with respect to all matters and services provided on behalf of AIKCU's benefit plans and programs. Provide AIKCU staff and/or Management all spreadsheets, assumptions, and calculations upon completion of any project performed on behalf of AIKCU's benefit plans and programs.
- Assist AIKCU by pricing and analyzing benefit change options; project effect of possible benefit changes on plan costs.
- Assist with the development, negotiation and implementation of health and welfare providers on various topics, including, but not limited to, premium rates, benefit levels, performance standards and guarantees, contractual terms and conditions, quality assurance standards, utilization and performance reports, statistical and/or financial reports, and where applicable, plan-specific data such as medical conditions, prescriptions drugs, high-cost procedures and in-patient data.
- Calculate self-funded plan reserve liabilities.
- Project effect of employee contribution and plan design changes on participation, migration, and renewal costs.
- Prepare composite or tier rated budget premiums and employee contributions.

- Prepare financial and contract analysis of pharmacy benefits and assist in Pharmacy benefits procurement, claim audits, and performance metrics.
- Analyze stop loss proposals, costs, and support negotiations as well as provide recommendations around setting stop loss deductibles.

Utilization Reporting

Together Bim Group's account management and analytics team will provide monthly financial reporting, clinical claim analysis, and year-to-date budget analysis. Our reporting is flexible in order to illustrate utilization by category, place-of-service, and Current Procedural Terminology (CPT) categories. This information is invaluable when fiscal responsibility is of utmost importance and positions AIKCU's leadership team to make informed decisions.

To further enhance our ability to provide AIKCU detailed reporting, Bim Group partners with Cedar Gate, a Population Health Management, Data Management, and Healthcare Analytics software company (See **Exhibit H**). Cedar Gate's software provides clients with meaningful insights to better manage and analyze the cost, care, provider quality, and risk of populations.

Cedar Gate can identify high quality, lower cost providers, track chronic conditions and their impact on population health, identify gaps in care, detect wasteful and unnecessary medical utilization, identify place of service and/or drug switch savings and measure effectiveness and Return on Investment (ROI) of medical management, wellness initiatives, or onsite clinics. Cedar Gate is capable of benchmarking cost and utilization on national, regional or industry data sets. Our use of predictive modeling software and risk mitigation strategies to manage the Plan's financial exposure plays an ongoing central role in our consultative approach. Programs such as these not only afford pronounced clarity regarding the impact of alternative benefit strategies on plan cost during the initial design phase but also enable the identification of rising risks that can be managed through intervention strategies supporting member level wellness and chronic disease-prevention initiatives.

Detailed Services:

- Provide detailed monthly financial dashboards and meet quarterly to review. Collect claims experience and participation data from vendors and AIKCU, to include the following data:
  - Premium or fixed costs, paid claims, and loss ratio of each line of coverage or subgroup level.
  - Experience categorized by type of participant, such as active employees, spouses and children;
  - Experience categorized by the type of service provided.
- Medical and dental reports, to include number of claims processed, number of eligible employees covered, cost per claim processed.
- Prepare financial exhibits that provide AIKCU with the information needed to make informed decisions regarding AIKCU's benefits plan designs and funding levels.
- Data warehousing of AIKCU's self-insured medical, pharmacy, dental, and vision claims data.

C. **Communications**

Bim Group places tremendous emphasis on employee communication, as evidenced by our investment in dedicated resources and staff (i.e., graphic designer/technology specialist in combination with our Communications Lead), who develop and produce all employee communication material in-house. Utilizing our communication discovery process, our service team will develop a strategic year-round communication

plan. The cornerstone of that plan will be extensive support during the renewal and open enrollment phase of the plan year. Our team provides on-site support for open enrollment presentations (and any special Committee meetings that require explanation/overview of benefit changes or new programs), as well as assistance in providing instruction and training on transmitting enrollment transactions to the carriers. We will partner with AIKCU to provide both employee materials for new hires and open enrollment as well as additional educational materials needed based on the strategic communication plan. We also understand and recognize that diverse demographic groups receive and process information differently; therefore, we utilize a variety of communication mediums in supporting employee communication.

Post open enrollment, an important component of our Communication and Engagement tools and resources includes a robust bank of debrief/post open enrollment questions and survey tools to enable us to assist in beginning planning for the following year. Your Account Executive would incorporate this survey plan into your 12-month strategic communication timeline.

Detailed Services:

- Assist with the entire open enrollment planning process each year, including, but not limited to, developing a timeline, assisting with the development of open enrollment materials and coordination and participation in open enrollment meetings. Assist in final review of open enrollment communications material.
- Provide assistance, technically and creatively, in the on-going development and preparation of various employee communication materials. Provide, annually, a comprehensive employee benefit overview (EBO) for all AIKCU employees/eligible dependents. Services also include new hire packets, payroll stuffers, and posters.
- Prepare open enrollment webinar hosting and/or recorded presentations with AI voice-over technology.
- Build and publish an Employee Benefit Center (web-based).
- Facilitate language translation services through strategic vendor partnership (additional fees may apply).
- Prepare and provide personalized Hidden Paycheck statements (i.e., Total Comp Statements).
- Analyze healthcare decision support tools for employees (additional fees may apply).

D. **Resources**

Administrative Support

Supporting the Human Resources staff is a top priority for the Bim Group account service team assigned to AIKCU, the Alliance, and its members. Demonstrating this begins in the strategic development phase, continues through the implementation phase, and culminates with ongoing support throughout the plan year. When we work with a client, the Human Resources department provides the directional compass for our group's efforts. Working in collaboration with Human Resources and Administration, Bim Group's team will ensure the successful development and implementation of the AIKCU employee benefit program. Our teams offer leadership and program support via our dedicated service representatives to minimize the workload on your Human Resources staff. Furthermore, this support extends to the individual employee, the HR team, and executive leadership. Bim Group welcomes the opportunity to review progress towards goals, as well as address unforeseen needs.

Bim Group acts as a liaison between AIKCU and insurance providers through our account management teams. Specifically, we provide dedicated Customer Service Concierges (CSCs) on-site and via telephone to help members with claims and billing resolution, coverage issues, wellness claim filings, and other general service-related issues. CSCs utilize our carrier concierge contacts with each carrier to advocate for our client's members. However, advocating for members must be done in a compliant manner, thus, when

required, all documentation (i.e., HIPAA release) is obtained prior to beginning to work on member claim issues. While the CSC and phone support staff are tasked with working directly with the plan's members, we elevate our support to ensure the Account Executive (AE) provides an additional level of oversight. AEs are made aware of and review claim concerns to ensure there is not a systemic issue within the plan.

Bim Group's experienced and knowledgeable service team is supplemented by tools such as our affiliation with United Benefit Advisors (UBA), Mineral (formerly ThinkHR), and HR Service. UBA is a national leader in consultative advice and technical resources. Mineral and HR Service are online services providing answers to many Human Resources questions covering all concepts in the industry. All of these services are encompassed within the service program we provide to clients. Please see **Exhibit I** for a full menu of our HR / Advocacy Resources.

Detailed Services:

- Provide day-to-day consultation on plan interpretation and problem resolution, including attendance at periodic meetings to facilitate and assist in the management of AIKCU's health and welfare program.
- Provider customer service and assistance to Plan Administrators of AIKCU, and employees with issues involving provider billing, advocacy for services, disputes, and interpretation of services, etc.
- Provide regular and timely communication of changes and proposed changes in Federal statutes and regulations that may impact the College's employee benefit plans and programs. In addition, provide recommended procedures and/or policies.
- Develop and/or assist in developing and evaluating employee needs and satisfaction surveys.
- Develop and/or assist in developing communication materials for dependent verification audits.
- Provide concierge services which include comparative patient quality care and cost analysis services for employees. These services include, but are not limited to:
    - Member care coordination
    - Member call center
    - Claims negotiation
    - Grievance advice
    - Coverage – benefit review
    - Pharmacy advocacy
- Provide guidance, analysis, and ongoing support of Benefit Administration Resources (e.g., electronic enrollment) through strategic partners (additional fees may apply).

Vendor Management

Three factors allow Bim Group to react with creativity, flexibility, and speed when working to resolve carrier/vendor issues: 1) we are a locally-owned independent firm, 2) we are recognized by national vendors due to our partnership with UBA, and 3) we maintain a substantial book of business with a multitude of vendors in Kentucky. Our clients represent a significant portion of managed premium for Anthem BCBS of Kentucky and United Healthcare, in addition to Aspirant and UMR. The platinum level status with major medical and ancillary (e.g., dental, vision, life and disability) carriers affords us market leverage, which is essential not only for negotiations but also for service-related issues. Both on a local and national basis, our firm has access to proprietary pricing and contractual feature guarantees through many insurance carriers, including health, reinsurance, life and disability, and other ancillary contracts. This level of influence affords the opportunity to be creative in leveraging risk for our clients, but our services extend beyond negotiation.

Our Account Service team leads the vendor procurement process, analyzing proposals and plan documents, and helping to ensure continuity and accuracy when vendor changes occur. Our team also aggregates and

analyzes the performance guarantees offered by vendors and carriers. Upon completion of the renewal process, our Account Service team monitors issues and provides oversight of the selected vendor throughout the plan year. Bim Group's Client Service team is specifically tasked to work with AIKCU's plan participants to help navigate a variety of challenges. When issues arise with vendors or carriers, our team takes the lead in resolving the problems.

Detailed Services:

- Provide support in the day-to-day management of vendors and resolve administrative issues; assist with claims and billing issues as requested and conduct periodic meetings as necessary.
- Conduct an RFP process at least every three years to identify a third-party administrator for AIKCU's self-insured health plan, including enrollment, claims handling, payment, billing and COBRA administration of active employees and retirees.
- Annually conduct a comprehensive stop loss RFP.
- Utilizing reverse auction technology for ancillary market RFPs (powered through Nelligan-IBX), facilitate an RFP of AIKCU's plan at least every three years.
- Provide an in-depth analysis and scoring of all RFPs, including an executive summary overview.
- As directed, negotiate all insurance vendor contracts, services, and renewals with vendors, including meeting directly with insurance company underwriters.
- Create performance guarantees for all insurance carriers providing services to AIKCU.
- Analyze insurance proposal criteria, review all insurance, benefit and administrative service documents for accuracy and adherence to prior agreements, and manage carrier/vendor relationships.
- Review contracts and SPDs with providers for accuracy in rates, benefits, eligibility, and coverage definitions.
- Assist HR staff and/or oversee vendor implementation process.
- Facilitate selection of COBRA/FSA/SEC 125 vendors to support the overall health & welfare plan.
- Assist with managing life and disability programs.
- Review carrier service levels and compare performance guarantees;
- Resolve problems regarding vendors' services and performance.
- Provide carrier administration training and website support.

E. **Health & Wellness**

Health improvement and wellness programs can take many forms depending on each client's goals and objectives. Wellness strategies can be as simple as participatory efforts or as extensive as health outcome-based programs linked to employee contribution rates. Factors to consider include the size of the group, current initiatives, available resources, compliance limitations, and desired outcomes. In creating the preferred wellness program or population health improvement strategy, we suggest helping members engage with providers to support preventive care and chronic disease management to impact plan costs. Engaging members in preventive medicine initiatives that focus not exclusively on decreasing plan cost, but also improving the member's individual health is essential to changing the member mindset regarding benefit plan utilization and wellness. For example, our communication efforts focus on how early detection of disease can reduce the degree of disruption to the member's daily life and can also directly impact the annual budget through potential mitigation of high-cost claims.

To support employers, we utilize many elements to develop programs, including but not limited to current utilization data, plan design, steerage opportunities, and overall goals for the program. Our team supports the program through the collaborative efforts of the assigned consultant, analyst, compliance consultant, wellness team lead, service team members and when applicable external vendors.

Detailed Services:

- Facilitate on-site wellness lunch and learns.
- Conduct wellness plan program research, solicitations, recommendations, and presentation of recommendations.
- Help facilitate wellness committee meetings and provide Executive Leadership Talking Points.
- Support metric-based participation risk factor reduction and ROI reporting.
- Coordination of biometric screenings through health fairs using strategic partners (additional fees may apply).
- Conduct on-site clinic analysis, manage the RFP process, and facilitate implementation, along with ongoing support and management of the program.
- Analyze disease management clinical intervention services, manage the RFP process, and facilitate implementation, along with ongoing support and management of the program.

F. **Compliance**

As indicated in response to Question 20, with the myriad of regulations which govern employee benefit plans (ERISA, IRS, EEOC, ACA, and more), it is necessary for these plans to be compliant with a wide array of regulations. Therefore, AIKCU will have access to a dedicated resource through our Compliance Consultant, Lauren Johnson, who is supported by an ERISA attorney, Tabatha George of The Benefits Practice. Below is a detailed list of Compliance-related services that we offer.

Detailed Services:

- Provide updates on pertinent proposed and enacted benefits legislation, including Patient Protection and Affordable Care Act (PPACA).
- Monitor emerging trends and insurers/vendors financial status.
- Provide research and professional advice on new developments in benefits law and programs both state and federal, making sure AIKCU is always current on any new developments and/or requirements relative to legally administering its benefits plans, (i.e., Public Health Service Act, HIPAA, COBRA, etc.).
- Assist in COBRA, HIPAA, and PPACA compliance, including review and preparation of SPDs and Plan Documents.
- Review pertinent contracts and other legal documents to ensure they accurately reflect negotiated benefits, services, and terms.
- Provide support in the preparation of reports and senior management presentations.
- Offer an HR Compliance Tool for notices and wrap documents.
- Facilitate Monthly UBA Webinar Series for various compliance related topics.
- Conduct a Risk Analysis for DOL audit readiness.
- Provide Compliance/Legislative Alerts (bi-monthly) on a regularly scheduled basis.
- Facilitate ACA Reporting Resources through strategic partnerships (6055/6056) (additional fees apply).
- File form 5500 ERISA filing annually.
- Assist in filing Prescription Drug Data Filing (RxDC) and/or PCORI for self-funded clients (as applicable).
- Provide Fiduciary guidance around best practices to manage ERISA based plans.
- Facilitate HIPAA Compliance Guidance, Policy Establishment, Resources, and Training through strategic partnership (additional fees apply).
- Conduct 105(h) Nondiscrimination Testing and provide feedback around corrective strategies.
- Facilitate NQTL assessments through strategic partnerships (additional fees apply).

25. **Please provide copies of your professional liability insurance coverage.**

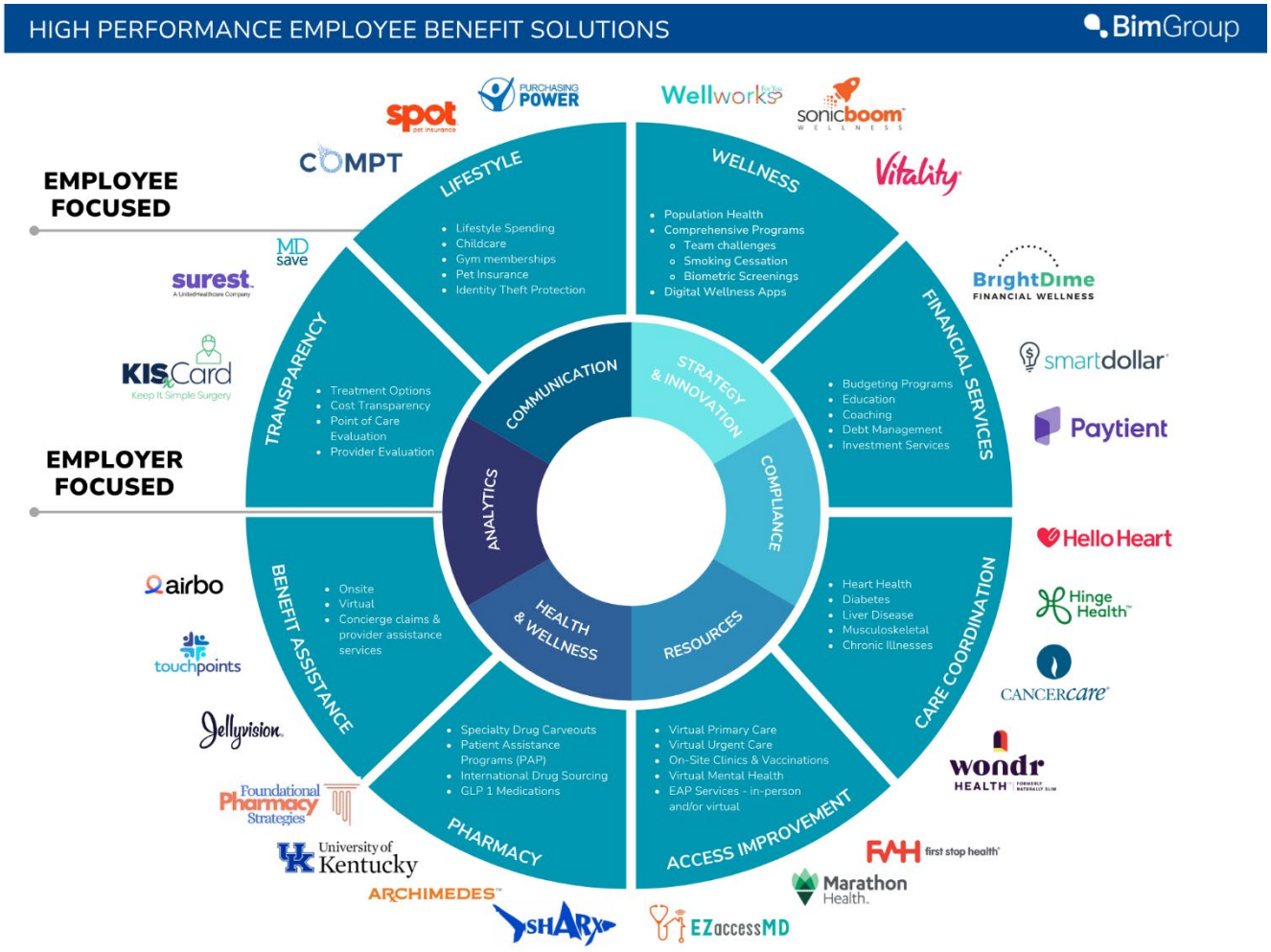
    Please see **Exhibit J**.

26. **Please provide any additional information or narrative you would like considered regarding consulting services offered by your firm.**

    Bim Group strives to help our clients achieve what they would want if they knew the possibilities! Accomplishment of this goal begins by reimagining what it means to deliver a high-performing employee benefit program for both the sponsoring entity as well as its employees/members. The first graphic below illustrates the key business levers Bim Group uses to influence the performance, cost, and experience of an employee benefit plan. Each lever represents a critical area of focus—ranging from plan administration to risk management—that can be adjusted to meet client-specific goals. By aligning these levers with both HR and financial priorities, we help our clients design sustainable, high-impact benefit strategies. Our team has also developed a suite of resources and point solutions to support the end users within eight (8) categories detailed in the second **graphic** included below. Not only does this approach produce a more holistic employee benefit program, it also creates a level of transparency and cost strategies to help ensure long-term fiscal responsibility.

    **Plan Levers**




HIGH PERFORMANCE EMPLOYEE BENEFIT SOLUTIONS
BimGroup
EMPLOYEE FOCUSED
EMPLOYER FOCUSED
LIFESTYLE
Lifestyle Spending
Childcare
Gym memberships
Pet Insurance
Identity Theft Protection
WELLNESS
Population Health
Comprehensive Programs
Team challenges
Smoking Cessation
Biometric Screenings
Digital Wellness Apps
FINANCIAL SERVICES
Budgeting Programs
Education
Coaching
Debt Management
Investment Services
CARE COORDINATION
Heart Health
Diabetes
Liver Disease
Musculoskeletal
Chronic Illnesses
ACCESS IMPROVEMENT
Virtual Primary Care
Virtual Urgent Care
On-Site Clinics & Vaccinations
Virtual Mental Health
EAP Services - in-person and/or virtual
PHARMACY
Specialty Drug Carveouts
Patient Assistance Programs (PAP)
International Drug Sourcing
GLP 1 Medications
BENEFIT ASSISTANCE
Onsite
Virtual
Concierge claims & provider assistance services
TRANSPARENCY
Treatment Options
Cost Transparency
Point of Care Evaluation
Provider Evaluation
COMMUNICATION
STRATEGY & INNOVATION
COMPLIANCE
RESOURCES
HEALTH & WELLNESS
ANALYTICS
spot
PURCHASING POWER
Wellworks
sonicboom
COMPT
Vitality
MD save
surest
BrightDime
FINANCIAL WELLNESS
KISCard
smartdollar
Paytient
Hello Heart
airbo
Hinge Health
touchpoints
CANCERcare
Jellyvision
wondr HEALTH
Foundational Pharmacy Strategies
first stop health
University of Kentucky
Marathon Health
ARCHIMEDES
SHARX
EZaccessMD