05-14-117

RECEIVED	
CONTRACT MANAGEMENT	(Contract Management Use only)
2015 JAN 13 PM 3: 58	CONTRACT TRACKING NO.
CONTRACTOR INFORMATION Name: MedCom	Cm2214
Address: Unknown	
Contractor's Administrator Name: Nate Geisenburg	
Tel#: 904-596-2227 Fax: Email: ngeisenburge	@medcom.net
CONTRACT INFORMATION	
Contract Name: Cafeteria Plan Compliance Services	ue: Est. \$996.00
Brief Description: Review of NC Cafeteria plan to ensure comp	
Contract Dates : From: Completion of Project Status: New Renew	Amend# WA/Task Order
How Procured: Sole Source Single Source ITB RFP C Co	op. Other Professional Services
If Processing an Amendment:	
Contract #: Increase Amount of Existing Contract:	No Increase
New Contract Dates: to TOTAL OR AMENDMENT AMO	DUNT:
APPROVALS PURSUANT TO NASSAU COUNTY PURCHASING P 1	13-53100 E
COUNTY MANAGER ? FINAL SIGNATURE APPRO)VAL
Ted Selby 1/2 G/1 Date	<u> </u>
RETURN ORIGINAL(S) TO CONTRACT MANAGEMENT FOR DISTRIBUTION AS Original; Clerk's Services; Contractor (original or certified copy Copy: Department Office of Management & Budget Contract Management Clerk Finance	

Compliance Services PROPOSAL

Presented to



January 20, 2015

Presented by



In partnership with



About Medcom

Medcom is a leading employee benefit administrator and provider of health and welfare compliance consulting and actuarial services. With a professional staff of employee benefit professionals, Medcom supports larger employers in meeting the more complex challenges of a demanding workplace. Founded in 1983, Medcom offers a wide range of services that are available as a full suite of services or on a service by service basis.

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Comprehensive Compliance Review

Federal regulations have taken on a life of their own. Busy employers are constantly challenged with incorporating, managing, reporting and updating in accordance with regulations such as ERISA, COBRA, HIPAA and PPACA. Medcom provides a comprehensive compliance review to enable employers to evaluate their health and welfare programs.

The Comprehensive Compliance Review consists of a broad analysis of employer sponsored health and welfare benefit plans. Medcom's comprehensive review examines all medical, dental, vision and other health and welfare plans, along with an analysis of HIPAA portability, privacy and security, enrollment materials, notices, and related documentation.

Our regulatory compliance specialists examine the plan documentation of the health and welfare benefit programs currently in place and recommend all appropriate revisions to ensure full compliance for the employer. Medcom provides the employer with a comprehensive report, including specific recommendations for resolving any areas which are not fully compliant with federal guidelines.

Medcom's Final Report Includes:

- ✓ Summary of Findings
- ✓ List of Key Action Items
- ✓ Detailed Review Notes for Each Area Evaluated
- ✓ List of Applicable Laws with which the Employer Must Comply and Consequences of Non-Compliance
- ✓ List of Affordable Care Act Compliance Obligations, Including Effective Dates and Employer's Current Compliance Status
- ✓ List of required notices and distribution instructions



Non-ERISA Wrap Plans for Public Entities

State and local governments, public school systems, and other public entities are generally not subject to ERISA. However, these groups frequently find that a Wrap Plan Document is needed to complete their benefits package. The most common uses of the Wrap Plan by public entities are as follows:

- The Wrap Plan may be used to help employees understand the eligibility, termination and leave of absence provisions for their health & welfare plans. These important features are summarized within a Wrap Plan for the convenience of the employee and employer.
- Carriers sometimes use ambiguous or vague verbiage to describe eligibility for benefits. The use
 of a properly written Wrap Plan Document provides assurance to the Employer that the
 eligibility and termination provisions are accurately documented. As a result of the Affordable
 Care Act shared responsibility provisions, some carriers are less likely to provide factual
 eligibility information in their documents. The public entity will need clear documentation
 showing which employees are and are not covered by the plan.
- When describing leave of absence provisions, most carriers and claims administrators will use standard language in their plan documents. This language is often inconsistent with the policies followed by a public entity. If multiple benefit plans are offered, the leave of absence provisions may be different and/or contradictory, making them difficult to apply in real life situations. A Wrap Plan Document may be used to supersede the existing verbiage to reflect the public entity's actual practices.
- The Public Health Services Act and HIPAA require certain notices and disclosures, which may be included in the Wrap Plan.
- HIPAA requires health plans to include specific provisions in their plan documents. This language
 is not included in most plan documents obtained from carriers or administrators. The Wrap Plan
 may include information required by HIPAA privacy rules for any public entity health & welfare
 plan that is self-funded or otherwise has access to protected health information.
- The Wrap Plan may be used to document the public entity's use of medical loss ratio rebates.



Nondiscrimination Testing

In order to maintain full tax deductible status for both the Plan and its participants, plans must satisfy nondiscrimination requirements as established in the Internal Revenue Code.

Medcom provides comprehensive annual nondiscrimination testing for Section 125 Cafeteria Plans (inclusive of POP and health FSA), Section 129 Dependent Care Assistance Plans, and Section 105(h) Plans that are either self-funded or fully insured. Medcom generally recommends that a preliminary annual test take place mid-year to allow for any adjustments, if necessary, and to avoid any tax sensitive issues that may result from end-of-year testing. Medcom provides the employer with a detailed report card that fully summarizes the results for each required test and offers workable solutions for any areas in which the plan is not compliant.

HIPAA Privacy Policy

Medcom's HIPAA Privacy Package is designed to guide the employer into full compliance with HIPAA-HITECH privacy rules and includes the following customized documents:

- Privacy Checklist this checklist lists all of the documentation that is required under the HIPAA privacy regulations, along with a description of how and when each should be used.
- Privacy Policy and Procedures the Privacy Policy and Procedures template describes the employer's policies relating to protected health information that the employer (or a vendor hired by the employer) has access to in connection with the health plans. It also includes procedures for implementing these policies.
- Notice of Privacy Practices this notice is customized for the employer based on the benefits that are offered by the employer and whether they are insured or self-funded.
- Business Associate Agreement template this template can be used by the employer for any business associates or vendors who have access to protected health information relating to the health plans.
- Privacy Complaint Form this form is used if a plan participant wants to complain about the employer's privacy practices relating to the group health plans.
- Privacy Complaint Log the employer is required to log all complaints about its privacy practices.
- Record Request Form if a plan participant requests a copy of the health information maintained by the employer, this form would be provided to request that information.
- Record Request Log the employer is required to log all requests for record review.
- PHI Disclosure Log this log should be used to record all PHI disclosures.
- Authorization Form generally, the employer would use the carrier's or provider's authorization. This form is made available for situations in which another form is not appropriate, but authorization is required.
- Privacy Official Job Description wording this is the wording that must be included in the Privacy Official's job description.
- Training Log and Checklist The log and checklist can be used to train and record the training for any employees who have access to PHI on behalf of the health plan.



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Proposed Services & Fees

Medcom will provide Compliance Services for Nassau County BOCC.

Description of Services:

	PROJECTED GRAND TOTAL	TBD*
Comprehensive Review of Cafeteria Plan	х	\$249.00 / hr. (max 4 hrs.)
HIPAA Privacy Policy		
Nondiscrimination Testing		
"All-Inclusive"		
"Stand-Alone" – Custom, Non-ERISA		
Wrap Plan Document Preparation		
5,000 or more Employees		
500 to 4,999 Employees	D	
Less than 500 Employees		
Comprehensive Compliance Review		

*Total fee will not exceed \$996.00 without prior authorization.



Proposed Service Agreement

Reliance on Information Provided To Us

In order to perform the services described, Medcom depends on information provided by your company. We will not validate the information provided other than to review it for consistency and reasonableness. As the ability to perform these services depends on the information provided by you, Medcom will not perform such services if all required information cannot be obtained.

Data Requirements – Medcom will provide forms and instructions for the collection of the necessary data. All data must be submitted via email or secure file transfer using these forms.

Consulting Fees

The fees for these services are listed above. If unforeseen complexities arise, or additional work is requested, additional fees will be addressed at that time. An invoice for services will be provided upon completion of the work.

All fees are due within 45 days after the invoice date.

Limitation of Scope of Agreement

This agreement, the services to be provided under it and fees to be paid as a result of it, applies only to the work described in the Description of Services. All services provided under this agreement are to be used by your company as it sees fit. Medcom, its employees, and any persons performing work for delivery of these services are not liable for any damages arising from misuse of provided services.

Confidentiality

Your company, Medcom, and employees of both companies agree that any confidential information received from the other party shall only be used for the purposes of providing or receiving services under this or any other contract between the two companies.

Proposed Service Agreement

Payment of Fees

a. Employer Payment

Nassau County BOCC	Tina Keiter	tkeiter@	<u>tkeiter@nassaucountyfl.com</u> <i>Email Address</i>	
Name of Employer	Contact Person	Email Address		
96135 Nassau Place, Suite 5	Yulee	${f FL}$	32097	
Address	City	State	Zip	

D Employer agrees that it is responsible to pay Medcom according to the terms of this Agreement. Payment is due within 45 days from the invoice date.

Signature

1/26/15 Date 904-530-6010 Phone Number

Ted Selby Printed Name

Manager County_

Thank you for considering this proposal. We look forward to working with you.



Contact:

Toll Free Phone: 1 (866) 961-8628 Email: MedcomCompliance@medcom.net

> PO Box 10269 Jacksonville, FL 32247-0269

