

CBIZ Consulting Services Proposal Response to Follow Up Questions

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AngioDynamics, Inc.

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Presented By:

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CBIZ Consulting Services Proposal

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SECTION 1

Benefits and Insurance Services, Inc.

CBIZ Consulting Services Proposal

Response to Follow-up Questions

1. Please outline a project plan for implementation of takeover data and rollout for Open Enrollment (key deliverable, timeline, and owners of who is involved at each touch point).

CBIZ has provided timeline¹ documentation for these actions. See Exhibit 1 for this information.

2. Given the account team selected, how many of your clients will be in the midst of / entering into Open Enrollment during the months that would surround the AngioDynamics implementation timeframe?

The majority of the clients will have completed open enrollment activities by the time CBIZ and AngioDynamics starts to work as a team on implementation. None will be entering open enrollment activities. There will be a handful that are still in open enrollment but they will be completing this within 2-4 weeks. This assumes that AngioDynamics will make a decision by the end of October and the relationship will initiate early in November.

3. What is your recommended enrollment platform for AngioDynamics? What other Benefits Enrollment & Management Systems do you recommend or work with?

There are a number of enrollment platforms and firms that potentially will work well with AngioDynamics. We will want to have detailed discussions with certain vendors on behalf of AngioDynamics for a final vetting process. At this time CBIZ feels that Web Benefits Design will be the recommended enrollment and data management system that pairs best with AngioDynamics. We also feel that Benefitfocus and Hodges-Mace have proven themselves on larger self-funded clients for CBIZ. All charges and fees for these firms are outside the scope of the CBIZ proposal.

Web Benefits Design (WBD) is a single-source Benefits Administration system that intelligently blends communication, compliance, technology and benefits administration into one solution.

One of the features that makes this solution so unique is that WBD offers technology plus à la carte services that the employer can delegate to WBD, as an additional resource, for many aspects of benefits administration. In support of these services, the corporate culture of WBD is comprised of employees with technology and employee benefits expertise, many of whom have a background in health insurance, human resources, IT or payroll.

Another attractive attribute is WBD's dedicated service model. An Account Management team is assigned to become experts in the organization's benefits, internal dynamics, employee population, and administrative intricacies to provide best-in-class service for the life of the system.

WBD offers a unique, proprietary platform that an employer cannot outgrow and is a seamless extension of the HR department and its daily functions.

¹ Timeline

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WBD Core services include:

- Custom benefits website
- Online enrollment / employee self-service
- Benefits administration system
- Carrier and payroll connectivity
- Customized billing and reports
- Telephonic enrollment / Call Center
- COBRA administration
- ACA reporting and E-filing
- Variable hours tracking
- Discrepancy report management
- Dependent documentation
- Evidence of Insurability (EOI) management
- New hire management
- Wellness program administration
- Tuition reimbursement
- Single Sign On (SSO)
- Mailing and fulfillment
- And, many more...

See Exhibit 2 for the implementation timeline² for WBD.

4. Knowing that AngioDynamics is looking to offer additional health plan options and change contribution strategy, what benefits platform do you recommend?

Communication and engagement are key elements when changing or offering new benefits options. This is even more important when changes in a contribution strategy are being made. The aforementioned enrollment platforms come with built in communication tools to help employees and spouses make the right choices. Web Benefits Design, if chosen, would be the first platform we would look at. Another choice would be a standalone decision support tool. Finally, BlueShield of Northeastern New York has tools that are appropriate depending on your goals and expectations.

The WBD system is highly configurable, based on a variety of employee demographics, classifications, locations, and employer-specific rules and logic. WBD can incorporate multiple products and multiple carriers, as well as setup worksite and wellness programs with third-party vendors. Multiple FEINs can be effectively handled by designating employees into classifications, which determine their benefits offerings and eligibility. WBD integrates with any carrier, payroll system, and third-party vendor for a reliable, automated data exchange—ensuring the integrity between systems is maintained and employee eligibility and pay deductions are consistently accurate.

WBD can accommodate a myriad of complexities and benefit nuances including:

- Multiple Locations
- Union / Non-union
- Pre / Post tax rates
- Rates based on salary tier
- Rates based on age, gender, and tobacco usage
- Different eligibility rules (benefit start dates, waiting periods)
- Different EOI rules based on employee classifications / new hires / QLEs / dependents
- Different EOI rules for voluntary products
- Minimums and maximums
- Dollar increments with multiple of salary maximums

² WBD Implementation Timeline

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- Increments of a certain dollar amount (usually \$5K or \$10K)
- Multiples plan options
- Product contingencies / Knock-out questions
- Statutory STD variances
- Rates, surcharges, or plan eligibility based on participation in a wellness, biometric screening, or incentive program

See Exhibit 3 for an overview of Web Benefits Design³.

5. Can you support an exchange-model enrollment platform with a defined contribution plan design?

Yes. Web Benefit Design can seamlessly accommodate defined contribution models, which can be based on many factors. The system can be configured to display unique contributions, including but not limited to: salary banded, percentage of salary, defined contribution and years of service. For example, an employee does not elect in one benefit but can use the flex dollars for other benefits such as worksite, FSA, and HSA.

6. How can you assist AngioDynamics in lowering benefit costs while maintaining competitive benefits by industry and geography and retaining employee approval?

This is a question that touches on several areas. We would accomplish this by first delivering rock-solid consulting advice and keeping AngioDynamics in compliance with all applicable laws and regulations. An in-depth strategy session to begin our partnership will allow CBIZ to understand AngioDynamics and know you better. Once we have a certain level of knowledge on your culture, senior leadership, mission, goals and expectations, we can begin to develop a strategy and pathway to accomplish the cost reduction.

One of the tools we use is benchmarking data. Where are you in relation to the industry? Norms? Where do you want to be? We compare the benchmark data to your current cost structure and plan designs and provide a gap analysis. We then create a plan to bridge this gap and move the programs towards the desired outcomes. This metric allows us to make changes and maintain a competitive benefits program.

A major resource that CBIZ will deliver is our Wellbeing Consulting Practice. Your Wellbeing Team has two consultants in a core capacity or role. Angie Schmidt, which you met in Minneapolis, and Susan Trogu from our New Jersey office. For self-funded clients these wellbeing programs are critical. The Wellbeing Team will audit and review your current programs; the Thrive Wellness program and the wellness services from Blue Shield of Northeastern New York. The right program and vendor needs to be in place to be effective. We will work to engage your employees and dependents with communication programs, activities, participation and outcomes based approaches and help them to move to a better health status. A person's health is the most important aspect of their life.

CBIZ has several unique partnerships in this Wellbeing space. One is a relationship with Tom Rath, the author of "Wellbeing: The Five Essential Elements". CBIZ is using his Fully Charged Managers curriculum to change

³ WBD Overview

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cultures in the workplace via key employees, the manager. We also are working with Dr. Dee Edington and Dr. Jerry Wagner to bring Wellbeing initiatives to the workplace. These drive down cost and improve retention.

Another resource CBIZ will use is our data analytical tools. The level of detail and analysis using NavigatorMD or Vescend is amazing. These tools find out the underlying diseases and cost drivers in your population. By discovering the cost drivers and diseases we will be able to provide the right programs to address these issues and reduce costs. Diabetes, asthma, orthopedic claims, whatever the major cost drivers are, will become apparent with these analytical tools. We then work with Blue Shield of Northeastern New York for Case Management and Disease Management. We also work with your Wellness vendor to apply the communication and engagement tools to get the affected members engaged in getting healthier and making the right choices. We can then track progress on changes and efficacy of these programs.

Another tool is a transparency engine. This allows the employee to search for the right facility or health care practitioner using cost and quality measures. But how to engage the employee to make the right decisions? We use partners that have incentive based consumer advocacy tools. When the correct provider is chosen there are savings involved. The employee is paid a part of the savings which provides a meaningful financial incentive and increases participation. You enjoy plan savings and cost reductions and the employee visits the high quality-low cost provider which lowers their out-of-pocket expense, increases their satisfaction for their patient experience and also pays them a portion of the savings.

7. Help us understand how data will be used to drive targeted (PHI-secure) marketing campaigns to drive employee engagement and decrease costs?

The data tools that CBIZ utilizes are described in the above response. Also utilized for this type of program are the data analytical tools of the insurance carrier. Blue Insight is used by Blue Shield of Northeastern New York. The first tool we look at is the insurance carriers, the reason is that the data is flowing through their systems and they are currently working with this data to engage their disease management and case management personnel. They have these programs embedded into their service delivery model and may have an efficient and effective model in place. These systems handle PHI-secure data.

In talking with Blue Shield of Northeastern New York, they have these programs in place right now and are delivering communications and services to engage employees in managing their disease states. We will need to spend some time with Blue Shield and review their current programs, metrics on engagement, their methods, communication vehicles and more.

The data analytic tools that CBIZ employs do not allow for use of PHI secure data for this type of marketing campaign. Brokers and consultants do not normally handle PHI data in this manner. However, the carriers and vendors handle this type of data. In Exhibit 4 we have included a number of employee communication materials⁴ as samples of the types of programs CBIZ works with.

⁴ Employee Communication Materials



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- a. Please describe your marketing capabilities and provide a sample of content you have developed for other clients.

Exhibit 4.

8. Please describe your use of data and technology to drive decision making and strategic planning, and provide a recommended approach to a 3 year strategy to achieve AngioDynamics objectives, in order to:
 - a. Reduce benefit spend from 40% to 30% of total compensation (include a detailed financial model for Y1, Y2, and Y3)
 - b. Provide enhanced choice/flexibility for AngioDynamics employees and their dependents
 - c. Offer technology that can grow with AngioDynamics

The CBIZ recommended approach to a multi-year strategy starts early with a strategic partnership.

Strategic Partnership

CBIZ's collaborative and strategic approach fosters a true partnership between CBIZ professionals and AngioDynamics. Our focus is to help you strategically align your employee benefit offerings with organizational goals and legislative mandates, obtain the best pricing, manage compliance liability, and maximize employee satisfaction.

At CBIZ, we believe that strategy is everything. Employee benefits are a substantial investment that affects multiple facets of your business, from organization morale and employee retention to administrative efficiency and your bottom line. That's why CBIZ begins each engagement with benefit and human resources objective setting, to ensure that your benefit initiatives support your organization's business and financial goals.

Setting Short-Term and Long-Term Objectives

Together, we will explore AngioDynamics':

- Organizational and business objectives;
- Financial objectives and budget constraints;
- Total compensation and benefits philosophy;
- Employee demographics and expectations; and
- Senior management concerns and human resources initiatives.

During our planning sessions, we listen, ask questions, and provide insights. The outcomes are well-defined goals and objectives for benefits in the coming year and beyond. Rather than supply "off-the-shelf" solutions, we collaborate with you to develop a customized action plan.



CBIZ Consulting Services Proposal

CBIZ's collaborative and strategic approach fosters a true partnership between your CBIZ Team and AngioDynamics. Our focus is to help you:

- Strategically plan your employee benefits offerings;
- Obtain the best pricing;
- Manage compliance liability;
- Increase employee understanding and appreciation of the benefits provided;
- Reduce your administrative burden; and
- Improve employee retention

The above strategy setting methodology is combined with data from several sources. This includes Blue Shield, the CBIZ analytical tools (NavigatorMD and Verscend), the wellness vendor's data and the benefits platform.

See Exhibit 5 for an illustrative strategic financial model for years 1 through 3⁵.

Technology is critical to growing with AngioDynamics and maintaining a competitive benefits program. Part of what we touched on in the answer to question 3 above was this ability to grow with the client. "WBD offers a unique, proprietary platform that an employer cannot outgrow and is a seamless extension of the HR department and its daily functions."

9. Please provide a 3 year performance and service fee guarantee based on achieving desired benefits outcomes and service deliverables.

CBIZ normally negotiates performance guarantees on your behalf with the medical insurance carrier. We have attached a sample TPA performance guarantee⁶ in Exhibit 6.

CBIZ will put our fees at risk in a performance guarantee as well. Our performance guarantee is set at 5% of annual fees. If we fail to provide service at acceptable levels in any one year, we will reduce our fee by 5% in the following year. The scorecard will be a subjective style rating by AngioDynamics.

a. What sort of combined discount would be available for Property/Casualty PLUS Employee Benefits?

CBIZ Benefits has quoted a range in our pricing to be firmed up after final discussions on the scope of services and travel requirements. We will provide final pricing and then also apply a discount of \$7,500 if both Benefits and Property & Casualty are chosen.

⁵ Strategic Financial Model Y1-Y3

⁶ Sample TPA Performance Guarantee



EXHIBITS





EXHIBIT 1

Timeline



SELF-INSURED MEDICAL

No.	Completed	Event	Responsible Party	Due Date
1		Broker of Record Letters	AngioDynamics	November 2017
2		Partnership Kickoff Meeting	AngioDynamics & CBIZ	November 2017
3		Initial Strategy Meeting	CBIZ and AngioDynamics	November 2017
4		Benefit Risk Analysis	CBIZ	November - December 2017
5		Operational Plan Review	CBIZ	November - December 2017
6		Pre-renewal and communication planning, strategy and review	CBIZ & AngioDynamics	December 2017
7		Receive renewal	BSNENY	December 2017 - January 2018
8		Underwriting and Actuarial review and funding rate setting	CBIZ	December 2017 - January 2018
9		Marketplace review if necessary	CBIZ	December 2017 - January 2018
10		Analyze online enrollment needs, review and pick online enrollment platform	CBIZ & AngioDynamics	December 2017
11		Finalize renewal, contribution strategy and communication plans	CBIZ and AngioDynamics	January 2018
12		Communication materials and methods finalized and approved	CBIZ & AngioDynamics	January 2018
13		Compliance final review and deliver required notices packet	CBIZ	January 2018
14		Communication program begins	CBIZ and AngioDynamics	January 2018
15		Annual enrollment process	CBIZ, AngioDynamics & Enrollment Vendor	February 2018

No.	Completed	Event	Responsible Party	Due Date
16		Enrollment to carriers	Enrollment vendor	March 2018
17		Renewal Date		April 2018



EXHIBIT 2

WBD Implementation Timeline



Medical Device Company - Albany N Sales Timeline



Stages of Client Development	Due Date	Owner	Status
Go-Live Desired WBD system launch for employee access.	Thursday, February 15, 2018	Web Benefits Design	
Kick-off conference call <i>Introduction with Web Benefits Design implementation and specialty teams. Templates shared for needed deliverables.</i>	Friday, December 29, 2017	Web Benefits Design	
Plan Docs (Summaries, SPDs, etc.) <i>Broker/Client provide benefit summaries, SPD's, and information necessary to build website portal.</i>	Monday, January 8, 2018	CBIZ Medical Device Company - Albany NY	
Implementation Worksheet <i>Broker/Client provide completed implementation worksheet to WBD for system build rules</i>	Wednesday, January 10, 2018	CBIZ Medical Device Company - Albany NY	
Online Enrollment System Build Out <i>WBD designs, builds and programs the online enrollment portal with specific logic and rules.</i>	Thursday, January 11, 2018	Web Benefits Design	
Communications Website Build Out <i>WBD needs as much as 7-10 days from receipt of Plan Docs to build and test website portal.</i>	Monday, January 15, 2018	Web Benefits Design	
Website Testing <i>WBD provides access to Broker/Client for website review and content testing.</i>	Thursday, January 18, 2018	CBIZ Medical Device Company - Albany NY	
Website Feedback <i>Client provides feedback and revisions to WBD for website portal.</i>	Tuesday, January 23, 2018	Medical Device Company - Albany NY	
Census Data <i>Client provides WBD with completed census template for population into the platform.</i>	Thursday, February 1, 2018	Medical Device Company - Albany NY	
Online Enrollment System Testing <i>WBD internal testing teams validate rules-based logic in accordance with Implementation Worksheet.</i>	Friday, February 2, 2018	Web Benefits Design	
Online Enrollment Testing <i>WBD provides access to Broker/Client for testing of the online enrollment portal.</i>	Tuesday, February 6, 2018	CBIZ Medical Device Company - Albany NY	
Census Data Conversion <i>WBD validates data, turns QA process for compatibility and integration into system and provides feedback to Client.</i>	Tuesday, February 6, 2018	Web Benefits Design	
Census Data Corrections <i>WBD solicits input from Client on any needed revisions or potential concerns with data. Client returns to WBD.</i>	Wednesday, February 7, 2018	Medical Device Company - Albany NY	
Online Enrollment Feedback <i>Client provides feedback and revisions to WBD to fine-tune the employee experience, verifying accuracy.</i>	Thursday, February 8, 2018	Medical Device Company - Albany NY	
Census Data Load <i>WBD prepares and loads final census file.</i>	Thursday, February 8, 2018	Web Benefits Design	
Employee-Experience Final Testing <i>WBD rolls out final website & online enrollment platform to Client for validation of revisions.</i>	Friday, February 9, 2018	Web Benefits Design	
Census File Authorization <i>WBD provides Client access to data in platform and authorization form as receipt for data.</i>	Monday, February 12, 2018	Medical Device Company - Albany NY	
Online Enrollment Authorization <i>WBD provides Client access to finalized system and authorization form as receipt for system build.</i>	Monday, February 12, 2018	Medical Device Company - Albany NY	
Administrator Training <i>WBD account team lead to conduct Admin Training of the Client on the HR Portal for day-to-day tasks via webinar.</i>	Tuesday, February 13, 2018	Web Benefits Design	
Go-Live <i>WBD to launch system access for employees.</i>	Thursday, February 15, 2018	Web Benefits Design	



EXHIBIT 3

Web Benefits Design Overview



CBIZ





Employee Benefits Technology



EMPLOYEE BENEFITS TECHNOLOGY

Web Benefits Design (WBD) is a leading national employee benefits technology, communication, and administration firm located in Orlando, Florida.

- Clients from 100 to 30,000 EEs
- Over 1,000 clients nationwide
- Primary distribution through 280 brokers and multiple preferred carrier partnerships
- Manage any group benefit
- Connect to any carrier
- Connect to any payroll



INTEGRATED BENEFITS SOLUTIONS

BRANDED FOR EMPLOYER & BROKER

Technology

- Customized website
- Online enrollment
- Decision support
- Benefit administration
- Carrier connectivity
- Payroll integration

Communication

- Call center
- Telephonic enrollment
- Outbound targeted calls
- Benefit Confirmation Statement
- Customized enrollment communications

Administration

- Dependent documentation
- Beneficiary management
- New hire onboarding
- Qualifying event management
- Customized billing & reports
- Manage discrepancy reports

Compliance

- ACA reporting
- COBRA administration
- W2 healthcare reports
- Employee rights notification
- EOI management
- Mailing & fulfillment

WBD – BEST EDI STATS IN THE INDUSTRY!

WBD has a 96.4% retention rate, which is largely due to our exceptional EDI and connectivity track record with carriers.


- WBD averages 1.8 test files before we “go live” with carriers. Industry average is between 8-11 test files.
- Our proprietary EDI build tools allow us to launch test files within hours of loading client census data.
- WBD conforms to each carrier and payroll specifications, going way beyond industry standards to ensure speed and accuracy.
- During carrier black-out period, WBD will provide spreadsheet in carrier format and remit directly to carrier.
- EDI transparency tools show the status of each file feed (new, ongoing, open enrollment, terminating)
- WBD can manage discrepancy reports for an additional fee.

CONSOLIDATE YOUR ELIGIBILITY

Ben-Admin, COBRA and ACA Belong Together

WBD is the *only* system that fluidly combines the eligibility functions of ben-admin, COBRA, ACA, carrier EDI files, and payroll deduction feeds in one consistent database.

BCS



Your Pinnacle Employee Benefits

This is a confirmation of your benefit elections and costs per pay. If something appears incorrect, or you have questions about this data, please call 855-HRPNTRY (477-6879). If your benefit eligibility changes, this statement may no longer be valid.

Berchie Monroe Tester
8728 Chester Cutoff
Chester, AR 72934

05/16/2016

Dependents				
Cynthia Rothsberger (DP)				
Life & Disability	Approved	Requested	Employee Cost	Employer Cost
2016 Medical & Prescription Plan:	Enhanced Plan with HRA (Employee Only)		\$ 56.79	\$ 83.07
My spouse/domestic partner is offered medical benefits through their own employer, but I am electing to enroll them in my Pinnacle Foods medical plan instead:	No		\$ 0.00	\$ 0.00
I am a tobacco user:	Yes		\$ 11.54	\$ 0.00
My spouse/domestic partner is a tobacco user:	No		\$ 0.00	\$ 0.00
Dental Plan:	Pinnacle Gold Plan (Employee + Spouse)		\$ 8.21	\$ 6.40
	Covered Dependents: Cynthia Rothsberger			
Vision Plan:	Enhanced Plan (Employee + Spouse)		\$ 3.26	\$ 0.00
	Covered Dependents: Cynthia Rothsberger			
2016 Employee Assistance Plan:			\$ 0.00	\$ 0.00
Healthcare FSA:	(Waive)		\$ 0.00	\$ 0.00
Dependent Care FSA:	(Waive)		\$ 0.00	\$ 0.00
Basic Life and AD&D:	\$ 25,000.00		\$ 0.00	\$ 0.85
Employee Optional Life:	\$ 130,000.00	\$ 130,000.00	\$ 6.12	\$ 0.00
Spouse Optional Life:	(Waive)		\$ 0.00	\$ 0.00
Child Optional Life:	(Waive)		\$ 0.00	\$ 0.00
Voluntary Long Term Disability:	\$ 1,929.20		\$ 4.78	\$ 0.00
Pre-Paid Legal Plan:	(Waive)		\$ 0.00	\$ 0.00
Identity Theft:	(Waive)		\$ 0.00	\$ 0.00
Life & Disability Sub-Total Per Pay Cycle:			\$ 90.70	\$ 90.32
Total Benefits Cost Per Pay Cycle:			\$ 90.70	\$ 90.32

1094C & 1095C Forms

VOID
 CORRECTED

Form **1095-C** Employer-Provided Health Insurance Offer and Coverage
 Department of the Treasury
 Internal Revenue Service

OMB No. 1545-0051
2016

Information about Form 1095-C and its separate instructions is at www.irs.gov/form1095c

Part I Employee **Applicable Large Employer Member (Employer)**

1 Name of employee		2 Social security number (SSN)		7 Name of employer		8 Employer identification number (EIN)	
3 Street address (including apartment no.)				9 Street address (including room or suite no.)		10 Contact telephone number	
4 City or town		5 State or province		6 Country and ZIP or foreign postal code		13 Country and ZIP or foreign postal code	
11 City or town				12 State or province		13 Country and ZIP or foreign postal code	

Part II Employee Offer and Coverage **Plan Start Month (Enter 2-digit number):**

14 Offer of Coverage (enter required code)	All 12 Months											
	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
15 Employee Share of Lowest Cost Monthly Premium, for Self-Only Minimum Value Coverage	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
16 Applicable Section 49801 Safe Harbor (enter code, if applicable)												

Part III Covered Individuals
 If Employer provided self-insured coverage, check the box and enter the information for each covered individual.

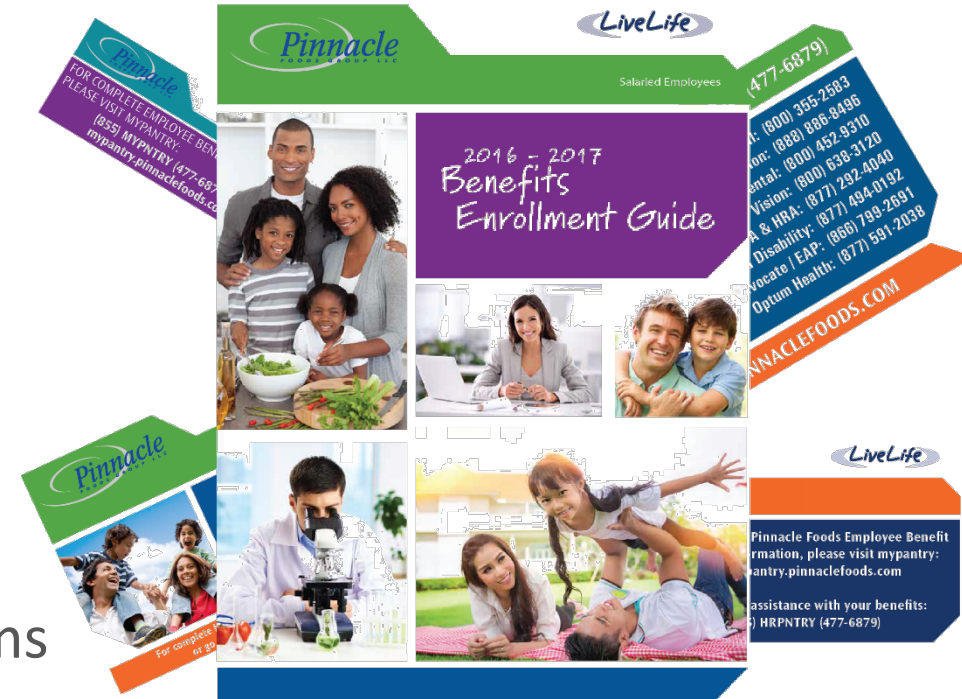
(a) Name of covered individual(s)	(b) SSN	(c) DOB (if SSN is not available)	(d) Covered all 12 months	(e) Months of Coverage											
				Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
17			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions. Cat. No. 60705M Form 1095-C (2016)

CUSTOMIZED COMMUNICATIONS

Create your “Benefits Brand”

- Benefits at a Glance
- ID Cards
- Post Cards
- Key Tags
- Magnets
- Posters
- Banners
- Webinars
- Consolidated enrollment forms
- Benefit Confirmation Statements (BCS)



SOPHISTICATED REPORTS

Customized Bills

- Bills by division, cost center, or other category
- Bills by carrier (*summary, list bill, and self-bill*)
- Detailed list bills to support HR information needs

Standard and Custom Reports

- Open enrollment status
- Pending events
- Financial (*net and gross costs by division, location, or other category*)



CLIENT – HEALTHCARE

5,500 employees

- 86 facilities
- Decentralized HR
- High voluntary benefits participation
- COBRA and ACA reporting
- Call center
- Dependent documentation
- New hire management

The screenshot displays the Orianna Health Systems employee benefits portal. At the top, the Orianna logo is on the left, and navigation links for 'Human Resources', 'Contacts', and 'Enroll Now' are on the right. Below the header is a navigation bar with tabs for 'Home', 'Medical & Prescription', 'Dental & Vision', 'Life & Disability', and 'Additional Benefits'. A left sidebar contains a 'Welcome' section and a list of menu items: 'Eligibility', 'Health and Wellness', 'Your Employee Rights', 'COBRA', 'Health Resources', and 'Log Out'. The main content area features a 'Benefits Overview' section with a list of benefits: Medical & Prescription Plans, Dental Benefits, Vision Benefits, Basic Life and AD&D, Voluntary Term Life, Employee Assistance Program, Voluntary Short Term Disability, Voluntary Long Term Disability, and Accident Insurance and Critical Illness Insurance. To the right of this list is a graphic with the word 'HEALTH' in the center, surrounded by related terms like 'WELLNESS', 'ENERGY', 'LIFE', 'FITNESS', 'HAPPINESS', and 'LIFESTYLE'. Below the benefits overview is an 'Employee Resources' section with four cards: 'Enroll Now' (with an 'i' icon), 'Forms' (with a folder icon), 'Employee Rights' (with a gavel icon), and 'Benefit Contacts' (with a location pin icon). Each card includes a brief description and a 'View' button.



EXHIBIT 4

Employee Communication Materials



CBIZ



Omada Web Site Communications

PHASE 1

Changing Food Habits

Trying to keep up with the latest news about nutrition will make your head spin—there are countless conflicting points of view about what is or isn't 'good for you.' Thankfully, you don't have to sort through all of them to improve your eating habits.



Calorie counts on labels aren't exactly accurate.

It may say '90 calories per serving' on the label, but cooking and digestion are so complex, the exact number of calories delivered will vary every time.

One of the best eating strategies for disease prevention and weight loss is to simply follow a few healthy rules of thumb.

PHASE 2

Increasing Activity Levels

As you choose more foods that are packed with body-fueling nutrients and avoid refined carbs that trigger fatigue, your energy levels will be on the rise. That makes this the perfect time to start getting active.



Regular exercise has surprising perks.

With regular moderate exercise, your body will continue using glucose more effectively at all times, even when you're doing nothing.

Your activity goal for Phase 2: 150 minutes of activity every week. Dread exercise? Don't worry. We're going to find convenient ways to get you moving.

PHASE 3

Preparing for Challenges

Obstacles of all kinds—job pressures, family stress, injuries—can make it easy to slide back into unhealthy habits. Instead of allowing that to happen, let's put a plan in place for handling problems proactively.



Problem-solving skills are weight-loss skills in disguise.

In one study women who had better problem-solving skills lost 10% more weight than those who weren't as savvy at finding solutions.

In this lesson, you'll learn how to break a problem down into manageable pieces via a straightforward five-step process.

PHASE 4

Reinforcing Healthy Choices

Just as aspects of your environment can trigger either healthy or unhealthy behaviors, certain people and social situations can have the same effect. We call them 'social cues.'



Improving your health can be contagious.

Research has shown that when one person loses weight, their close friends and family are more likely to shed unwanted pounds as well.

When you can't avoid a negative social cue, you need to change the way that you respond to it. Let's talk about how.



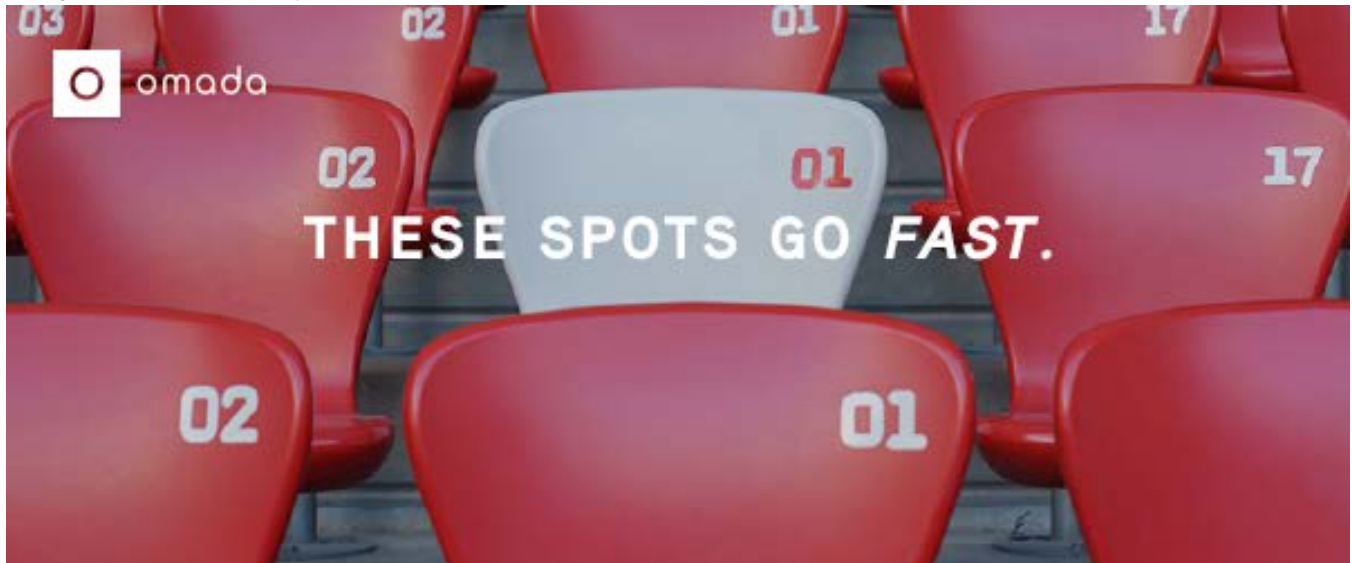
EXHIBIT 4

Employee Communication Materials
(continued)

Illuminate email campaign

Email 1

Subject: Inside: Your personal invite



Don't miss your chance to grab a spot!

Last time we told you about the Omada® program, groups filled up in hurry. Here's your heads up: New sessions are starting soon! To guarantee your start date, see if you're eligible and sign up today at omadahealth.com/healthpartners

This is a fantastic opportunity to lose weight, develop healthy habits, and tackle obesity-related chronic diseases.

We're excited to offer this breakthrough online program (a ~\$600 value) at no additional cost to eligible employees **[and their adult family members]** who are enrolled in our HealthPartners® health plan. Find out more by visiting omadahealth.com/healthpartners

If you're already enrolled in Omada—congrats! There's no need to reapply.

Email 2

Subject: What can you accomplish in 16 weeks?



And gain a lifetime of healthy habits.

If you **[or your adult family members]** are at risk for type 2 diabetes or heart disease, and enrolled in our HealthPartners® health plan, the Omada® program can help you change your life in just a few hours a week. Your journey will start with simple steps in 4 important areas:

1. **Eat healthier.** Forget obsessing about calories. Omada will help you enjoy every meal.
2. **Increase activity.** Soon, you'll take the stairs without even thinking about the elevator.
3. **Overcome challenges.** Will there be bumps in the road? Sure. See how to bounce back better.
4. **Strengthen habits.** Learn the secrets for transforming habits from the inside out.

After the foundational 16 weeks, you'll keep your focus with ongoing lessons and support for a full year.

Get on the path to better health.

Take a 1-minute health test to find out if you **[or your adult family members]** are eligible for the Omada program (at no cost to you, thanks to **[Company]**). Visit omadahealth.com/healthpartners today.

If you're already enrolled in Omada—congrats! There's no need to reapply.

Email 3

Subject: How Rodney used technology to control his weight



“My favorite part was watching the weight chart go down.”

When Rodney—a self-professed geek-at-heart—heard about the wireless smart scale he’d get delivered right to his doorstep, he was instantly hooked on the Omada® program. The scale was automatically linked to Rodney’s online account, making it easy for his health coach to track his progress. And for Rodney to stay motivated.

See if you **[or your adult family members]** are eligible to join Omada today (at no cost to you, thanks to **[Company]**) and your own scale could be shipped in just 10 days.

Learn more at omadahealth.com/healthpartners

If you’re already enrolled in Omada—congrats! There’s no need to reapply.

Email 4

Subject: Drink up: 3 ways to wow your water



REFRESH YOUR H2O.



Cheers to the healthiest beverage on the planet.

We hear ya, water can be boring. But it's essential to your health, and drinking enough can actually make weight loss easier.

To help you drink up, here's a quick fix from the Omada® program: Just add a palmful of thinly-sliced fruit to your glass, then mix in a veggie or fresh herb—or both. Try a few of these easy favorites:

- Mint + Kiwi + Grapefruit
- Lemon + Cucumber
- Blueberries + Cucumber + Basil

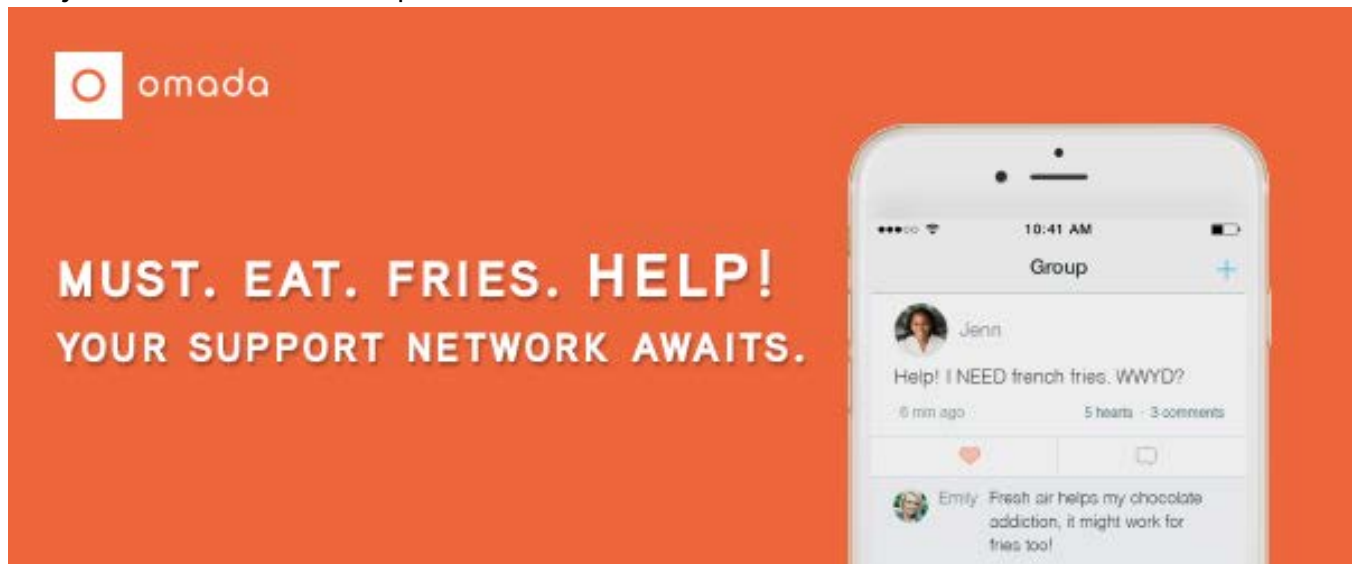
Find out more when you join Omada. It's a refreshing take on health, chock-full of ideas to help you feel fantastic from the inside out.

Take a 1-minute health test to find out if you **[or your adult family members]** are eligible to join at no additional cost: omadahealth.com/healthpartners

If you're already enrolled in Omada—congrats! There's no need to reapply.

Email 5

Subject: Must. Eat. Fries. Help!



Gain the support you need to make healthy habits stick.

We're the first to admit that getting healthy isn't always easy. Will there be challenges along the way? You bet. But with the Omada® program, you'll have a team to keep you going strong.

You'll be paired with a group of peers for encouragement and empathy at every step. The private message board is the perfect place to get tips, share struggles and celebrate success. Like choosing fruit over fries.

It's just one way that Omada will support your journey to better health. You'll also get a personal health coach, online lessons, and easy-to-use technology. If you **[or your adult family members]** are eligible and enrolled in our HealthPartners® health plan, our health plan will cover the entire cost.

Learn more and sign up at omadahealth.com/healthpartners

If you're already enrolled in Omada—congrats! There's no need to reapply.



EXHIBIT 4

Employee Communication Materials
(continued)

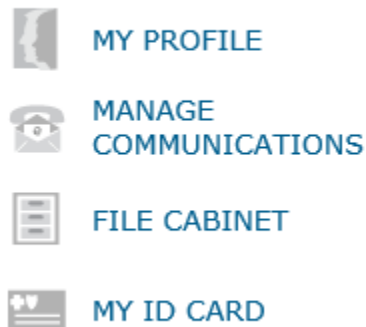
Steps to earn the 2019 Wellness Incentive

New Wellness Year Email

Welcome to your new wellness program year with Blue KC- A Healthier You™ (AHY)

What can you expect with this new wellness year?

1. **AHY App: We highly recommend downloading the app to easily and quickly use the A Healthier You program**
 - a. Members new to the app will need to register as a new user on the app.
 - b. Search Blue KC: A Healthier You, available on
 - i. [Google Play Store](#) App
 - ii. [Apple Store](#) AHY app
2. **Points:** Your points from the previous wellness year will reset back to zero. See page 2 to further understand this year's points' structure and how you can start earning points the way you choose.
 - a. Some cancer screening points will carry over from the previous year
3. **Communications email:** Make Sure Blue KC can connect with you
 - a. Update your email address:
 - i. Log in to www.myBlueKC.com
 - ii. Click on "Manage Communications" on the left hand toolbar of the portal



Having trouble logging into MyBlueKC.com? Use the "Forgot Username" or "Forgot Password" links on BlueKC.com or call the customer service number on the back of your insurance card for assistance.

Steps to earn the 2019 Wellness Incentive



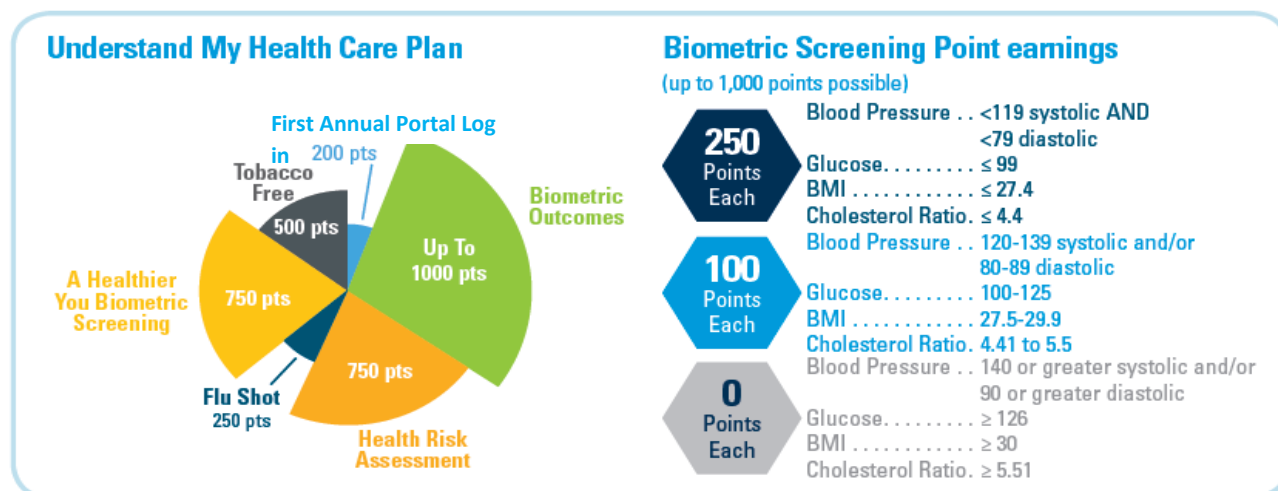
MIND BODY SPIRIT

2018 Wellness Incentive Requirements

Total Points	Incentive
<3000	Tier 1
3000-4499	Tier 2
4500 +	Tier 3

Points Earning Timeline: October 1, 2017- September 30, 2018

Points can be earned in a variety of different ways based on your participation. See below the ways you can start to earn today!



Care Plan Points:

Points are offered in within each Care Plan. Simply configure a Care Plan to start earning points!
 Examples of points earned in Care Plans are:

- Device Integration
- Completing Assigned education
- Claims for completed actions such as Preventive Exams and more!

Ready to Get Started?

After 10/1/2017, visit www.mybluekc.com and click on the **A Healthier You** link on the home page.

1. Start by taking the HRA and configuring your Care Plans to jump start your point earning!
2. Be on the lookout for communications on onsite screenings in 2018



EXHIBIT 5

Strategic Financial Model Y1-Y3



angiodynamics

Illustrative 3-Year Health Benefit Strategic Plan

Completed October 19, 2017

Presented by:
CBIZ Benefits & Insurance Services, Inc.
5450 Frantz Road, Suite 300
Dublin, OH 43016
Telephone: (614) 793-7770



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Executive Summary

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Section 1: Executive Summary



Illustrative 3-Year Health Benefit Strategic Plan Summary

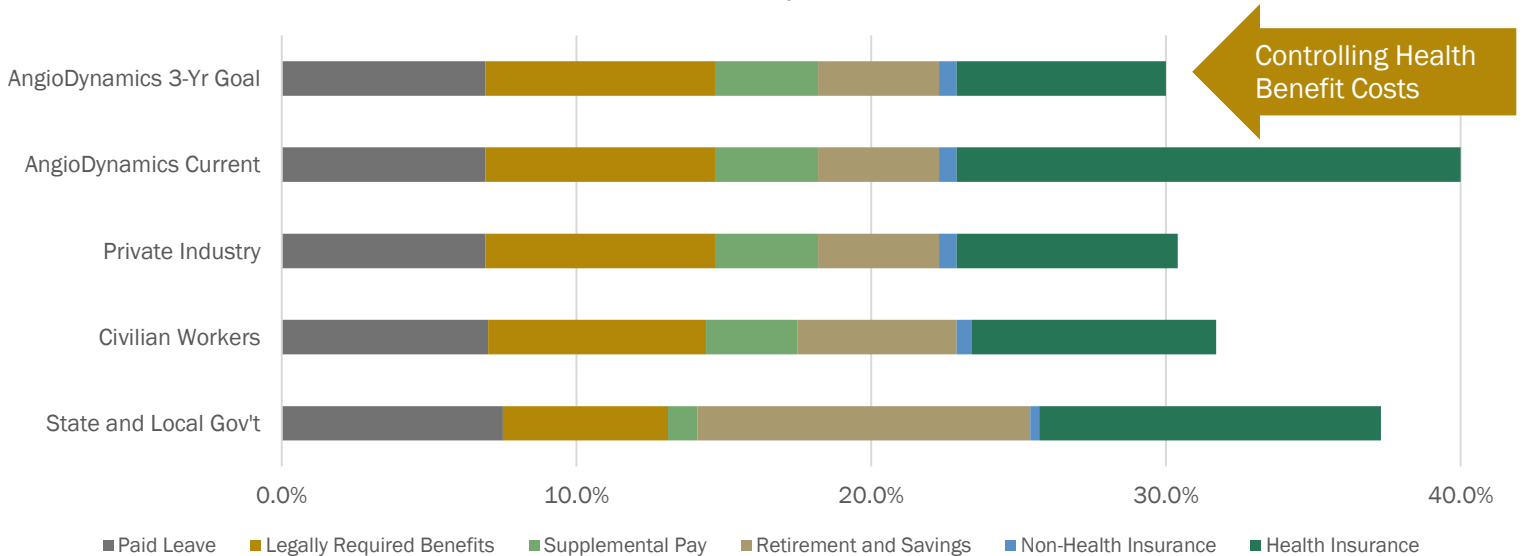
Background

AngioDynamics is interested in decreasing their cost of benefits as a percentage of total compensation from the current 40% to a goal of 30% over the next three years. CBIZ prepared an illustrative financial model to demonstrate how this can be accomplished.

Benchmark Analysis

At 30% of total compensation, AngioDynamics' benefits cost is well above the average for Private Industry, according to benchmarks from a June 2017 BLS report. AngioDynamics' goal of 30% is in line with Private Industry benchmarks. Due to recent industry-wide cost trend challenges, it is assumed that the majority of this discrepancy is caused by health benefit spending. See below for a graph comparing AngioDynamics to BLS industry group benchmarks.

Benefits As A Percentage Of Total Compensation By Industry Benchmark Group



As the graph above illustrates, AngioDynamics needs to control healthcare costs in order to bring benefits spending in line with industry benchmarks near their 30% goal. Below is a table of the raw values used in the above graph.

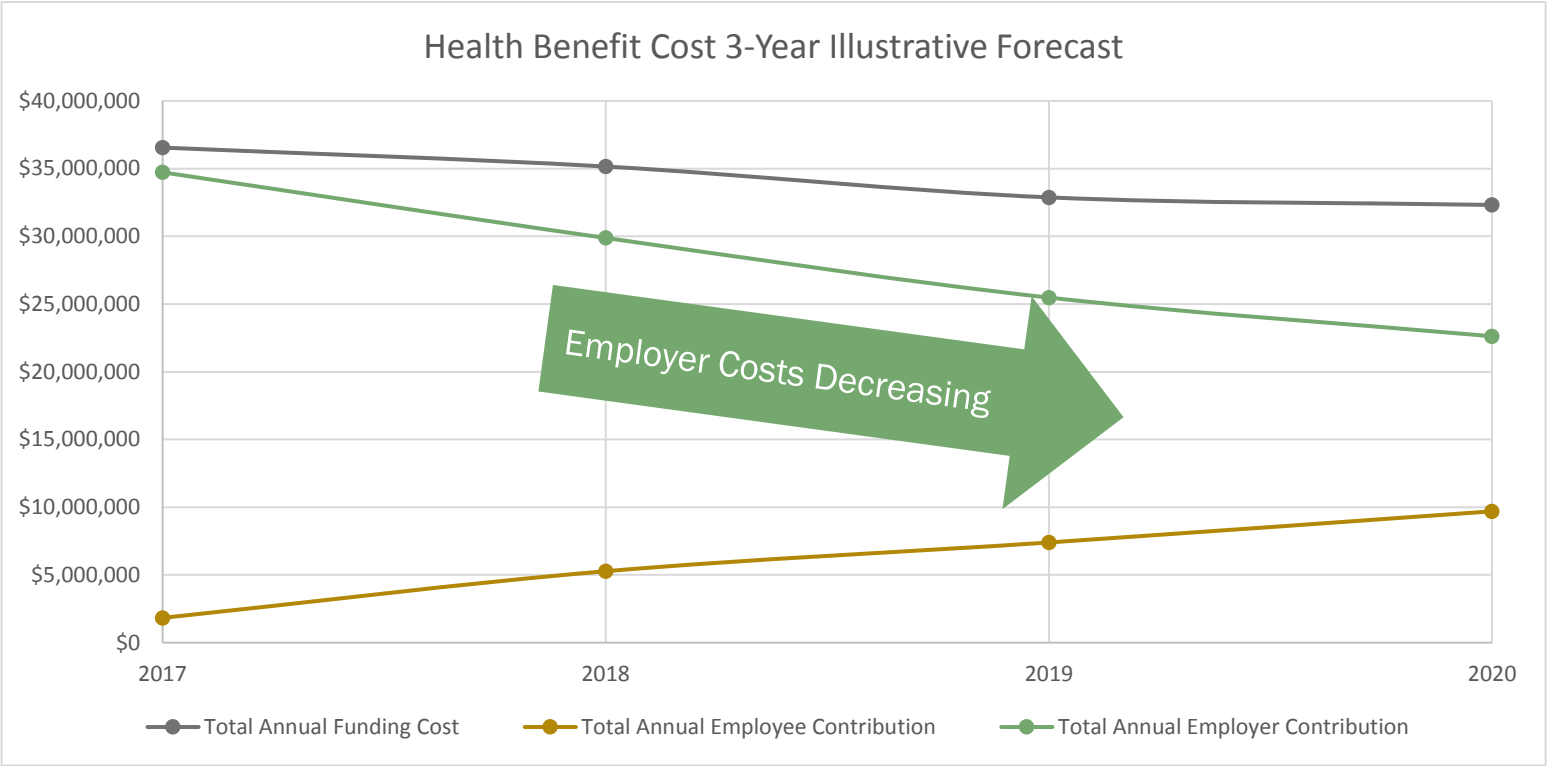
Compensation Component	State and Local Gov't	Civilian Workers	Private Industry	Angio-Dynamics Current	Angio-Dynamics 3-Yr Goal
Wages and Salaries	62.7%	68.3%	69.6%	60.0%	70.0%
Benefits	37.3%	31.7%	30.4%	40.0%	30.0%
Paid Leave	7.5%	7.0%	6.9%	6.9%	6.9%
Supplemental Pay	1.0%	3.1%	3.5%	3.5%	3.5%
Insurance	11.9%	8.8%	8.1%	17.7%	7.7%
Health	11.6%	8.3%	7.5%	17.1%	7.1%
Retirement and Savings	11.3%	5.4%	4.1%	4.1%	4.1%
Defined Benefit	10.5%	3.5%	1.9%	1.9%	1.9%
Defined Contribution	0.8%	2.0%	2.2%	2.2%	2.2%
Legally Required Benefits	5.6%	7.4%	7.8%	7.8%	7.8%
Total	100.0%	100.0%	100.0%	100.0%	100.0%

Benchmarks from June 2017 BLS Statistics, note some percentages were changed to sum to 100% due to rounding.

Illustrative 3-Year Health Benefit Strategic Plan Financial Summary

Financial Summary Results

Below is an illustration of the forecasted results of the 3-Year Strategic Plan. Each year includes several innovative strategies to control costs.



Below is the data table for the above graph.

	2017	2018	2019	2020
Total Annual Funding Cost	\$36,552,000	\$35,154,893	\$32,876,061	\$32,319,119
Total Annual Employee Contribution	\$1,827,600	\$5,273,234	\$7,397,114	\$9,695,736
Total Annual Employer Contribution	\$34,724,400	\$29,881,659	\$25,478,947	\$22,623,383

	2017	2018	2019	2020	Total
Total Funding Cost Increase	N/A	-3.8%	-6.5%	-1.7%	-11.6%
Total Employee Contrib Increase	N/A	188.5%	40.3%	31.1%	430.5%
Total Employer Contrib Increase	N/A	-13.9%	-14.7%	-11.2%	-34.8%

Cost Control Strategies To Consider

Below are some of the innovative cost control strategies to consider. Each of these strategies has its own detailed feasibility study to determine the respective projected financial discounts.

- Pure Stop Loss Captive
- On-Site Clinic
- Narrow Network/ACO Network
- Actuarial Stop Loss Modeling
- Plan Design Changes (e.g. HSA plans, etc)
- Rx Formulary Optimization & Modeling
- Detailed Contribution Modeling

See the next section for the financial details of each annual projection.



Section 2: Financial Details



Illustrative 3-Year Health Benefit Strategic Plan Financial Details

Funding Rate Trend Illustration

The cost of health benefits are modeled through three years via trending the funding rates (sometimes called "premium-equivalent rates") for the self-funded health plan. The base trend comes from the industry-standard Segal Survey and adjustments are made based on the results of various actuarial feasibility studies.

Enrollment

A snapshot enrollment census is used to get benchmark subscriber counts for purposes of modeling total funding costs.

Subscriber Tier	PPO 500	PPO 1500	HSA 2500
E	400	500	250
ES	150	200	100
EC	75	100	50
F	200	300	150
Subtotal	825	1,100	550
Grand Total	2,475		

2017 Funding Rates (Current)

Subscriber Tier	PPO 500	PPO 1500	HSA 2500
E	\$800	\$650	\$500
ES	\$1,680	\$1,365	\$1,050
EC	\$1,440	\$1,170	\$900
F	\$2,560	\$2,080	\$1,600
Monthly Subtotal	\$1,192,000	\$1,339,000	\$515,000
Annual Subtotal	\$14,304,000	\$16,068,000	\$6,180,000
Monthly Grand Total	\$3,046,000		
Annual Grand Total	\$36,552,000		

2017 Employee Contribution Rates

Subscriber Tier	PPO 500	PPO 1500	HSA 2500
E	\$40	\$33	\$25
ES	\$84	\$68	\$53
EC	\$72	\$59	\$45
F	\$128	\$104	\$80
Monthly Subtotal	\$59,600	\$66,950	\$25,750
Annual Subtotal	\$715,200	\$803,400	\$309,000
Monthly Grand Total	\$152,300		
Annual Grand Total	\$1,827,600		

2017 Employer Contribution Rates

Subscriber Tier	PPO 500	PPO 1500	HSA 2500
E	\$760	\$618	\$475
ES	\$1,596	\$1,297	\$998
EC	\$1,368	\$1,112	\$855
F	\$2,432	\$1,976	\$1,520
Monthly Subtotal	\$1,132,400	\$1,272,050	\$489,250
Annual Subtotal	\$13,588,800	\$15,264,600	\$5,871,000
Monthly Grand Total	\$2,893,700		
Annual Grand Total	\$34,724,400		

2018 Trend Rate Calculation

The 2018 funding rates must be trended. Below are the trend rates applied to the previous year's funding rates in order to estimate the future funding rates.

Note that all decrements are calculated in separate actuarial feasibility studies.

	PPO 500	PPO 1500	HSA 2500
2018 Segal Medical Trend Rate	7.80%	7.80%	7.80%
2018 Segal Rx Trend Rate	10.30%	10.30%	10.30%
Weighted* Medical+Rx Trend	8.30%	8.30%	8.30%

	PPO 1000	HSA 3000	HSA 6000
Weighted* Medical+Rx Trend	8.30%	8.30%	8.30%
Plan Design Change Decrement	-7.22%	-9.45%	-4.57%
Subtotal Medical+Rx Trend	1.08%	-1.15%	3.73%

	All Plans
Total Weighted Medical+Rx Trend	0.55%
Stop Loss ISL Deductible Optimization	-1.43%
Pure Captive Implementation Decrement	-0.16%
Onsite Clinic Implementation Decrement	-0.34%
Narrow Network Decrement	-1.56%
Optimized Formulary Adjustment	-0.88%
Final Composite Funding Rate Trend Rate	-3.82%

	All Plans
Total Weighted Medical+Rx Trend	-3.82%
Contribution Changes	-10.12%
Final Composite Employer Contribution Trend Rate	-13.95%

* It is assumed that 80% of claim dollars are medical claims and the remaining 20% of claim dollars are Rx (Pharmacy) claims.

See the next page for how these calculated trend rates are applied to the funding rates and contributions.

2018 Trend Rates

For reference, below are the trend rates calculated on the previous page.

Final Composite Funding Rate Trend Rate -3.82%

Final Composite Employer Contribution Trend Rate -13.95%

2018 Funding Rates

Subscriber Tier	PPO 1000	HSA 3000	HSA 6000
E	\$769	\$625	\$481
ES	\$1,616	\$1,313	\$1,010
EC	\$1,385	\$1,125	\$866
F	\$2,462	\$2,000	\$1,539
Monthly Subtotal	\$1,146,439	\$1,287,820	\$495,315
Annual Subtotal	\$13,757,266	\$15,453,842	\$5,943,785
Monthly Grand Total		\$2,929,574	
Annual Grand Total		\$35,154,893	
Percentage Increase		-3.82%	

2018 Employee Contribution Rates

Subscriber Tier	PPO 1000	HSA 3000	HSA 6000
E	\$115	\$94	\$72
ES	\$242	\$197	\$151
EC	\$208	\$169	\$130
F	\$369	\$300	\$231
Monthly Subtotal	\$171,966	\$193,173	\$74,297
Annual Subtotal	\$2,063,590	\$2,318,076	\$891,568
Monthly Grand Total		\$439,436	
Annual Grand Total		\$5,273,234	

2018 Employer Contribution Rates

Subscriber Tier	PPO 1000	HSA 3000	HSA 6000
E	\$654	\$531	\$409
ES	\$1,373	\$1,116	\$858
EC	\$1,177	\$956	\$736
F	\$2,093	\$1,700	\$1,308
Monthly Subtotal	\$974,473	\$1,094,647	\$421,018
Annual Subtotal	\$11,693,676	\$13,135,765	\$5,052,217
Monthly Grand Total		\$2,490,138	
Annual Grand Total		\$29,881,659	
Percentage Increase		-13.95%	

2019 Trend Rate Calculation

The 2019 funding rates must be trended. Below are the trend rates applied to the previous year's funding rates in order to estimate the future funding rates.

Note that all decrements are calculated in separate actuarial feasibility studies.

	PPO 1000	HSA 3000	HSA 6000
2018 Segal Medical Trend Rate	7.80%	7.80%	7.80%
2018 Segal Rx Trend Rate	10.30%	10.30%	10.30%
Weighted* Medical+Rx Trend	8.30%	8.30%	8.30%

	PPO 1500	HSA 4000	HSA 7000
Weighted* Medical+Rx Trend	8.30%	8.30%	8.30%
Plan Design Change Decrement	-3.53%	-9.45%	-1.40%
Subtotal Medical+Rx Trend	4.77%	-1.15%	6.90%

	All Plans
Total Weighted Medical+Rx Trend	2.53%
Stop Loss ISL Deductible Optimization	-0.86%
Pure Captive Implementation Decrement	-2.40%
Onsite Clinic Implementation Decrement	-3.48%
Narrow Network/ACO Optimization	-0.95%
Optimized Formulary Adjustment	-1.32%
Final Composite Funding Rate Trend Rate	-6.48%

	All Plans
Total Weighted Medical+Rx Trend	-6.48%
Contribution Changes	-8.25%
Final Composite Employer Contribution Trend Rate	-14.73%

* It is assumed that 80% of claim dollars are medical claims and the remaining 20% of claim dollars are Rx (Pharmacy) claims.

See the next page for how these calculated trend rates are applied to the funding rates and contributions.

2019 Trend Rates

For reference, below are the trend rates calculated on the previous page.

Final Composite Funding Rate Trend Rate -6.48%

Final Composite Employer Contribution Trend Rate -14.73%

2019 Funding Rates

Subscriber Tier	PPO 1500	HSA 4000	HSA 7000
E	\$720	\$585	\$450
ES	\$1,511	\$1,228	\$944
EC	\$1,295	\$1,052	\$809
F	\$2,303	\$1,871	\$1,439
Monthly Subtotal	\$1,072,124	\$1,204,340	\$463,208
Annual Subtotal	\$12,865,484	\$14,452,083	\$5,558,493
Monthly Grand Total		\$2,739,672	
Annual Grand Total		\$32,876,061	
Percentage Increase		-6.48%	

2019 Employee Contribution Rates

Subscriber Tier	PPO 1500	HSA 4000	HSA 7000
E	\$162	\$132	\$101
ES	\$340	\$276	\$212
EC	\$291	\$237	\$182
F	\$518	\$421	\$324
Monthly Subtotal	\$241,228	\$270,977	\$104,222
Annual Subtotal	\$2,894,734	\$3,251,719	\$1,250,661
Monthly Grand Total		\$616,426	
Annual Grand Total		\$7,397,114	

2019 Employer Contribution Rates

Subscriber Tier	PPO 1500	HSA 4000	HSA 7000
E	\$558	\$453	\$349
ES	\$1,171	\$951	\$732
EC	\$1,004	\$816	\$627
F	\$1,784	\$1,450	\$1,115
Monthly Subtotal	\$830,896	\$933,364	\$358,986
Annual Subtotal	\$9,970,750	\$11,200,364	\$4,307,832
Monthly Grand Total		\$2,123,246	
Annual Grand Total		\$25,478,947	
Percentage Increase		-14.73%	

2020 Trend Rate Calculation

The 2020 funding rates must be trended. Below are the trend rates applied to the previous year's funding rates in order to estimate the future funding rates.

Note that all decrements are calculated in separate actuarial feasibility studies.

	PPO 1500	HSA 4000	HSA 7000
2018 Segal Medical Trend Rate	7.80%	7.80%	7.80%
2018 Segal Rx Trend Rate	10.30%	10.30%	10.30%
Weighted* Medical+Rx Trend	8.30%	8.30%	8.30%

	HSA 2000	HSA 4000	HSA 7000
Weighted* Medical+Rx Trend	8.30%	8.30%	8.30%
Plan Design Change Decrement	-5.30%	0.00%	0.00%
Subtotal Medical+Rx Trend	3.00%	8.30%	8.30%

	All Plans
Total Weighted Medical+Rx Trend	6.23%
Stop Loss ISL Deductible Optimization	-0.21%
Pure Captive Implementation Decrement	-2.97%
Onsite Clinic Implementation Decrement	-3.76%
Narrow Network/ACO Optimization	-0.11%
Optimized Formulary Adjustment	-0.87%
Final Composite Funding Rate Trend Rate	-1.69%

	All Plans
Total Weighted Medical+Rx Trend	-1.69%
Contribution Changes	-9.51%
Final Composite Employer Contribution Trend Rate	-11.21%

* It is assumed that 80% of claim dollars are medical claims and the remaining 20% of claim dollars are Rx (Pharmacy) claims.

See the next page for how these calculated trend rates are applied to the funding rates and contributions.

2020 Trend Rates

For reference, below are the trend rates calculated on the previous page.

Final Composite Funding Rate Trend Rate -1.69%

Final Composite Employer Contribution Trend Rate -11.21%

2020 Funding Rates

Subscriber Tier	HSA 2000	HSA 4000	HSA 7000
E	\$707	\$575	\$442
ES	\$1,485	\$1,207	\$928
EC	\$1,273	\$1,035	\$796
F	\$2,264	\$1,839	\$1,415
Monthly Subtotal	\$1,053,961	\$1,183,938	\$455,361
Annual Subtotal	\$12,647,534	\$14,207,255	\$5,464,329
Monthly Grand Total		\$2,693,260	
Annual Grand Total		\$32,319,119	
Percentage Increase		-1.69%	

2020 Employee Contribution Rates

Subscriber Tier	HSA 2000	HSA 4000	HSA 7000
E	\$212	\$172	\$133
ES	\$446	\$362	\$279
EC	\$382	\$310	\$239
F	\$679	\$552	\$424
Monthly Subtotal	\$316,188	\$355,181	\$136,608
Annual Subtotal	\$3,794,260	\$4,262,177	\$1,639,299
Monthly Grand Total		\$807,978	
Annual Grand Total		\$9,695,736	

2020 Employer Contribution Rates

Subscriber Tier	HSA 2000	HSA 4000	HSA 7000
E	\$495	\$402	\$309
ES	\$1,040	\$845	\$650
EC	\$891	\$724	\$557
F	\$1,584	\$1,287	\$990
Monthly Subtotal	\$737,773	\$828,757	\$318,753
Annual Subtotal	\$8,853,274	\$9,945,079	\$3,825,030
Monthly Grand Total		\$1,885,282	
Annual Grand Total		\$22,623,383	
Percentage Increase		-11.21%	



EXHIBIT 6

Sample TPA Performance Guarantee

TPA PERFORMANCE GUARANTEE - SAMPLE

January 1, 2018 - December 31, 2018

Performance Category	Performance Goals	Fees at Risk
Customer Service Telephone Hold Time Hold time of all incoming calls or average speed of answer. Measured based on overall results for the assigned call lines for ABC Company Products and other similar accounts.	45 seconds (standard)	\$
Customer Service Calls Resolved on First Contact Percentage of calls resolved on first contact. Measured based on TPA wide results.	90%	\$
Customer Service Call Abandonment Rate Percent call abandonment rate of all incoming calls. Measured based on overall results for the assigned call lines for ABC Company Products and other similar accounts.	3%	\$
Percentage of Claims Processed within 10 Days Total number of clean claims payable in 10 business days from date received. Measured based on TPA wide results.	90%	\$
Claims Processing Procedural Accuracy Total number of claims reviewed less claims with non-financial errors/Total number of claims reviewed. Measured based on TPA wide results.	98%	\$
Claims Processing Payment Accuracy Total number of claims reviewed less claims with financial errors/Total number of claims reviewed. Measured based on TPA wide results.	98%	\$
Claims Processing Financial Accuracy Total dollars billed less the sum of all overpayments and underpayments (numerator)/Total dollars billed (denominator). Measured based on TPA wide results.	98%	\$
Initial Implementation Success Based on the attached survey of ABC Company Products benefit team, using a scale of 1 to 5. The survey will be completed in July 2018 (or as mutually agreed) upon material completion of implementation. Definitions: 1 = Below Expectations; 2 = Somewhat Below Expectations; 3 = Meets Expectations; 4 = Somewhat Exceeds Expectations; 5 = Exceeds Expectations	An overall average score of 3 or higher on questions 3-10	\$

Performance Category	Performance Goals	Fees at Risk
<p>Account Management</p> <p>ABC Company will measure their account management team twice annually (after first quarter and at the end of the year) using the scale of 1 to 5. At the end of the year, a score for the year will be determined based on the average of the completed surveys. Any survey that is not completed and returned with 60 days of receipt will be assumed to meet a score of "Very Good (4)."</p> <p>Scale: 1 = Poor; 2 = Fair; 3 = Good; 4 = Very Good; 5 = Excellent</p> <p>Categories are defined in the attached Account Team / Relationship Scorecard.</p>	<p>A score of 3 or higher in every quarter</p>	<p>\$</p>
<p>TOTAL AMOUNT OF FEES AT RISK</p>		<p>\$</p>

SECTION 2

Property and Casualty Services



CBIZ Consulting Services Proposal

Response to Follow-up Questions

1. Please outline a project plan for implementation of takeover data and rollout for Open Enrollment (key deliverable, timeline, and owners of who is involved at each touch point).

CBIZ has provided sample timelines in the RFP response. We have included another in the exhibit below and the calendar handout during the meeting. If CBIZ is selected as the broker for AngioDynamics, a final service calendar will be developed in a partnership with AngioDynamics.

2. Given the account team selected, how many of your clients will be in the midst of / entering into Open Enrollment during the months that would surround the AngioDynamics implementation timeframe?

This question is more relevant to our benefits team. Our P&C team has clients renewing all year long, but it will not affect our ability to provide the needed services for AngioDynamics on the appropriate timeframe.

3. What is your recommended enrollment platform for AngioDynamics? What other Benefits Enrollment & Management Systems do you recommend or work with?

Benefits

4. Knowing that AngioDynamics is looking to offer additional health plan options and change contribution strategy, what benefits platform do you recommend?

Benefits

5. Can you support an exchange-model enrollment platform with a defined contribution plan design?

Benefits

6. How can you assist AngioDynamics in lowering benefit costs while maintaining competitive benefits by industry and geography and retaining employee approval?

Benefits.

7. Help us understand how data will be used to drive targeted (PHI-secure) marketing campaigns to drive employee engagement and decrease costs?

Benefits

- a. Please describe your marketing capabilities and provide a sample of content you have developed for other clients.



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8. Please describe your use of data and technology to drive decision making and strategic planning, and provide a recommended approach to a 3 year strategy to achieve AngioDynamics objectives, in order to:

a. Reduce benefit spend from 40% to 30% of total compensation (include a detailed financial model for Y1, Y2, and Y3)

Benefits

b. Provide enhanced choice/flexibility for AngioDynamics employees and their dependents

Benefits

c. Offer technology that can grow with AngioDynamics

Benefits

d. Reduce costs on the Property/Casualty insurance lines

An important element of our consultative risk management process is the quantitative assessment of claims data. We review claims information to identify trends in frequency, severity, and causes of loss and analyze incident data relating to day of the week, time of day and personnel involved. We will further evaluate these data points in the context of the growth of your exposure data in order to normalize the data and results year over year. The goal is to identify and prioritize areas for improvement, develop plans to address these key areas, implement the plans, and measure their performance over time. We deliver resources in the form of education and training to reduce incidents and mitigate the impact of those that are incurred. Once we and our clients are collectively able to control and more accurately forecast expected annual losses, we can assist the client in reducing the transactional or frictional expense relating to the cost of insurance. By self-assuming more risk in the form of deductibles or retentions, the client actually buys less insurance and reduces their total cost of risk. Additional options, such as captives or other loss sensitive plans, can add further value. The ultimate goal is to put the client in a position to consider all opportunities.

9. Please provide a 3 year performance and service fee guarantee based on achieving desired benefits outcomes and service deliverables.

We support the “fee based” compensation methodology and can meet this requirement.

Since CBIZ will be working on a fee basis (net of commission) there will be no issue in assuring that AngioDynamics insurance program will be comprehensive and competitive. By eliminating commissions from the carriers it makes the process truly objective with the end result being AngioDynamics having the most comprehensive coverage with the most competitive carriers.



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Upon review of AngioDynamics current programs, loss history, safety program, and a discussion about your Risk Management objectives, we will be able to identify a fee amount. We are confident that this fee amount will be competitive and a value for AngioDynamics.

We believe in full transparency. If we have no other option than to receive commission from an Insurance carrier, we will disclose that amount and apply it toward AngioDynamics annual fee.

a. What sort of combined discount would be available for Property/Casualty PLUS Employee Benefits?

Our typical fee is in the range of 10% of written premium being the benchmark, and the final amount is determined once we have established a full service calendar and stewardship plan. We have been operating under the assumption that this will be a combined Benefits and P&C insurance agreement, and we will provide a 10% discount off of our fee in the event that both Benefits and P&C teams are selected to work with AngioDynamics. In the event that only P&C is selected we will still honor that discount in our fee agreement.



EXHIBITS



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Risk Management Service Plan

2017-2018

Client:		Date:	
Objectives: <ul style="list-style-type: none"> • Develop and maintain clear communications between the appropriate personnel from AngioDynamics, insurance carriers used and CBIZ • To control total cost of risk through the continuous development and implementation of effective policies, procedures and controls focused on risk mitigation and minimization of losses as they relate to employees and customer safety, as well as property. 			
Standards: <ul style="list-style-type: none"> • AngioDynamics, CBIZ, and insurance carriers used will work collaboratively in defining risk management goals. • Once goals have been established and the Risk Management Service Plan is approved, the senior management team at AngioDynamics will remain supportive and involved. • CBIZ and the insurance carriers used will work with AngioDynamics to implement the action steps as outlined below. 			
Risk Management Services			
Action Steps	Responsibility	Target Date	Complete Date
Meet with AngioDynamics to identify risk management goals and objectives for the upcoming year.	Angio CBIZ	30 Days from Broker of Record Change	
Distribute service team list noting names, contact numbers and responsibilities for CBIZ personnel.	CBIZ		
Gather additional information: remaining policies, list of locations, employee handbook, drivers list, BI worksheet, etc.	Angio CBIZ		
Obtain and review existing insurance policies, perform analysis, and note potential coverage gaps and concerns.	CBIZ		
Initial contact with underwriters to assess overall perspective.	CBIZ		
Obtain and review contracts to ensure compliance with insurance requirements. This would include review of contracts and leases for unwanted or unintended assumption of risk.	CBIZ	Ongoing	



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Assistance in determining insurable values, if deemed appropriate. This can either be done by hiring a third party vendor or by using trending values.	CBIZ	60 Days from Broker of Record Change	
INSURANCE COS. and CBIZ to provide AngioDynamics access to all relevant safety and risk control resources.	INSURANCE COS. CBIZ	Ongoing	

Review and assess AngioDynamics current Fleet Safety Policy.	Angio CBIZ	Initiate TBD	
Review and assess AngioDynamics current Disaster Recovery Program and how the insurance coverages provided apply.	Angio CBIZ	Initiate TBD	
Review and assess AngioDynamics current Hazardous Materials Management Program.	Angio CBIZ	Initiate TBD	
Stewardship Review – an evaluation of the program and the services provided to date, as well as an opportunity to identify any changes to the risk management service objectives that have been agreed upon under this plan.	Angio CBIZ	Initiate TBD	

Claim Management Services

Action Steps	Responsibility	Target Date	Complete Date
Develop and implement claims reporting guidelines for submitting claims; directly to the carrier or to CBIZ Claims Dept.	Angio	Ongoing	
Coordinate claim review sessions with AngioDynamics, carriers and CBIZ as warranted.	CBIZ	As Needed	
Monitor claim handling, reserving and settlement of all reported claims. CBIZ will communicate claims status and development with designated AngioDynamics contacts.	CBIZ	Ongoing	
Obtain insurance carrier loss runs at least annually and as agreed upon. Loss runs will provide summary by category and dollar amount.	CBIZ INSURANCE CO.	As Needed	

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Account Management Services			
Action Steps	Responsibility	Target Date	Complete Date
Maintain database for Certificate of Insurance Holders consisting of landlords, mortgagees, automobile and equipment leasing companies, business partners, etc.	CBIZ	Ongoing	
Provide Automobile Insurance Identification cards for all vehicles at renewal and as new vehicles are acquired.	CBIZ	Ongoing	
Establish a process and procedure for the ordering of Motor Vehicle Reports for all company drivers and prospective drivers.	Angio CBIZ	Ongoing	
Maintain database of property underwriting information, statement of values, general liability rating basis for each location.	Angio CBIZ	Ongoing	
Gather necessary underwriting information and communicate changes in exposures to insurance carriers.	CBIZ	Ongoing	
Maintain Coverage Summary which outlines basic limits and coverage for each policy written through CBIZ.	CBIZ	Ongoing	
Prepare and update Coverage Specifications prior to renewal date. This includes assistance and guidance with the completion of applications. Discuss incumbent carrier's renewal position and formulate a renewal marketing strategy.	Angio CBIZ	TBD	
Perform a marketing campaign to negotiate terms, conditions and premiums for property and casualty insurance program.	Angio CBIZ	TBD	
Present marketing analysis and coverage summary. Discuss program recommendations and premiums, and determine the best overall program design for AngioDynamics.	Angio CBIZ	TBD	
Renew insurance program with agreed upon coverages and insurance carrier. Supply complete summary of coverage bound to AngioDynamics.	Angio CBIZ	TBD	
Issue binders, certificates, automobile identification cards and invoices.	CBIZ	TBD	
Effective date of coverage (for most policies).		TBD	
Ongoing account support account. Includes updating exposures, staying aware of changes at locations and operations.	CBIZ	Ongoing	
Assist with completion of insurance company audits, retrospective rating plans or other premium calculations.	CBIZ	At Audit	



NOVEMBER	DECEMBER	JANUARY	FEBRUARY
<p>ACTIVITY</p> <ul style="list-style-type: none"> • Broker of Record letters submitted to insurance companies, allowing CBIZ to gather policies, loss runs & claims information • Sit with executive team to review and benchmark organization's current operations, and identify risk management goals and objectives for the upcoming year. <p>OUTCOME</p> <ul style="list-style-type: none"> • Ensure CBIZ is informed to support organization in its operational pursuits and has done our professional due diligence • Make sure there are no gaps in current policies and operations are fully supported by policies to guard against unwanted or unintended assumption of risk 	<p>ACTIVITY</p> <ul style="list-style-type: none"> • Perform regulatory compliance review of internal policies, procedures and documentation of locations, employees & fleet • Distribute service team contact list, noting names/contact numbers and responsibilities • Perform site visits <p>OUTCOME</p> <ul style="list-style-type: none"> • Inform of current/pending regulations and ensured that all policies, procedures and documentation are in compliance • Keep open lines of communications between teams • Site recommendations made in advance of insurance company (carrier) visits 	<p>ACTIVITY</p> <ul style="list-style-type: none"> • Conduct 1st quarter internal safety meeting • Review previous month's safety minutes • Review and assess organization's current fleet safety policy <p>OUTCOME</p> <ul style="list-style-type: none"> • Ramp up culture of safety across divisions and identify risks that may have implications across the organization • Ensure "actionable initiatives" are coming out of safety meetings and being implemented as needed • Determine when auto safety training should occur 	<p>ACTIVITY</p> <ul style="list-style-type: none"> • Sit with team to gather all information 120 days in advance of policy renewal • Facilitate 2nd quarter client on-site Lunch & Learn on identified area of opportunity within organization; Suggested - "Cyber Security: From Home to Work and Back Again" <p>OUTCOME</p> <ul style="list-style-type: none"> • Inform executive team identify opportunities in the market and renewal strategy • Lunch & Learns enhance advisor-client partnership and encourage employee accountability
MARCH	APRIL	MAY	JUNE
<p>ACTIVITY</p> <ul style="list-style-type: none"> • Submit proposals to various insurance companies, reflecting organizations preventative work in past months • Craft executive summary • Review insurance companies capabilities with regards to support and industry expertise <p>OUTCOME</p> <ul style="list-style-type: none"> • Determine the effectiveness of the current insurance company (carrier) – are they best suited • Better understanding of support that is available and to be used by executive team 	<p>ACTIVITY</p> <ul style="list-style-type: none"> • Choose insurance companies (carriers) after analysis, and negotiate renewal and proposals • Identify any open issues to be resolved <p>OUTCOME</p> <ul style="list-style-type: none"> • Provide an assessment of insurance company (carrier) performance 	<p>ACTIVITY</p> <ul style="list-style-type: none"> • Provided updated Certificates of Insurance and Automobile ID cards • Set schedule with insurance companies (carriers) for resources over the next 6 months <p>OUTCOME</p> <ul style="list-style-type: none"> • To ensure compliance with annual Department of Labor (DOL) filings 	<p>ACTIVITY</p> <ul style="list-style-type: none"> • Facilitate 3rd quarter client on-site Lunch & Learn; suggested manager training "Nice Pays when it comes to Workers' Comp" <p>OUTCOME</p> <ul style="list-style-type: none"> • Increase awareness throughout organization about opportunities for improvement in workers' compensation claim management
JULY	AUGUST	SEPTEMBER	OCTOBER
<p>ACTIVITY</p> <ul style="list-style-type: none"> • Policies are reviewed and delivered • Review disaster recovery program and business interruption plan • Assess hazardous material management program • Insurance company (carrier) site visits <p>OUTCOME</p> <ul style="list-style-type: none"> • Opportunity to check for understanding and improvement in implementation 	<p>ACTIVITY</p> <ul style="list-style-type: none"> • Coordinate claim review sessions with organization, insurance company (carrier) and risk advisor • Monitor claim handling reserves and settlement and unit stat report <p>OUTCOME</p> <ul style="list-style-type: none"> • Clear understanding of the underlying cost of claims and recommendations for improvements • Adjust reserves as needed to prevent overpayment of premium 	<p>ACTIVITY</p> <ul style="list-style-type: none"> • Conduct Annual Review <ul style="list-style-type: none"> ◦ Check for updates in exposures ◦ Payroll Review ◦ Regulatory/Compliance Update seminar for clients <p>OUTCOME</p> <ul style="list-style-type: none"> • Keeps clients/prospects abreast of current/pending regulations • Sharing of intellectual capital • Guard against surprise audit and unbudgeted cash penalty 	<p>ACTIVITY</p> <ul style="list-style-type: none"> • Provide stewardship report to executive team in advance of board presentation. Opportunity to identify any changes to the risk management services as needed <p>OUTCOME</p> <ul style="list-style-type: none"> • Ensure that board and executive team have a clear understanding of where the organization has been and is going in terms of risk management and mitigation