

## RESOLUTION 2021-055

### ENGAGEMENT LETTER FOR FMLA TPA 07/01/21

The Board of Trustees of Franklin Township, Franklin County, Ohio met remotely via teleconference via ZOOM, in a regular session on March 25, 2021 at 6:30 p.m., and the following Trustees were present:

(√) Ralph Horn      (√) John Fleshman      (√) Aryeh Alex

Trustee Horn moved for the adoption of the following Resolution:

**BE IT RESOLVED** by the Board of Trustees of Franklin Township, Franklin County, Ohio, that the Board approves Chard-Snyder Benefit Solutions as its third-party administrator (TPA) for Family Medical Leave Act (FMLA) leave administration per the proposal submitted 3/18/2021:

1. The estimated monthly fee is \$132.50 based on current staffing which will fluctuate (with a minimum charge of \$100); and
2. The price is guaranteed for three years from the effective date of 7/1/21; and
3. The fee includes onboarding of staff, an assigned case manager, employer portal for access, employee communication and coordination throughout the process, management of documentation, FMLA workflow and return to work, real-time updates with the employer, and various means of customer service.

The township administrator, or trustees-appointed qualified management staff, shall be the contact person.

Trustee Fleshman seconded the motion, the roll was called for its adoption, and the vote was as follows:

√ YES/□ NO: **Horn**      √ YES/□ NO: **Fleshman**      √ YES/□ NO: Alex

\_\_\_\_\_  
Ralph Horn, Chairman, Trustee

\_\_\_\_\_  
John Fleshman, Vice Chair, Trustee

\_\_\_\_\_  
Aryeh Alex, Trustee

*Attested to on this 25th day of March, 2021:*

*It is hereby certified that the amount of \$1000 required to pay this liability has been lawfully appropriated and is in the treasury or in the process of collection to the credit of the 1000-110-319-0000 Other Professional & Technical Services account, in the general fund, free from any obligation or certification now outstanding.*

\_\_\_\_\_  
*Fiscal Officer, Mary Rhinehart*





## 2022 Group Retrospective Rating Analysis

**Employer:** FRANKLIN TOWNSHIP

**TM:** 47%

**Policy No.:** 32520504

**EMR:** 1.47

**Max Refund:** 64.10%

**Max Assessment:** 15%

**Target Refund : 42%**

**Target Refund: \$ 49,438**

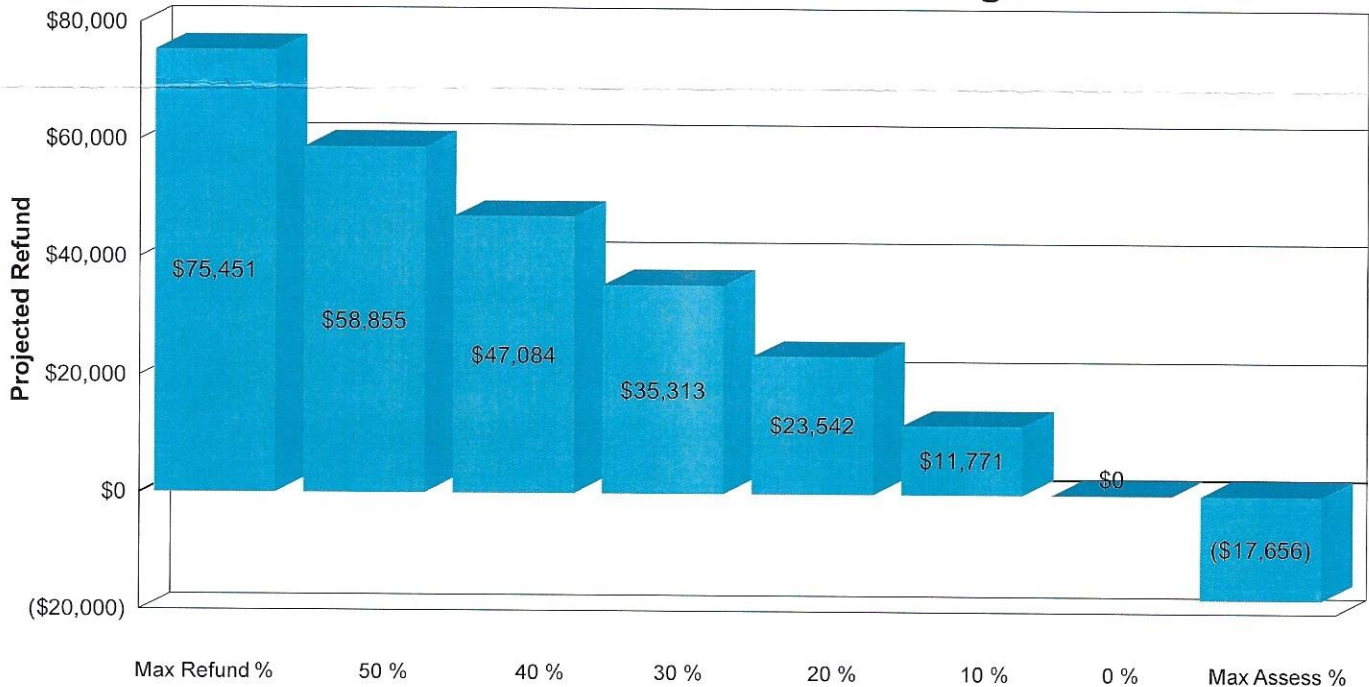
Estimated Individual Premium:	\$148,088
Less BWC Admin & DWRP:	<u>\$30,379</u>
Estimated Standard Premium:	\$117,709

Estimated Maximum Savings:	\$75,451
Estimated Maximum Assessment:	\$17,656

BWC will conduct three (3) annual evaluations to determine the refund/assessment.  
Your projected annual refunds are:

1st Evaluation Refund	\$39,550
2nd Evaluation Refund	\$8,899
3rd Evaluation Refund	\$989

### Estimated Refund Range



\*The 2022 premium amounts are for the payroll period from 1/01/2022 to 12/31/2022.

*Actual group refunds/assessments will be dependent on the performance of the entire group.*

*This projection is to be used as a guideline only for decision making purposes. The results should not be construed as actual.*

#### Instructions

- Please print or type.
- Return completed statement to the attention of the sponsoring organization you are joining.
- The sponsoring organization's third-party administrator will submit this form.
- If you have any questions, please call BWC at (614) 466-6773.

Note: This application must be review and approve by BWC's employers programs unit BEFORE it becomes effective.

Employer Name FRANKLIN TOWNSHIP	Telephone number 614 279 9411	BWC Policy Number 32520504
Address 2193 FRANK ROAD	City COLUMBUS	State OH
		Nine-digit Zip Code 43223-374

#### Group-retrospective-rating program enrollment

I agree to comply with the Ohio Bureau of Workers' Compensation Group-Retrospective-Rating Program rules (Ohio Administrative Rule 4123-17-73). I understand that my participation in the program is contingent on such compliance.

This form supersedes any previously executed U-153.

I understand only a BWC Group-Retrospective-Rating Program certified sponsor can offer membership into the program. I also understand if the sponsoring organization listed below, is not certified, this application is null and void.

I am a member of the Ohio Township Association Retro Group sponsoring organization or a certified affiliate organization and would like to be included in the Group-Retrospective-Rating Program it sponsors for the policy year beginning January 1, 2022. I understand the employer roster submitted by the group will be the final, official determination of the group in which I will or will not participate. Submission of their form does not guarantee participation.

I understand the sponsoring organization's representative Sedgwick #000900-80 (currently, as determined by the sponsoring organization) is the only representative I may have in risk-related matters while I remain a member of the group. I also understand the representative for the Group-Retrospective-Rating Program will continue as my individual representative in the event that I no longer participate in the program. At the time I am no longer a member of the program, I understand I must file a *Permanent Authorization* (AC-2) to cancel or change individual representation.

I understand a new U-153 shall be filed each policy year I participate in the Group-Retrospective-Rating Program.

I am associated with the sponsoring organization or a certified affiliate sponsoring organization.  Yes  No

Ohio Township Association Retro Group

352450

Name of sponsor or affiliate sponsor

Sponsor or affiliate sponsor policy number

Note: For injuries that occur during the period an employer is enrolled in the Group-Retrospective-Rating Program, employers may not use or participate in the Deductible Program, Group Rating, Retrospective Rating, Safety Council Performance Rebate Program, \$15,000 Medical-Only Program or the Drug-Free Safety Program.

#### Certification

MARY RHINEHART certifies that he/she is the FISCAL OFFICER of

(Officer Name)

(Title)

FRANKLIN TOWNSHIP, FRANKLIN COUNTY

(Employer Name)

, the employer referred to above, and that all of the

information is true to the best of his/her knowledge, information, and belief, after careful investigation.

X

Mary Rhinehart

(Officer Signature)

(Date)



TO: Ohio Bureau of Workers' Compensation  
 Employer Services 22<sup>nd</sup> floor  
 Self-Insured Department 22<sup>nd</sup> floor

Please mark a box and return to  
 30 West Spring St.  
 Columbus, OH 43215-2256

Fax: 614-621-1405

Policy Number	32520504
Entity (Company Name)	FRANKLIN TOWNSHIP
DBA (Doing Business As)	
Address	2193 FRANK ROAD COLUMBUS, OH 43223-374

**Note:** For this to be a **valid** letter, the employer services department, or the self-insured department for self-insured employers, must stamp it.

This is to certify that effective 7/1/2021  
Sedgwick #000900-80  
(Representative name and rep ID number)

including its agents or representatives identified to you by them, has been terminated or retained to represent us before the Ohio Bureau of Workers' Compensation and the Ohio Industrial Commission in matters pertaining to our participation in the workers' compensation fund according to the type of representation checked below.

Please check only one type of representation. See description of representatives at the bottom of this form.

<input checked="" type="checkbox"/> <b>Type of authorized representation addition/change or termination</b>		<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Terminate
<input checked="" type="checkbox"/> Employer-risk claim representative (ERC)		<input type="checkbox"/> Risk-management representative (RISK)	
<input type="checkbox"/> Claim-management representative (CLM)		<input type="checkbox"/> Payroll service vendor (PSV)	

This authorization supersedes all permanent authorizations on file for the type of representation indicated above.

I understand and agree BWC will process any letters, requests and actions initiated by a superseded authority.

I understand that this authorization, now being granted, is of a continuous nature from the effective date indicated herein. However, I possess the right to terminate this authorization at any time through written notification to the employer services or self-insured departments as appropriate.

Telephone number 614-279-9411	Fax number 614-279-6097	Email address mpotts@franklin-township.com
Print name and title Mark Potts, Administrator	Employer signature X	Date

**BWC authorized representative service/roles**

**Employer-risk claim representative (ERC)** – The ERC is designated as the employer's authorized representative for both risk- and claims-management-related issues. He or she is also the employer's authorized representative on each claim under the employer's policy number. The ERC receives copies of all risk and claim correspondence. The ERC has full access to the employer's risk information and information pertaining to the workers' compensation claims filed against the employer. He or she will also have the authority to access such information on [www.bwc.ohio.gov](http://www.bwc.ohio.gov).

BWC will consider the ERC as the authorized representative in handling risk-related issues for an employer if there is no designated group-risk claim representative (GRC). BWC also will consider the ERC as the authorized representative in handling claim-related issues for an employer if there is no designated CLM or GRC.

**Risk-management representative (RISK)** – The RISK is the employer's designated authorized representative for risk-related issues. He or she represents an employer on risk-related issues only. The RISK receives copies of all risk correspondence. A RISK will have access to only the employer's risk-related information and authority to access that information on [www.bwc.ohio.gov](http://www.bwc.ohio.gov).

BWC will consider the RISK as the authorized representative in handling risk-related issues for an employer if there is no designated GRC or ERC. The RISK will have no authority to represent the employer on any matters if either a GRC or ERC is appointed. In addition, the RISK will have access only to the employer's risk-related information and authority to access that information on [www.bwc.ohio.gov](http://www.bwc.ohio.gov).

**Claims-management representative (CLM)** – The CLM is the employer's designated authorized representative on each claim associated with the employer. He or she will receive copies of all claim correspondence. The CLM represents an employer on claim-related issues only. A CLM will have access only to information pertaining to the workers' compensation claims filed against the employer and authority to access that information on [www.bwc.ohio.gov](http://www.bwc.ohio.gov).

BWC will consider the CLM the authorized representative in handling claims-related issues for an employer.

**Payroll service vendor (PSV)** – A payroll service vendor provides payroll services, including reporting and/or withholding and remittance services for workers' compensation premium payments.

**Note:** Based on the designation made by the group's sponsor, only the employer services group-rating unit can update a GRC.

You cannot use the AC-2 to select a GRC authorization. This representative type only applies to private employers and public employer taxing districts. BWC will consider the GRC the authorized representative in handling risk-related issues for an employer. In addition, BWC will consider the GRC the authorized representative in handling claim-related issues for an employer if there is no designated claims-management representative (CLM).



# GROUP RETRO



March 16, 2021

MARY RHINEHART  
FRANKLIN TOWNSHIP  
2193 FRANK ROAD  
COLUMBUS, OH 43223-374

Re: 2022 Group Retrospective Rating Re-Enrollment for Policy # 32520504

We are pleased to announce that your organization has qualified for re-enrollment in the 2022 Ohio Township Association Retro Group.

### 2022 Group Retrospective Rating projection:

<b>Target Refund %</b>	<b>42%</b>
<b>Target Refund \$*</b>	<b>\$ 49,437</b>

\*Refund is based on estimated standard premium of \$117,709.

Our group retrospective programs are successful and consistently generate significant refunds because of our focus on safety best practices, client education, and aggressive claims management.



To re-enroll, simply sign and return the enclosed U-153 enrollment form with invoice and payment, or enroll online at [www.sedgwick.com/ohiotpa/enroll](http://www.sedgwick.com/ohiotpa/enroll).

As a reminder, when enrolling in a group retrospective rating program, BWC does not allow the stacking of discounts with any of the following programs: \$15k Medical Deductible, Drug Free Safety, Industry Specific Safety, Transitional Work Bonus and One Claim. However, Group Retro has the potential to provide **significant refunds** in comparison to these other alternative rating programs.

If you have questions, please contact **Ken Main** at **614-769-4095** or [Ken.Main@sedgwick.com](mailto:Ken.Main@sedgwick.com).

# ○ No Noise

Our personal service makes your job easier



# How We Deliver No Noise

## Chard Snyder at a Glance

- **Located in Cincinnati, Ohio**
- **Providing expert “no noise” benefits administration** since 1988
- **Joined the Ascensus family** of companies in 2018
- **Administer plans** nationwide for clients of all sizes with a few employees to over 400,000
- **Serve all industries** (Key markets: higher education, healthcare, manufacturing, municipalities, those requiring high level of service)
- **Offer a personal, flexible approach** for even the most complex & high-touch clients & plans

## Our Services

We offer an integrated approach to meet your unique benefit plan needs including:

### Savings & Spending Accounts

FSA  
HRA  
HSA Advantage™  
Commuter Benefits

### Benefit Continuation Services

COBRA  
Retiree Billing  
Direct Billing  
Other Billing & Reimbursements

### FMLA Leave Administration

End-to-end process management

### Plan Document Services

Wrap Documents  
Premium-Only Plans  
Plan-Specific Documents & Testing



## Industry-Leading Results

**+94%** Client retention

**<30 seconds** Average speed of answer

**92%** Overall satisfaction rating

**+93%** Auto-substantiation rate

Chard Snyder advisors and clients appreciate our unique focus on





# FMLA Administration Overview

## FMLA Overview

The Family Medical Leave Act (FMLA) is gaining in popularity as more employees utilize the leave law. Administering FMLA in-house and remaining compliant can be incredibly challenging. Chard Snyder is your expert resource with an end-to-end, systematized solution for FMLA administration. We take away the worry and burden of a time-consuming, complex process and keep you compliant.

Employers having 50 or more employees for at least 20 weeks in the current or previous year must comply with FMLA. To be eligible for FMLA leave, employees must work within a 75-mile radius of the company's base location. Operating in multiple states makes remaining compliant more difficult. Chard Snyder makes it easy for you to balance the demands of your business with employee personal health concerns for themselves and their family. Chard Snyder administers FMLA leave for groups as small as 50 lives (no minimum number of employees).

## What is FMLA?

*12 weeks unpaid, job-protected leave during a 12-month period (eligible employees) for:*

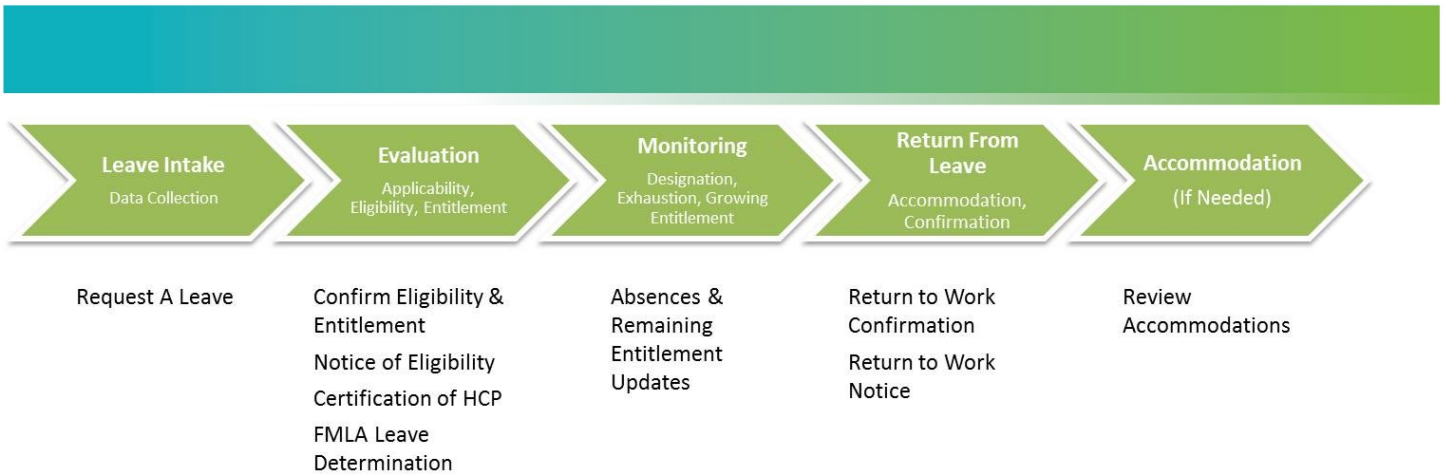
- Birth, care of newborn child or placement of child for adoption or foster care
- Employee's serious health condition
- Care for immediate family member (spouse, child or parent) with a serious health condition (physical or mental)
- Exigent circumstances related to military member called to active duty

*26 weeks unpaid, job-protected leave during a 12-month period (military caregiver) for:*

- Care of spouse, parent, child or next of kin who is injured or recovering from injury incurred while on active duty

## Implementation

Each client will have a full onboarding orientation to train your HR staff on the overall process, key roles and answer any questions that you may have. Your administrator will begin by verifying information on your FMLA program and leave policies in order to personalize the administration to best meet your needs and expectation.



## Ongoing Service

Your Chard Snyder FMLA Case Manager will manage your FMLA claims—working directly with your employees and HR point of contact. They will keep you informed of the status of each employee and provide monthly reports to provide a snapshot view of your cases.

Chard Snyder will manage processing leaves for the client. Your Case Manager will ensure that the correct process for each leave is executed correctly and timely.

Our end-to-end management of the FMLA process includes:

- An assigned FMLA Case Manager
- Employee correspondence & absence tracking
- General policy questions related to FMLA Leave
- Employer monthly status reports:
  - Continuous leaves
  - Intermittent leaves
  - Summary of last 30 days absences
  - Remaining entitlement
- Employer portal access with a dashboard to show a snapshot of the trends:
  - Reason & demographics
  - Leave duration
  - Leave characteristics
  - Absence patterns day & month
  - Lost work days
- Compliance with all state & federal regulations

## Employee Communications

We know that having clear communications with your employees is essential to managing your FMLA administration. That's why we have employee communication materials, such as the Leave Request Form and the Entitlement Update Letter that are easy for your employees and staff to understand. Our goal is for your employees to have a clear understanding of what is needed to utilize the job-protected leave time period.



## **Compliance Focus**

- Assigned FMLA case manager ensures confidentiality and maintains critical “gates and dates” for your FMLA time frames
- Communication and coordination with employees throughout the process with documentation to substantiate compliance
- Live, knowledgeable, US-based customer service representatives available Monday-Friday, 8 am-5 pm ET for participant questions

## **Smart Technology**

- Employer portal for HR access and trends analysis
- Supports legal compliance across multiple states and federal regulations
- Monthly status reports provided (overview of client cases, continuous and intermittent, absences and remaining entitlement)

## **Your Client Management Team**

Excellent account management practices are a cornerstone of a smooth running benefit plan. Chard Snyder will provide each client with a full, assigned team for the administration of your plan, including a Regional Vice President, Client Relationship Manager and Plan Administrator/Case Manager.



# FMLA Leave Administration

## Proposal for Franklin Township

Advisor:	Brian Lenzo
Agency:	HUB International
Chard Snyder contact:	Heather R. Harte
Proposal date:	03/18/2021
Anticipated start date:	07/01/2021
Number of FMLA eligible employees:	53
Per FMLA eligible per month:	\$2.50
One time administration setup fee:	Waived
Estimated Monthly fee:	\$132.50*

\*The monthly minimum charge, \$100.00, is applicable only when the calculated fee is less than the monthly minimum.

Price guaranteed for up to three years from plan effective date.

Government-mandated changes to plan administration may create extra charges.

Price is valid through anticipated start date

### Optional services

- Midyear plan termination: One month's administration fee
- End of plan year termination charge: One month's administration fee

### Monthly administration fee includes:

- Standard onboarding with your HR Staff
- **Dedicated Implementation Project Lead**
- **Assigned Family and Medical Leave Act (FMLA) case manager**
- Up-to-date compliance with all federal and state regulations
- Employer portal for HR access and trends analysis
- Monthly Employer Status Reports
- Communication and coordination with employees throughout the process
- Real-time updates with your HR Staff
- Management of documentation, FMLA workflow and return to work
- Customer service center open 8am-5pm ET, Monday-Friday
- Customer Service via toll-free line and direct email

# FMLA Leave Administration

## Sample Implementation Schedule



### 60 Days Before Effective Date

- A one hour kickoff meeting is held—we will discuss the following with your company’s primary contact:
  - Implementation schedule and activities
  - Overview of your employee population:
    - Number of employees
    - Quantity of FMLA eligible employees
    - Count of current FMLA cases
    - Average number of FMLA cases per month
  - Current FMLA administration practices including:
    - Your FMLA policy including if employees are required to take PTO and sick time concurrently
    - Measurement calendar
    - Collection of benefit deductions and insurance premiums while on leave
  - Any updates to the FMLA policy that will be implemented with the transition
  - Finalize the FMLA measurement calendar that we will use to manage your cases
  - Discuss how we will be notified of new cases and intermittent leaves
  - Who on your HR team will receive online access to the employer portal
  - We will provide you with a template to complete that will assist with the transition of active FMLA cases that will need to be completed prior to the transition call
- Next, Chard Snyder creates the custom documents for your group including the administrative agreement and business associate agreement. We will send them to you for review and signatures.
- We set-up your administration in our system and ensure that all items are ready for a smooth FMLA administration.

### 15 Days Before Effective Date

- A one hour transition call is held to move your plan from the implementation phase to live administration. We will cover the following items:
  - Your Implementation Specialist will introduce you to your Case Manager who will provide ongoing service.
  - The new client orientation guide will be reviewed to ensure that you understand how the administration will work.
  - We will review your completed template to transition any current FMLA cases.
  - Your HR representatives will be set-up with online access to view the FMLA Administration information.