

SELF INSURED SERVICES COMPANY
doing business as BENEFIT COORDINATORS CORPORATION

FIRST AMENDMENT TO AGREEMENT FOR SERVICES #6274

THIS FIRST AMENDMENT to that Agreement for Services #6274 made and entered into by and between the County of El Dorado, a political subdivision of the State of California (hereinafter referred to as "Employer"), and Self Insured Services Company, doing business as Benefit Coordinators Corporation, an Iowa corporation duly qualified to conduct business in the State of California, whose principal place of business is 2 Robinson Plaza, Suite 200, Pittsburgh, Pennsylvania 15205, and whose mailing address is Post Office Box 389, Dubuque, Iowa 52004 (hereinafter referred to as "Administrator");

R E C I T A L S

WHEREAS, Administrator has been engaged by Employer to provide Health Plan Third Party Administrative Services for the Employer's Human Resources Department pursuant to Agreement for Services #6274, dated April 29, 2022, incorporated herein and made by reference a part hereof (hereinafter referred to as "Agreement");

WHEREAS, the parties hereto desire to amend the Agreement to update the schedule of fees to include the revised Annual COBRA and Retiree Open Enrollment Fulfillment/Communication Services Fee Schedule, replacing **SCHEDULE OF FEES EXHIBIT** with **AMENDED SCHEDULE OF FEES EXHIBIT**, amending **SECTION II – ADMINISTRATION FEES, subsection 2.1**;

NOW, THEREFORE, in consideration of the foregoing and the mutual promises and covenants hereinafter contained, Employer and Administrator mutually agree to amend the terms of the Agreement in this First Amendment to Agreement for Services #6274 on the following terms and conditions:

- I. **SCHEDULE OF FEES EXHIBIT**, is replaced in its entirety with **AMENDED SCHEDULE OF FEES EXHIBIT**, attached hereto and incorporated herein by reference. All references to **SCHEDULE OF FEES EXHIBIT** throughout the Agreement are substituted with **AMENDED SCHEDULE OF FEES EXHIBIT**.
- II. **SECTION 2 – ADMINISTRATION FEES, subsection 2.1**, of the Agreement is amended in its entirety to read as follows:
 - 2.1 For the purposes hereof, for the period beginning with the effective date of this Agreement and continuing until the day before the effective date of this First Amendment to the Agreement, Employer shall pay fees to the Administrator as set forth in the Schedule of Fees Exhibit of this Agreement. For the period beginning with the effective date of this Amendment and continuing through the

remaining term of the Agreement, Employer shall pay fees to the Administrator as set forth in the Amended Schedule of Fees Exhibit, attached hereto and incorporated herein by reference, of this Agreement. The Administrator's fees will be subject to revision at the contract renewal and any change in fees will be communicated to Employer delivered in writing sixty (60) days prior to the effective date of the change. Administrator reserves the right, with 30 days' written notice, to modify fees if Employer's employee base is modified by a 20% or greater percentage.

Except as herein amended, all other parts and sections of Agreement for Services #6274 shall remain unchanged and in full force and effect.

IN WITNESS WHEREOF, the parties hereto have executed this First Amendment to Agreement for Services #6274 on the dates indicated below.

-- COUNTY OF EL DORADO --

By: _____

Dated: _____

Board of Supervisors
"County"

Attest:
Kim Dawson
Clerk of the Board of Supervisors

By: _____

Dated: _____

Deputy Clerk

-- SELF INSURED SERVICES COMPANY

doing business as

BENEFIT COORDINATORS CORPORATION --

By: *Susan L. Zajacs*
Susan L. Zajacs (Sep 2, 2022 11:45 EDT)

Dated: 09/02/2022

Susan L Zajacs
Vice President Pittsburgh Operations
"Administrator"

**BENEFIT COORDINATORS
CORPORATION ADMINISTRATION
AGREEMENT**

AMENDED SCHEDULE OF FEES EXHIBIT
*Schedule of Fees for County of El Dorado
as of 8/25/2022*

Consolidated Invoicing:

Initial, non-refundable Setup Fee due upon execution of this Agreement:	<u>\$N/A – included in Prism Program Fee</u>
EDI Carrier Connection Fee – per carrier:	<u>\$1,500 If Required</u>
Monthly Administration Fee:	<u>\$N/A – included in Prism Program Fee</u>
Monthly Ancillary Administration Fee(s):	<u>\$7.00</u> per Participant Enrolled In a Non-Prism Medical Plan <u>\$0.50</u> per Participant Enrolled In a Medical Plan per Month

Flexible Spending Account Administration:

Initial, non-refundable Setup Fee due upon execution of this Agreement:	<u>\$N/A – included in Prism Program Fee</u>
Monthly Administration Fee:	<u>\$N/A</u> - included
Minimum Monthly Fee:	<u>\$N/A</u> - included
Annual Renewal Fee:	<u>\$N/A</u> - included
Debit Card Fee:	\$0.00*

****BCC receives a small percentage of each debit card swipe from Alegeus Technologies, LLC to offset any expenses in issuing debit cards to the employees or dependents over the age of 18.***

COBRA Administration:

Initial, non-refundable Setup Fee due upon execution of this Agreement: \$N/A – included in Prism Program Fee

Monthly Administration Fee (with Initial Notices): \$N/A – included in Prism Program Fee

Minimum Monthly Fee: \$N/A – included

COBRA Initial Notice to Active Participants (if elected): *BCC to process initial notices associated with Life Events, client to process initial notices per new hire \$4.00 per Initial Notice associated with a Life Event

BCC invoices the COBRA participant the monthly premium plus 2% (BCC retains) representing the COBRA Administration allowance permitted under The Consolidated Omnibus Budget Reconciliation Act.

Retiree Administration:

Monthly Administration Fee: \$N/A – included in Prism Program Fee

Monthly Ancillary Administration Fee(s): \$7.00 per Retiree Enrolled In a Non-Prism Medical Plan

\$0.50 per Retiree Enrolled In a Medical Plan per Month

Minimum Monthly Fee: \$N/A – included

Other Fees and Services:

Annual COBRA and Retiree Open Enrollment Fulfillment/Communication Services

- OPTION A: Census Report No Charge
- OPTION B: Website & Notification Letters \$250 PER WEBSITE, **and** \$4 PER LETTER

Printed open enrollment packet fulfillment charge:	\$25.00 per packet; must be pre- approved by client prior to mailing
Additional Services and Materials:	Fees quoted upon request
Wire Transfer Fee:	\$25.00 per wire
Development hours exceeding standard development time (as quoted per project)	\$125/hour
ACH Transfer Fee:	No Charge
Non-Sufficient Funds Fee:	\$25.00 per rejected check/transaction
Reinstatement Fee:	\$500
Meetings, Health Fairs	No charge for webinars. On-site meetings may incur time/travel charge. Fees will be quoted when meeting is requested.