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**MYBENEFIT
ADVISOR**

MY BENEFIT ADVISOR

Employee Benefits Capabilities Presentation



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My Benefit Advisor

guides employers through planning, communicating, and managing a successful employee benefits program.

About Us

My Benefit Advisor (MBA) is an employee benefits consulting firm designed to guide employers through the complexity of planning, communicating, and managing a successful employee benefits program. Our client relationships are driven exclusively through a select group of brokers.

My Benefit Advisor provides employers with an exceptional array of services including:

Advisory Team

An advisory team of talented professionals with wide-ranging areas of expertise.

Health Care Reform Consulting

Guidance on understanding this complex legislation to formulate the appropriate business strategy.

Analysis, Strategy, & Design

In-depth analysis, strategy, and design of a long-term employee benefits solution.

Open Enrollment & Communication

A superior open enrollment experience for employees and new hires through innovative technology and resources.

Proactive Management

Proactive benefits management leveraging technology and a structured operational process.

Compliance Assistance

Compliance guidance to assist with complex benefit, reform, and legislative issues.

Our History.

MBA is operated by Emerson Reid LLC., the largest wholesale employee benefits General Agent in New York, New Jersey, Connecticut, and Pennsylvania.

1972

Emerson Reid was founded in **1972** as a Statutory Disability wholesale distributor serving the entire state of NY and grew to be the largest DBL broker in New York.

1998

In **1998**, Emerson Reid entered the medical wholesale business to support independent insurance brokers in the sale and service of employee benefits products.

2006

In **2006**, Emerson Reid established My Benefit Advisor to provide employers with best-in-class service on behalf of a select group of insurance brokers.

TODAY

Today, Emerson Reid and My Benefit Advisor have over 150 employees and manage over \$3 billion in health care premium, over 10,000 group statutory disability policies, and 5,000+ ancillary line cases.

My Benefit Advisor

employs knowledgeable and proactive professionals to provide our clients with first-class service and support.

Advisory Team

The MBA client advisory team consists of talented professionals with wide-ranging areas of expertise to provide clients with first-class support in all aspects of their employee benefits program.



■ Advisor

The client's trusted advisor for long term consulting in establishing a successful employee benefits program, inclusive of appropriate coverage, cost control, contribution strategies, plan design, and ancillary products.



■ Account Executive

A seasoned insurance veteran who brings the unique perspective of having consulted hundreds of benefits programs for employers of all sizes and has valuable working relationships with carrier representatives.



■ Account Manager

A licensed Account Manager is responsible to assist with the daily administration of the employee benefits package. Areas of assistance include, but are not limited to, claims support, general questions on policy and procedure, billing inquiries and transaction processing.



■ Implementation Specialist

An Implementation Specialist works with the client and account manager to ensure new clients get on board properly and are maximizing our client resources and services for the most positive customer service experience.



■ Technology Specialist

Our Technology Specialist provides demonstrations and in-depth training on our online enrollment and benefits administration system, client portal, and our vendor solutions including wellness, payroll, HRIS, and employee shopping rewards program.



■ Benefits Counsel

Our on-staff counsel monitors industry changes, legislative news, and health care reform requirements to prepare useful communication bulletins that help simplify these complicated issues for our clients.



■ Ancillary & Worksite Specialist

An ancillary expert will educate the client on how to best complete the employee benefits program through employer sponsored and/or voluntary products and then will take the lead on negotiating and securing the desired plans.



■ Disability/TDB Department

Considered the premier DBL agent in NY and NJ, our staff can access up to 18 carriers and specializes in competitive pricing, administration, and servicing of state mandated disability plans across all statutory states.

My Benefit Advisor

offers in-depth analysis, strategy, and design for long term employee benefit solutions.

Our Approach

The MBA approach towards a successful employee benefits program consists of four core categories: benefits consulting, enrollment & communication, benefits management, and compliance assistance. Throughout our process, the MBA advisory team provides the knowledge and experience to deliver client focused solutions.



Consulting

The Advisory Team's deep understanding of the marketplace, health care reform, and strategies for multi-year cost containment leads to a successful employee benefits program.



Compliance

As health care reform unfolds, our on-staff Benefits Counsel prepares insightful guidance around the employer's responsibilities, options, and potential consequences for non-compliance.



Enrollment

Innovative technology and the unique experience of an Implementation Specialist help ensure the plan information and value of the benefits are properly communicated to employees.



Management

A designated Account Manager equipped with a proactive 12 month service calendar provides continuous assistance with the ongoing administration and optimization of the program.



Benefits Consulting

Our role in benefits consulting has changed with the adaptation of health care reform. As an advisor, our responsibility is no longer primarily limited to evaluating and recommending carriers, plan options, and funding strategies. In today's market, our role begins with ensuring our clients understand the impact of health care reform and formulating a benefits strategy that is in-line with reform, organizational culture, and financial objectives.

■ Health Care Reform

As the Affordable Care Act (ACA) continues to unfold and evolve, employers are turning to My Benefit Advisor for guidance on interpreting the legislation and understanding the impact to their business.

Our Benefits Counsel actively monitors pending legislation and interprets regulations to help ensure our staff and clients are aware, educated, and prepared to make informed decisions.

Our Advisors take the leadership role in helping employers understand their business options around health care reform relative to compliance, employee satisfaction, and financial risk management. With multi-year cost containment in mind, we will recommend a course of action that addresses the organization's short and long term objectives with the appropriate benefits strategy.

Employers planning for 2014 will need to consider:

- Affordable coverage
- Cost sharing subsidy
- Defined contributions
- Employer penalty
- Full-time employee status
- Government reporting
- Minimum essential coverage
- Notification requirements
- Premium tax credit
- Public and private exchanges
- Risk management
- W-2 safe harbor, and more

■ Complete Financial Analysis

Diligent review of existing benefits program; inclusive of short and long term budgetary requirements, minimum standards, and consideration of employee satisfaction.

■ Carrier and Plan Alternatives

All applicable insurance carriers are considered in every product market, ensuring a thorough analysis of all options available and strategies considered.

■ Alternative Funding Strategies

Education and advice on alternative funding strategies: minimum premium, fully insured, health savings account, health reimbursement account, or self-funding.

■ Third Party Administrator Options

Review of third-party administrator options, including: health savings accounts, health reimbursement arrangements, flexible spending accounts, section 125, dependant care accounts, and transit.

■ Ancillary and Voluntary Benefits

Best practices on how to incorporate employer sponsored and/or voluntary benefits to strengthen employee morale, loyalty, and productivity.

■ Wellness Programs

Provide guidance on selecting a vendor to implement a wellness strategy with incentives to positively impact employee health, productivity, and health care expense.

Enrollment & Communication

Our enrollment tools help improve the communication of benefits programs to employees. An MBA Implementation Specialist will coordinate the installation of a series of tools to help facilitate the open enrollment process, including:

On-Demand Benefits Video

In addition to traditional in-person and webinar enrollment meetings, MBA can replicate the presentation in an on-demand video format complete with web links and supporting documents. This is useful for employees who are unable to attend, are hired at a later date, or those who want to re-review the information. Employers have the option of recording an introductory message, which is done easily via telephone.

Benefits Guidebook

MBA can assist employers with developing a benefits guidebook for distribution to their employees. The number of employees determines eligibility and guidebook format. Our guidebooks help improve the communication of the benefits program and plan details to employees.

Employee Hotline

MBA can provide wallet-sized cards to distribute to employees highlighting an 800 number for answers about their benefits package. The line is activated 30 days before and remains on 30 days after their renewal date. This resource helps to ease the burden away from the HR Administrator regarding general employee questions about the benefit plans.

Online Enrollment System

MBA's enrollment system is available for employers to improve and streamline benefits communication complete with plan summary documents, side-by-side comparisons, plan rates, and carrier resources. Employees will be delighted with a faster, more convenient, and paperless enrollment experience. HR Administrators benefit from the ability to track the completion of employees' enrollment and an easy tool to generate HR and payroll deduction reports in Excel.



On-Demand Benefits Video

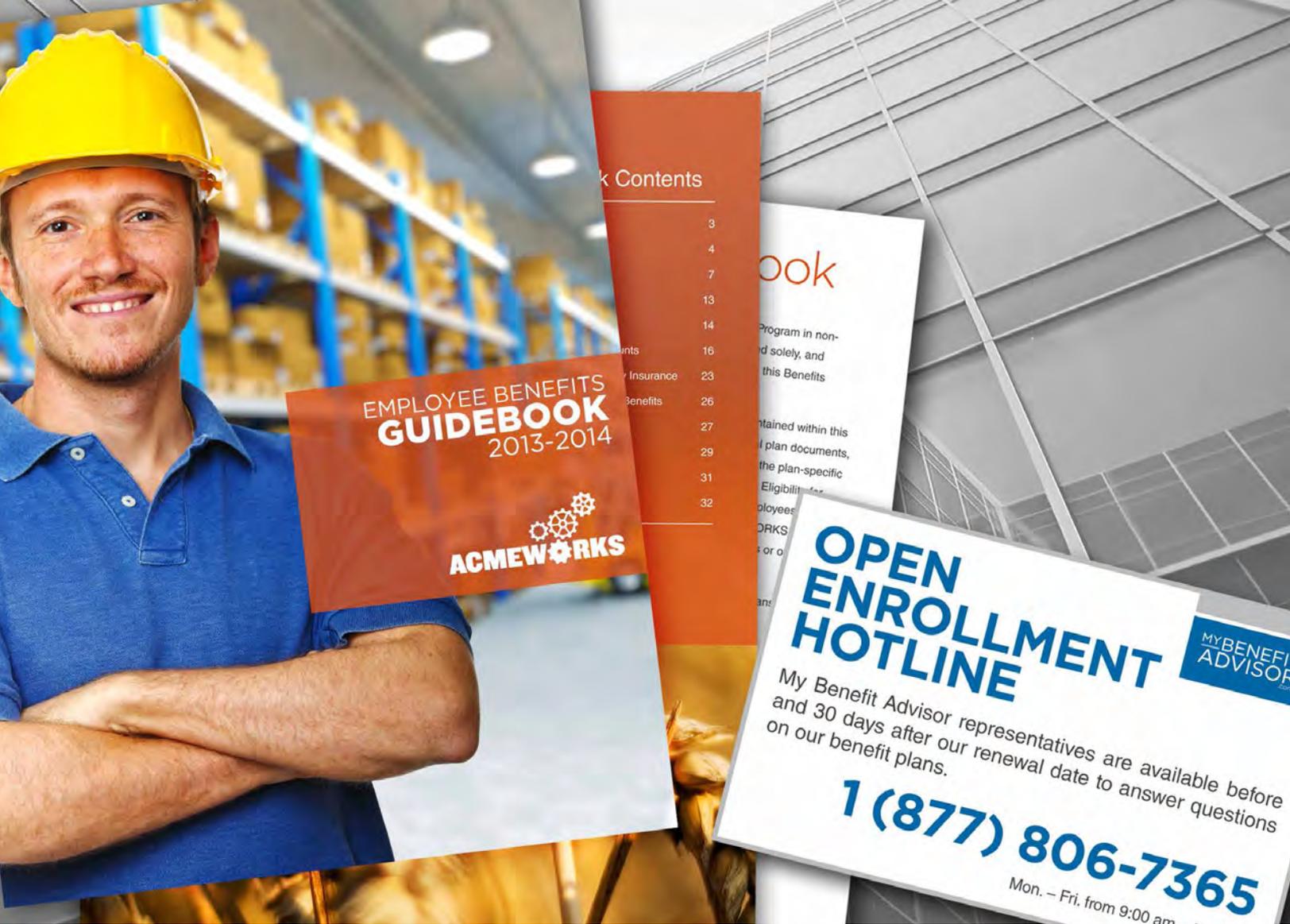
Our enrollment videos are hosted online and can be password protected. The table of contents enables viewers to skip or revisit sections as desired. The attachment tab includes supporting documents and web links. Employees can view the video from their computer, tablet, or mobile device.



Guide for ACMEWorks Inc.

Attachments	Duration
ion	00:34
Contents	01:44
ty	03:34
cal Benefits	02:31
osing a Medi ...	02:48
A Plans	01:33
SA Plans Cont ...	02:09
SA Tax Savings	03:12
HSA Example	02:03
More Information	03:10
Get Started	00:31

Total Duration: 24:49/24:49



Benefits Guidebook

Our benefits guidebooks help employers communicate their benefits program to employees. The MBA Implementation Specialist will obtain the plan information from the Account Manager and coordinate with the employer for any additional information needed.

The number of employees determine the appropriate format and whether electronic delivery or printed copies are appropriate. At a minimum, the guidebooks feature an attractive cover, opening statement, and benefit plan designs. In NY, the Department of Financial Services may require MBA to charge a fee to include content outside the area of the benefits program.

Employee Hotline

The employee hotline is a direct, confidential resource for employees to call with questions related to their upcoming renewal options. If employees have questions on how a specific benefit will be covered, what their contributions will be, or simply how to choose a Primary Care Physician (PCP), they can call us directly, thus removing the burden from the HR Administrator.

The hotline remains open for 30 days after the renewal date. Employees who call after this period will be directed to the Benefits Administrator or the appropriate insurance carrier's member service number.

Online Enrollment System

My Benefit Advisor can provide an employee benefits communication portal and/or a self-service enrollment system for employees to update personal information, add dependents, and make benefit elections. The system features a class-based rules engine enabling employees to only see what is offered to them.

Employees can view side-by-side plan comparisons, rates per pay period, and benefit summaries to assist with making decisions. Employers can track the completion of each employee's enrollment and assist where needed. The reporting tool features custom report building, the ability to save report templates, and easy export to Excel. After the open enrollment period, the system can be used to manage life events, new hires, and dependents.

Enrollment System

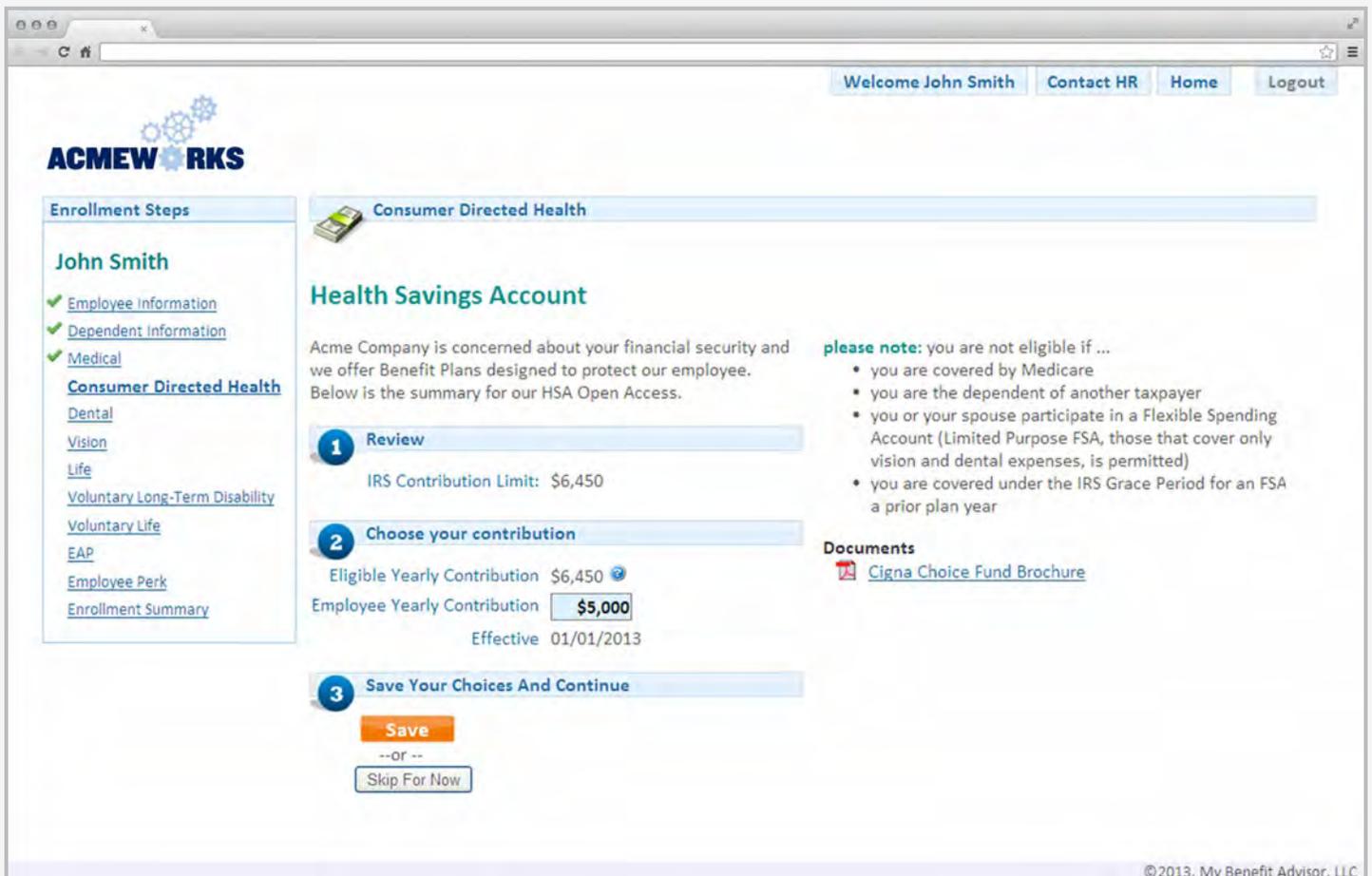
If the carrier accepts enrollment data electronically, MBA will configure the enrollment system with employer's logo, benefit plans, and company information to conduct the open enrollment process.

Communications System

If the carrier requires hard copy enrollment forms with wet signatures, the system can be set up to communicate benefits and provide access to forms for the employee to complete and return to the Benefits Administrator.

Step-by-Step Enrollment Process

The system guides employees through the enrollment process with a step-by-step checklist. Each section contains all plan information, rates, and documents. The compare plan feature is available when multiple plans are offered.



The screenshot shows the ACMEWORKS Online Enrollment System interface for John Smith. The page is titled "Consumer Directed Health" and "Health Savings Account". It features a navigation menu on the left with links for "Enrollment Steps", "John Smith", "Employee Information", "Dependent Information", "Medical", "Consumer Directed Health", "Dental", "Vision", "Life", "Voluntary Long-Term Disability", "Voluntary Life", "EAP", "Employee Perk", and "Enrollment Summary". The main content area displays the "Health Savings Account" details, including the IRS Contribution Limit of \$6,450, the Employee Yearly Contribution of \$5,000, and the Effective Date of 01/01/2013. A "Save" button is visible, along with a "Skip For Now" button. A "Documents" section lists "Cigna Choice Fund Brochure". A "please note" section provides eligibility criteria for the HSA Open Access plan.

Welcome John Smith | Contact HR | Home | Logout

ACMEWORKS

Enrollment Steps

John Smith

- ✓ Employee Information
- ✓ Dependent Information
- ✓ Medical
- Consumer Directed Health**
- Dental
- Vision
- Life
- Voluntary Long-Term Disability
- Voluntary Life
- EAP
- Employee Perk
- Enrollment Summary

Consumer Directed Health

Health Savings Account

Acme Company is concerned about your financial security and we offer Benefit Plans designed to protect our employee. Below is the summary for our HSA Open Access.

1 Review

IRS Contribution Limit: \$6,450

2 Choose your contribution

Eligible Yearly Contribution \$6,450

Employee Yearly Contribution **\$5,000**

Effective 01/01/2013

3 Save Your Choices And Continue

Save

--or--

Skip For Now

Documents

-  [Cigna Choice Fund Brochure](#)

please note: you are not eligible if ...

- you are covered by Medicare
- you are the dependent of another taxpayer
- you or your spouse participate in a Flexible Spending Account (Limited Purpose FSA, those that cover only vision and dental expenses, is permitted)
- you are covered under the IRS Grace Period for an FSA a prior plan year

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Benefits Management

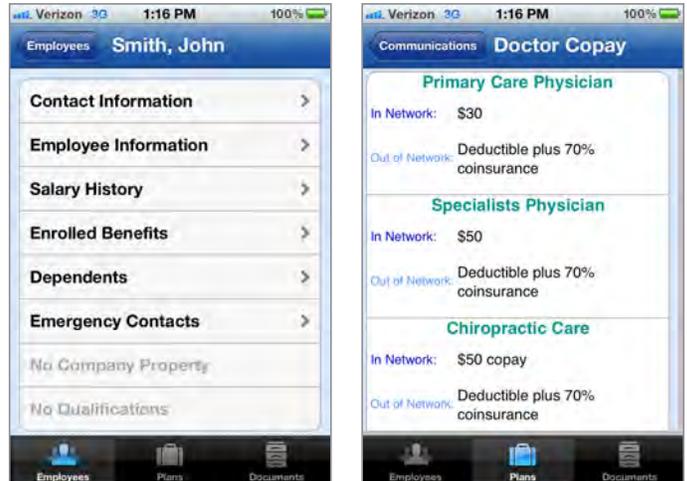
Providing in-depth consultative advice with an ease of doing business and regular proactive communication is the foundation for helping our clients manage their employee benefits program.

HR & Benefits Administration System

Employers that leverage the MBA enrollment system can continue to utilize the platform to maintain employee records, create and run HR data reports, and allow employees to enter life event changes and new hire enrollments.

Mobile Access

A free mobile app is available in the Apple and Android stores, enabling HR Administrators to access plan information, documents, and employee information directly from a smart phone or tablet.



12 Month Service Calendar

Account Managers have a structured 12 month service calendar with automatic reminders to help ensure we are proactively managing and communicating the renewal process to our clients.

MYBENEFIT
ADVISOR

12 Month Service Calendar: AcmeWORKS, Inc.

+ Information

Details

300+ Renewal Calendar

Renewal Details

Notes

6 Months Prior

1. Request updated data from the client for RFP. Complete ▾
2. Coverage checklist completed. Complete ▾
3. Additional vendor services requested. Complete ▾
4. Compile RFP for client review and submission to markets. Complete ▾
5. Confirm enrollment method. Complete ▾

Census Template

5 Months Prior

1. Deliver renewal to client in person. Complete ▾
2. Discuss target rate change, funding, contribution and plan design strategies. Complete ▾
3. Obtain provider listing for disruption reporting. Complete ▾

Standard Contribution Analysis

4 Months Prior

1. Deliver marketing results to client with benefits and cost analysis. Complete ▾
2. Negotiate final renewal from incumbent carrier. Complete ▾
3. Finalist presentations from carriers. Complete ▾
4. Final decision from client on carrier selection. Complete ▾
5. Confirm enrollment schedule. Complete ▾

Enrollment Schedule Template

Presented by Total Benefit Solutions Inc
For more information call: (215)355-2121
<http://www.totalbenefits.net>

■ Designated Account Manager

Clients are assigned a designated Account Manager as a familiar point of contact for the daily administration of their benefits program, claims support, general questions on policy and procedure, and billing inquiries.

Our Account Managers attend regular training and continuing education meetings. These include carrier product updates, carrier policy and procedures, industry updates, and legislative news.

■ Transaction Processing

Within our team is a dedicated resource to handle all transactions to carriers on the client's behalf. This includes new hire enrollments, terminations, life event changes, and COBRA coordination.

■ Proactive Communication

We keep our clients informed through multiple methods including proactive conversations, periodic on-site visits, our client portal, a monthly newsletter, email notifications, webinars, and on-demand videos.

■ Claims & Healthcare Advocacy

MBA is available to assist with claim resolution and related issues. If the issue is clinical in nature, such as a medical procedure approval, we will connect the employee with a registered nurse for assistance.

■ Client Portal

Through our secure website, HR Administrators can retrieve benefit plan information, access compliance bulletins and forms, and interact with other HR Administrators through the Community Message Board.

Compliance Assistance

MBA provides compliance assistance to employers through a combination of our on-staff benefits counsel and our trusted third party vendors. In addition we can help employers research complex topics of benefits administration.

■ Timely Guidance on Important Topics

As new compliance and reform topics come forward, our on-staff counsel prepares helpful bulletins, self-help tools, and/or video presentations to provide guidance on these complicated benefit and legislative issues.

2012 Compliance Bulletin Topics

- JAN** Wage Theft Prevention Act Annual Notice Deadline
- JAN** Planning for FSA Changes in 2013
- FEB** IRS Issues Interim Guidance on W-2 Reporting
- FEB** Coverage of Contraceptive Services
- MAR** Challenge to Health Care Reform Law at the Supreme Court
- APR** Guidance on SBC Requirement
- MAY** New Research Fee Required for Group Health Plans
- MAY** Minimum Value and Reporting Provisions
- JUN** 2013 HSA Limits
- JUN** Verification of Coverage for Premium Tax Credits
- JUN** FSA Limit Guidance
- JUN** The Affordable Care Act Is Upheld!
- JUL** What do Employers do with MLR Rebates?
- AUG** Increased Medicare Taxes on High Earners
- AUG** Research Fee for HRAs and FSAs
- SEP** Medicare Part D Reminder
- SEP** Non-Profit Employers Providing Contraceptives
- SEP** Additional Guidance on Full-Time Employees
- SEP** Additional Guidance on 90-Day Waiting Period
- OCT** IRS Confirms W-2 Safe Harbor
- NOV** The Basics of the Employer Mandate and Penalty
- NOV** Mini-Meds: Waiver Resubmission
- NOV** How do the Election Results Affect Health Care Reform?
- NOV** Change Plan Year to Delay Health Reform Provisions?
- NOV** Guidance on Market Reforms, Essential Benefits and Wellness
- DEC** Guidance on Wellness Programs
- DEC** Guidance on Mandated Coverage
- DEC** Final Regulations on Research Fee
- DEC** Guidance on New Health Insurance Market Rules

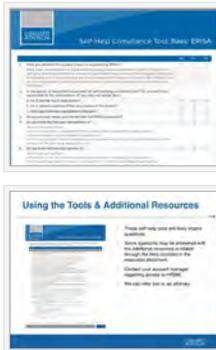


2012 Compliance Video Topics

MAY Self-Help Compliance Tools: COBRA, ERISA, FMLA, HIPAA and USERRA



Self-Help Compliance Tools
ERISA, COBRA, USERRA, FMLA and HIPAA



AUG Health Care Reform: Post Supreme Court Decision



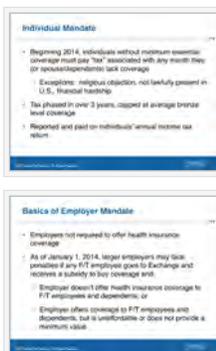
Post Supreme Court Decision
Health Care Reform: August 2012



NOV Health Care Reform: Employer Mandate & Penalty



Employer Mandate and Penalty
Health Care Reform: November 2012



Wellness in the Workplace

Why should you implement a wellness program?

As your benefits professional, our goal is to lower your costs while at the same time maintain employee engagement. According to MetLife's 9th Annual Employee Benefits Trend Study, 50% of medical costs could be changed by improved employee behavior and lifestyle. This 50% in controllable costs is where wellness programs can make a difference. Not only can wellness programs decrease your health care costs, but they also increase productivity and employee morale. As an example, according to the CDC, more than 72 million Americans suffer from obesity which costs employers an estimated \$130 billion per year in absenteeism, decreased productivity and STD-related costs. But, be careful – poorly implemented programs will drain your company resources.

Why all the fuss about a wellness program? As you know, under HIPAA, health plans cannot discriminate based on a health factor (of course, you also have to make sure you don't violate any other laws, such as the ADA). However, plans can discriminate if they comply with the wellness regulations and offer a "wellness program." Keep in mind, a program is only subject to the nondiscrimination rules if it is part of group health plan. Giving your employees pedometers to encourage healthier food choices in your cafeteria and your facility are just some of the things considered part of a group

health plan, and would not be subject to the rules under HIPAA. Also, certain types of plans are not subject to the group health plan nondiscrimination requirements, such as dental, vision, LTC, etc. If you offer wellness benefits through your carrier's wellness program, you are likely to see results.

Reward vs. Non-Reward Based Programs

There is a difference between wellness programs. Only wellness programs that are based on satisfying a standard related to the wellness regulations can comply with the wellness regulations. Where you don't give out a reward, or where you do, is not based on satisfying a standard. For example, if you provide a health diagnostic testing program and reward you would not have to comply with the regulations. A reward may include the following:

- Discount
- Rebate of premium or contribution
- Waiver of all or part of a cost (deductible, copayment, coinsurance)
- Absence of surcharge

Health Reform Update Conflict Between Circuits Regarding Individual Mandate

The U.S. Court of Appeals for the 11th Circuit (Alabama, Florida and Georgia) recently declared the individual mandate to be unconstitutional. Under the Affordable Care Act, the individual mandate requires individuals to maintain a specific minimum level of health insurance coverage beginning January 1, 2014, or pay a federal tax penalty for each month coverage is not maintained. Although the court held this particular provision to be unconstitutional, the remainder of the law stands. The decision will likely be appealed to the Supreme Court.

The 11th Circuit's decision creates a conflict between the Federal Circuits. In June, the 6th Circuit (Kentucky, Michigan, Ohio and Tennessee) upheld the individual mandate as valid. The 6th Circuit decision has already been appealed to the Supreme Court; however there is no decision as to whether it will be heard at this time. Although the Supreme Court has discretion over what cases it hears, it is not required to grant review of this issue simply because there is a split in the Circuits; however, it seems likely that the fate of the provision will ultimately be decided by the Supreme Court. Without a consensus among the Circuits, it would be difficult to implement the law. When the case would be heard is uncertain; the Court may wait to see what happens in the other Circuits (there is also a case pending in the 4th

Circuit in Virginia). President Obama continues to have confidence that the individual mandate is constitutional. What are the ramifications if the individual mandate is declared unconstitutional? The individual mandate is the central tenet on which the reform is based. Without the individual mandate, which would increase the risk pool by bringing more people into it, insurance carriers are likely to argue that it is unreasonable to require them to provide coverage regardless of their health status. Further, if there is no requirement for everyone to have coverage, there is no guarantee that the risk pool contains enough individuals with good health, as well as those with medical problems, and nothing to stop people from waiting until they are sick or injured to demand coverage. As a result of these concerns, enrollment would likely see dramatic premium increases in the individual and small group markets -- which would lead to drops in enrollment, causing even further increases in premium. We will continue to monitor this issue and keep you apprised.

Compare Our Offering

The following are the resources and services MBA provides as part of our standard fee.

How does MBA compare to other benefits consulting firms?

■ Advisory Team

MBA	Other	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Advisor
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Account Executive
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Designated Account Manager
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Implementation Specialist
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Technology Specialist
<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-staff Benefits Counsel
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Ancillary and Specialty Advisor
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Disability and TDB Advisor

■ Benefits Consulting

MBA	Other	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Health Care Reform
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Complete Financial Analysis
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Carrier and Plan Alternatives
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alternative Funding Strategies
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Third Party Administrator Options
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Multi-year Cost Containment Strategies
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Employee Communication Strategy
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Ancillary and Voluntary Benefits
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Advice on Wellness Programs

■ Enrollment Tools

MBA	Other	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	On-Demand Benefits Video
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Benefits Guidebook
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Employee Hotline
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Online Enrollment System

■ Benefits Management

MBA	Other	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	HR Administration System
<input checked="" type="checkbox"/>	<input type="checkbox"/>	12 Month Service Calendar
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Transaction Processing
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proactive Communication
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Claims & Health Care Advocacy
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Client Portal

■ Compliance Assistance

MBA	Other	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Timely Guidance on Important Topics
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Self-Help Compliance Tools
<input checked="" type="checkbox"/>	<input type="checkbox"/>	COBRA Administration
<input checked="" type="checkbox"/>	<input type="checkbox"/>	5500 Document Preparation

■ Employee Programs

MBA	Other	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wellness
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Shopping Rewards

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guides employers through the complexity of planning, communicating, and managing a successful employee benefits program.



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