HEALTH SERVICE SYSTEM
Vendor Report Card

Fringe Benefits Management Company
December 13, 2007
Period Evaluated: July 1, 2005 – June 30, 2007

COMPOSITE RATINGS

Criterion	Composite Rating	Rating Standards
A. Quality and Value		
1. Overall NCQA Rating	**N/A**	1. "Denied" or not accredited 2 "Provisional" 3 "Accredited" 4 "Commendable" 5 "Excellent"
2. Quality of written communication materials	**3.1**	1 - Consistently incomplete, confusing and unattractive. 2 - Significant problems in quality, but usually of a good quality of content, clarity, attractiveness and accessibility to diverse members. 3 - Rarely compelling, and some unevenness in quality, but usually of a good quality of content, clarity, attractiveness and accessibility to diverse members. 4 - Sometimes compelling, but always of a high quality of content, clarity, attractiveness and accessibility to diverse members. 5 - Consistently compelling: outstanding content, clarity, attractiveness and accessibility to diverse members.
3. Quality of website	**3.4**	Same as item 2 above.
4. Members' view of access to health care services	**3.3**	1 - Consistently long waits to see providers; most providers not accepting new patients; extremely difficult to access specialists. 2 - Often long waits to see providers, with some exceptions; many providers not accepting new patients; some difficulty in accessing specialists. 3 - Occasional long waits to see providers, but most waits are reasonable; some providers not accepting new patients; occasional difficulty accessing specialists. 4 - Almost all waits to see providers are reasonable, with infrequent exceptions; most providers are accepting new patients; infrequent difficulty accessing specialists. 5 - Waits to see providers are consistently short; rarely is a provider not accepting new patients; rarely any difficulty in accessing specialists.
5. Members' view of provider quality	**4.3**	Use any number from 1 to 5, where 1 is the worst provider quality and 5 is the best provider quality to rate the overall quality of the provider(s) accessed through the vendor's plan. **Please include supporting comments for your rating.**
6. Members' view of vendor's customer service	**3.8**	Use any number from 1 to 5, where 1 is the worst customer service and 5 is the best customer service to rate the overall quality of the

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		customer service received through the vendor's plan. **Please include supporting comments for your rating.**
7. Overall quality of service to members	**3.8**	Use any number from 1 to 5, where 1 is the worst quality of both care and service and 5 is the best quality of care and service to rate the overall quality of the care and service provided through the vendor's plan. **Please include supporting comments for your rating.**
8. Overall value delivered	**3.8**	Use any number from 1 to 5, where 1 is the worst ratio of cost to quality and 5 is the best ratio of cost to quality to rate the overall value provided by the vendor's plan. **Please include supporting comments for your rating.**
B. Responsiveness to HSS Needs and Concerns		
1. Attendance and level of participation at relevant Health Service Board meetings	**5**	Use any number from 1 to 5, where 1 is the worst level of attendance and participation and 5 is the best level of attendance and participation to rate the overall attendance and participation of the vendor's plan representative(s). **Please include supporting comments for your rating.**
2. Responsiveness and flexibility in interactions with Board	**5**	Use any number from 1 to 5, where 1 is the worst level of responsiveness and flexibility and 5 is the best level of responsiveness and flexibility to rate the overall responsiveness and flexibility of the vendor's plan representative(s). **Please include supporting comments for your rating.**
3. Responsiveness and flexibility in interactions with HSS Staff	**3**	Use any number from 1 to 5, where 1 is the worst level of responsiveness and flexibility and 5 is the best level of responsiveness and flexibility to rate the overall responsiveness and flexibility of the vendor's plan representative(s). **Please include supporting comments for your rating.**
C. Contracting and Performance Guarantees		
1. Written contract in place?	**5**	1 – Written contract executed and delivered more than 90 days after effective date. 2 – Written contract executed and delivered within 90 days after effective date. 3 – Written contract executed and delivered within 60 days after effective date. 4 – Written contract executed and delivered within 30 days after effective date. 5 – Written contract executed and delivered prior to effective date.

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2. Adherence to City's social policy legislation	**5**	1 – Contract omits more than two requested provisions. 2 – Contract omits two requested provisions. 3 – Contract omits one requested provision. 4 – Contract includes all requested provision with minor modifications. 5 – Contract includes all requested provisions without modification.
3. Inclusion of performance guarantees	**2**	1 – Contract contains no performance guarantees. 2 – Contract contains performance guarantees, but none includes monetary penalties. 3 – Contract contains performance guarantees, but more than one does not include monetary penalties. 4 – Contract contains performance guarantees, but one does not include monetary penalties. 5 – Contract contains performance guarantees with monetary penalties attached to each guarantee.
4. Comprehensiveness and sufficiency of performance guarantees	**3.5**	Use any number from 1 to 5, where 1 is the worst level of comprehensiveness (i.e., omits major components of vendor's contractual performance requirements) and 5 is the best level of comprehensiveness (i.e., includes all major components of vendor's contractual performance requirements).
5. Adherence to performance guarantees	**N/A**	1 – Failed to reach three or more of the guaranteed performance levels specified below. 2 – Failed to reach two of the guaranteed performance levels specified below. 3 – Failed to reach one of the guaranteed performance levels specified below. 4 – Exceeded or reached all guaranteed performance levels specified below. 5 – Exceeded all guaranteed performance levels specified below.
6. Prompt reporting and payment for breaches of performance guarantees	**N/A**	1 – Vendor failed to report performance or pay any applicable penalties within 30 days of applicable due dates under contract. 2 – Vendor reported performance and paid any applicable penalties within 30 days of applicable due dates under contract. 3 – Vendor reported performance and paid any applicable penalties within 15 days of applicable due dates under contract. 4 – Vendor reported performance and paid any applicable penalties within five days of applicable due dates under contract. 5 – Vendor reported performance and paid any applicable penalties on or prior to applicable due dates under contract.

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Rating Panel Participants (Individual Ratings and Comments Follow Below):

Vendor Self-Rating:	Barb Brown, FBMC Account Manager
HSS Operations Staff:	Jeffrey Hildebrant, Assistant Director
HSS Finance Staff:	Tess Navarro, CFO
Active Member:	Kimiko Burton, City Attorney
Active Member:	Jolie Gines, DTIS
HSS Board Member	Dr. Mitch Katz, Commissioner

Fringe Benefits Management Company
December 13, 2007
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INDIVIDUAL PANELIST RATINGS AND COMMENTS

Criterion	Vendor's Self-Rating	HSS Operations Staff	HSS Finance Staff	Active Member	Active Member	Board Member	Overall Rating
A. Quality and Value							
1. Overall NCQA Rating	**N/A**						**N/A**
2. Quality of written communication materials	**N/A** As requested by HSS, FBMC provides a timely review of the Benefits Enrollment Reference guides produced by HSS annually. FBMC has won the Apex Award (Awards for Publication Excellence) for six consecutive years (2002-2007). APEX awards are based on excellence in graphic design, editorial content and the success of the entry achieving overall communications	**3** Printed documents provided to employees are confusing and use too much "legalese" to be easily understood. Would like to see communications that are easier for enrollees to understand.	**3** Documentation on service choices and reimbursement requirements are not sufficiently informative. For example, although the Walgreens register receipt shows FSA qualified, FBMC also requires the computer generated receipt showing the name of member or dependent.	**3** Materials are not all user friendly.	**3.5** Not always clear what is/isn't covered – a bit too dense/wordy sometimes. They could use some short bullet style publications/FAQ type materials.	**3** No comments.	**3.1**

INDIVIDUAL PANELIST RATINGS AND COMMENTS

Criterion	Vendor's Self-Rating	HSS Operations Staff	HSS Finance Staff	Active Member	Active Member	Board Member	Overall Rating
	effectiveness and excellence. Currently FBMC's communication team participates in the review process for CCSF. We would like to propose that our professional communication services write and produce benefits enrollment communications for CCSF and its members.						
3. Quality of website	**4.0** In 2006, FBMC rolled out a new and enhanced website for our customers, www.myfbmc.com. It is in operation 24/7 to provide our customers access to their account information. The analysis of the 2007 FBMC	**3** Would like to see a customized welcome page for CCSF that includes information and tools specific to CCSF. Would also like to see an Administrator tool that CCSF management can use to verify enrollments,	**3** The website provides information on the flexible spending account that is useful but because it is not employer specific navigation can be time consuming.	**3** Dislike entering Social Security No. or the 16 digit ID No. either.	**3.5** Once one figures out how to get in, it is not terribly difficult – but login isn't that intuitive.	**4** No comments.	**3.4**

INDIVIDUAL PANELIST RATINGS AND COMMENTS

Criterion	Vendor's Self-Rating	HSS Operations Staff	HSS Finance Staff	Active Member	Active Member	Board Member	Overall Rating
	Customer Satisfaction survey indicates a mean score of 7.40 rating the ease of using MyFBMC.com (the mean is the average rating on a 10 point scale ranging from 1 "very difficult" to 10 "very easy"). The survey also indicated that 70% of the customers reported that the FBMC system was always available to them and 21.9% reported that it had been available to them less than once a month in the past 6 months. Additionally, 71.6% of customers surveyed indicated that their experience with FBMC's Customer system kept pace with their needs in the past 12 months and 14.6%	reimbursements, etc.					

INDIVIDUAL PANELIST RATINGS AND COMMENTS

Criterion	Vendor's Self-Rating	HSS Operations Staff	HSS Finance Staff	Active Member	Active Member	Board Member	Overall Rating
	indicated that FBMC exceeded their needs.						
4. Members' view of access to health care services				**3** Uncertain that I am aware of all healthcare services.	**3.5** No comments.		**3.3**
5. Members' view of provider quality				**3.5** Vendor is responsive and when documents are in proper order reimbursements are transacted quickly.	**5** They seem to cover anything that is allowable and not to limit providers.		**4.3**
6. Member's view of vendor's customer service				**3.5** Vendor responds to email inquiries quickly, however, issue is often unresolved by inexperienced customer representatives.	**4** They are fairly responsive – even if they don't tell you what you want to hear.	**4** No comments.	**3.8**

Fringe Benefits Management Company
December 13, 2007
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INDIVIDUAL PANELIST RATINGS AND COMMENTS

Criterion	Vendor's Self-Rating	HSS Operations Staff	HSS Finance Staff	Active Member	Active Member	Board Member	Overall Rating
7. Overall quality of service to members	**4.0** In the 2007 FBMC Customer Service Satisfaction survey, where Customers were asked to compare FBMC's Customer Service to that of an Excellent Benefits Company, the following was indicated: Customer Service Handles Requests: Accurately – 33.85%, as expected; 54.8%, better than expected Timely – 30.3%; as expected; 58.3% better than expected Treats me with dignity and respect – 41.7%, as expected; 53.5% better than	**3** Need improvement in the consistent and clear communications with members. Services are generally at an acceptable level.	**4** Turnaround time on claims submissions is quick and information for disallowances fully explained. But areas needing improvement do exist.	**3.5** I appreciate the fact that the vendor allows its members the opportunity to confer and air their issues.	**4** No comments.	**4** No comments.	**3.8**

INDIVIDUAL PANELIST RATINGS AND COMMENTS

Criterion	Vendor's Self-Rating	HSS Operations Staff	HSS Finance Staff	Active Member	Active Member	Board Member	Overall Rating
	expected Makes effort to understand concerns – 42.5%, as expected; 49.3%, better than expected. Makes me feel important – 52.4%, as expected; 37.8% better than expected. In the 2007 FBMC Customer Service Satisfaction survey, where Customers were asked to compare FBMC's Handling of Claims to that of an Excellent Benefits Company, the following was indicated: Ease of submitting claims – 30.3% as expected; 58.9%, better than expected. Promptness of						

INDIVIDUAL PANELIST RATINGS AND COMMENTS

Criterion	Vendor's Self-Rating	HSS Operations Staff	HSS Finance Staff	Active Member	Active Member	Board Member	Overall Rating
	paying claims – 25.1% as expected; 61.2% better than expected. Accuracy of claims payments – 33.8% as expected; 56.3% better than expected. Amount of payment compared to expectation – 52.2% as expected; 37.6% better than expected. Clarity of explanation regarding claim decision – 42.4% as expected; 38.1% better than expected. Written communication understandable – 48.4% as expected; 37.3%, better than expected. For the reporting period of July 1,						

Fringe Benefits Management Company
December 13, 2007
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INDIVIDUAL PANELIST RATINGS AND COMMENTS

Criterion	Vendor's Self-Rating	HSS Operations Staff	HSS Finance Staff	Active Member	Active Member	Board Member	Overall Rating
	2005 – June 30, 2007 FBMC's reporting systems indicated that we spoke with 9,054 customers who identified themselves as HSS members, answered 600 email inquiries that received a response in 24 hours or less, processed 15,528 claims with a financial accuracy ranging from 96.44% improving to 99.63%, first quarter of 2007 Note: the 2007 FBMC Customer Satisfaction Survey was conducted, tabulated and analyzed by an independent firm. FBMC drew a random sample of 2,400 customers to mail surveys. A total of 464 surveys						

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December 13, 2007
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INDIVIDUAL PANELIST RATINGS AND COMMENTS

Criterion	Vendor's Self-Rating	HSS Operations Staff	HSS Finance Staff	Active Member	Active Member	Board Member	Overall Rating
	were returned by the established deadline, yielding a response rate of 19.6%.						

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Criterion	Vendor's Self-Rating	HSS Operations Staff	HSS Finance Staff	Active Member	Active Member	Board Member	Overall Rating
8. Overall value delivered	**4.0** Over the tenure of our relationship, FBMC has invested greatly to expand, improve and enhance many services and technologies for our Clients and Customers. In our quest to be your Premier Benefits Administrator we continue to reinvest in our people, our systems and our Clients. FBMC: • Purchased and installed an emergency power generator that will automatically engage if there is a loss of power to FBMC's building along with expanding our disaster	**3** Rates are very competitive for the services provided.	**4** Generally good product offering but could use some administrative improvements.	**3.5** FBMC still has a way to go, but are moving in the right direction.	**4** Claims seem to be processed fairly quickly (once you understand system; i.e. payment of tuition is not the service, so payment is at end of month).	**4** No comments.	**3.8**

INDIVIDUAL PANELIST RATINGS AND COMMENTS

Criterion	Vendor's Self-Rating	HSS Operations Staff	HSS Finance Staff	Active Member	Active Member	Board Member	Overall Rating
	recovery services through Sungard. • Installed a customized document management and workflow solution developed by Captaris, Inc., a leading provider of software products that automates business processes. • Installed and implemented a Customer Care Solution Software that significantly enhanced our ability to service and track all incoming calls and to provide our clients with periodic reports of call activity that are Client						

INDIVIDUAL PANELIST RATINGS AND COMMENTS

Criterion	Vendor's Self-Rating	HSS Operations Staff	HSS Finance Staff	Active Member	Active Member	Board Member	Overall Rating
	specific. • Developed and rolled out three new service products to meet the needs of our clients and customers: EZ Reimburse QTB (transportation/ commuter benefits), EZ Reimburse HRA (Health Reimbursement Accounts) and EZ Reimburse HSA (Health Savings Accounts.) We signed contracts with financial giants Synovus and Mellon Bank to provide the financial components of our EZ Reimburse HSA service product. FBMC is also						

INDIVIDUAL PANELIST RATINGS AND COMMENTS

Criterion	Vendor's Self-Rating	HSS Operations Staff	HSS Finance Staff	Active Member	Active Member	Board Member	Overall Rating
	able to provide self insured medical services along with 401(k) administrative services. FBMC continues to invest in technology advancements which have enabled us to provide reliable quality services to our Clients and Customers.						
B. Responsiveness to HSS Needs and Concerns							
1. Attendance and level of participation at relevant Health Service Board meetings	**N/A** To date, FBMC has not been requested, nor required to attend HSS Board Meetings. We do; however, monitor activities as recipients of the published agenda and provided minutes.					**5** -- I am assuming they are coming.	**5**

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Criterion	Vendor's Self-Rating	HSS Operations Staff	HSS Finance Staff	Active Member	Active Member	Board Member	Overall Rating
2. Responsiveness and flexibility in interactions with Board	**N/A** FBMC does not (or rarely) interfaces directly with HSS Board; however, if there were a need or request of FBMC to interface directly with the Board, FBMC would exert best effort to be both responsive and flexible in meeting its needs.					**5** No comments.	**5**
3. Responsiveness and flexibility in interactions with HSS Staff	**4** FBMC exerts best efforts to be responsive and flexible in its interactions with HSS staff. The 2007 Client Satisfaction Survey indicate the following results in the areas of Account Management: Accessibility by	**2** Follow up on issues raised by HSS is not timely. It often requires several attempts by staff to get an answer or resolution to an issue. Would like to see improvement in this area.	**3** Generally, FBMC is responsive to HSS information needs and requests. One area needing evaluation is the FBMC process of submitting refund checks to HSS. Recent request is still outstanding and checks are sometimes issued different from the requested refund				**3**

INDIVIDUAL PANELIST RATINGS AND COMMENTS

Criterion	Vendor's Self-Rating	HSS Operations Staff	HSS Finance Staff	Active Member	Active Member	Board Member	Overall Rating
	phone or email – 41.0% as expected; 52.6% better than expected. Delivery of promised services – 44.9% as expected; 37.2% better than expected. Expertise – 42.3% as expected; 47.4% better than expected. Problem solving effectiveness – 34.6% as expected; 48.7% better than expected. Speed of response to inquiries/ problems – 30.8% as expected; 48.7% better than expected. Legal/regulatory guidance or reporting – 39.7% as expected; 34.6% better than expected.		amount making reconciliation time consuming and follow-up calls necessary. We suggest that refunds be netted out of any fund transfers to FBMC bi-weekly rather than the current process of FBMC issuing refund checks.				

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Criterion	Vendor's Self-Rating	HSS Operations Staff	HSS Finance Staff	Active Member	Active Member	Board Member	Overall Rating
	Note: the 2007 Client Satisfaction Survey was conducted, tabulated and analyzed by an independent firm. FBMC identified 202 individuals employed at current public and private sector clients. Potential respondents serve in roles that allow them to judge the performance of FBMC. A total of 78 individuals completed the web survey questionnaire, yielding a response rate of 38.6%.						
C. Contracting and Performance Guarantees							
1. Written contract in place?		**5** No comments.	**5** No comments.				**5**
2. Adherence to City's social policy legislation		**5** No comments.	**5** No comments.				**5**

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Criterion	Vendor's Self-Rating	HSS Operations Staff	HSS Finance Staff	Active Member	Active Member	Board Member	Overall Rating
3. Inclusion of performance guarantees		**2** Would like to see specific PG's based on the services provided.	**N/A**				**2**
4. Comprehensiveness and sufficiency of performance guarantees	**5** Our Mission Statement: We guarantee to satisfy the total benefits needs of our clients with integrity and quality services. Our Company Guarantee: We guarantee your satisfaction. If you are not satisfied, tell us and we will correct any problem within 30 days at our expense. If you are still dissatisfied after the 30 days, you may terminate our contract immediately. We will turn over all records to your new	**2** See No. 3.	**N/A**				**3.5**

Fringe Benefits Management Company
December 13, 2007
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Criterion	Vendor's Self-Rating	HSS Operations Staff	HSS Finance Staff	Active Member	Active Member	Board Member	Overall Rating
	administrator and – at our expense – facilitate the transition. We will refund all fees for the prior 60-day period if you are not satisfied.						
5. Adherence to performance guarantees	**N/A**						**N/A**
6. Prompt reporting and payment for breaches of performance guarantees	**N/A**						**N/A**

ADDITIONAL COMMENTS OF INDIVIDUAL PANELISTS

Dr. Mitch Katz comments:

Important to clarify what over-the-counter medicines are covered or not covered. For both over-the-counter medicines and FSA important to understand what level of detail you need for expense (e.g. F-code on Walgreen's receipt).

ADDITIONAL COMMENTS OF FULL HEALTH SERVICE BOARD