



OUR MISSION STATEMENT

To provide our clients superior employee benefit services while simultaneously bringing financially advantaged solutions for you and your employees



About R&R

Integrated Solutions

Here at R & R Integrated Solutions, our goal is to provide creative solutions to clients across the state of Florida and across the US in support of their unique corporate mission, direction, and obstacles.

R & R is a services organization that provides all aspects of Employee Benefits for our clients. It is not just the “plan” but the financial protection that you as an employer want to provide for your valuable employees

We’ve worked hard to simplify the health insurance process, making it fast and easy for you to find the plan(s) that fit your business’s unique needs and budget. We represent all the major carriers and provide creative solutions utilizing voluntary benefits to reduce the financial risk of our participants!

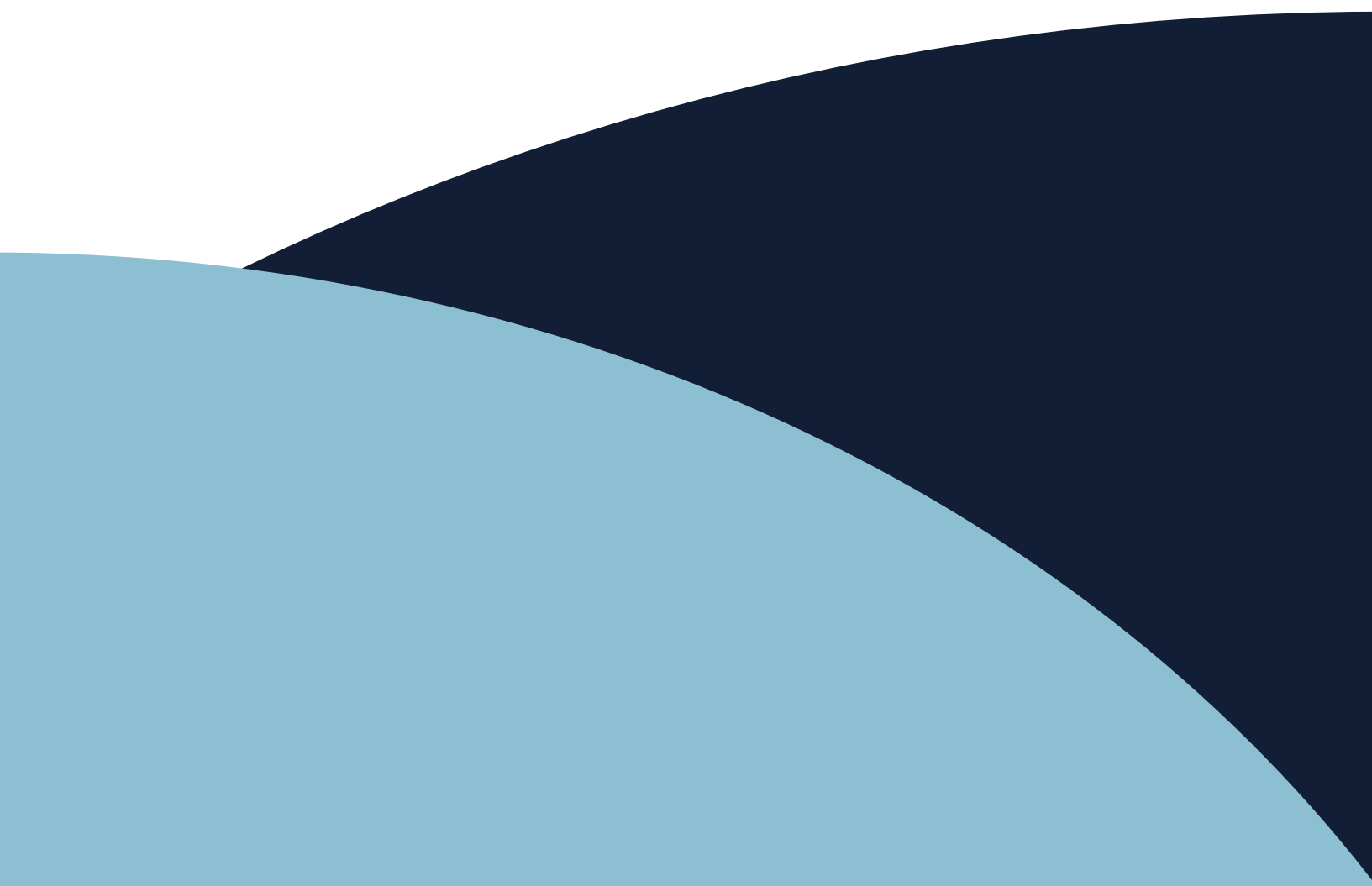


How our work BENEFITS you

How our work BENEFITS you: With a combined background of over 30 years of corporate health insurance management and 15 years of grant application experience, our highly skilled team works to blend insurance products with available grant opportunities to support the operations and financial needs of local companies.

Beyond offering high-quality healthcare coverage services such as medical and voluntary benefits through major carriers in Florida, our consultative approach allows us to deliver customized creative plans that can dramatically reduce corporate financial risk.

We are vested in making the benefits selection process thorough yet simple, fast, and above all, financially advantageous for employers and employees.



Meet Our Team



Chris Reber

PRINCIPAL/FOUNDING PARTNER

As the Principle/ Founding Partner of R&R Integrated Solutions, Chirs's vision is to listen, learn, and identify ways to support employers with a customized solution. Solutions blending insurance products with available grant programs that render services to support the employer's business needs towards long-term success.



Cesar Ruiz

FOUNDING PARTNER

Over the past 18 years, Ruiz has focused on identifying and mastering the process needed to obtain Federal, State, and Regional grant funding to overcome industry-specific workforce challenges. With this unique format of workforce development, he has written 218 grants and assisted over 37,000 students with learning paths to support industry-specific workforce requirements.



Debbie Hediger

COO/AGENCY MANAGER

Debbie joined R&R Integrated Solutions in 2021 as our COO/Agency Manager. With many years of employee benefits experience, she provides strong strategic planning, compliance management skills and best practices for promoting a successful client experience as well as agency management. Prior to joining the team, she has spent the last 30+ years as a benefits consultant with national agencies in various positions including Account Executive, Team Leader and VP of Operations. She is an active member of the National Association of Health Underwriters, now NABIP and has served as the local Tampa chapter president as well as the Florida State president.



Jacob Reber

ACCOUNT MANAGER

Jacob joined R & R Integrated Solutions in 2021 and is a technology specialist and is now an Account Manager. Jacob is responsible for day to day client communications, marketing, renewal presentations and assistance with any employer and/or employee concerns and is the liaison between our clients and the carriers. Jacob also builds and maintains our client benefit administration systems. Jacob works very closely with our carrier partners and keeps up to date with ongoing compliance and carrier updates.



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Employee
BENEFITS solutions.
HEALTH

Group Medical Plan Funding
Arrangements

Group Medical Plan Option

There are several arrangements that can be made to help your business fund group medical plans for your employees.

Fully Insured – This is the most traditional funding arrangement.

Level funding – Includes level premiums, return of surplus, and access to data

Self Funding – With Self Funding the employer funds and takes on financial risk. Includes fees to the third party to administer claims, might include fees to stop-loss protection, and includes full access to all claims data.

Reference Based Pricing – Most hospital/provider systems are billing upwards of 240% of Medicare. With reference-based pricing the reimbursement is based on the plan document and typically 100 – 150% of Medicare. Therefore, providing potential savings to the plan. There are pros and cons to this concept, and you want to have in-depth knowledge of how it may affect your employees. Education is key to success of these plans.



Health Savings Accounts (HSA) – Employer and/or employee-funded with pre-tax dollars

Flexible Spending Accounts (FSA) – Employer and/or employee-funded with pre-tax dollars

- Health Reimbursement
- Dependent Care Reimbursement

Health Reimbursement Accounts (HRA) – Employer-funded, allows flexibility

ICHRA – Individual Coverage Health Reimbursement Arrangements is an alternative to offering a traditional group health plan. It allows businesses of all sizes to offer employees a monthly allowance of tax-free money, allowing them to buy health care services that fit their unique needs. This can assist in controlling costs and addressing ACA compliance.



Group Medical Plans are health plans offered by an employer that provides employer sponsored group health coverage options. **There are several types of plans which offer varying degrees of coverage.**



HMO

This plan requires you to access care from a specific network of providers. It typically does not cover any services from a non-contracted provider (except emergencies). Some plans may also require referrals to specialists, but not all.



HMO Open Access

Similar to a standard HMO, you access care from a specific network of providers. It also does not cover services from non-contracted provider (except emergencies) but there are no referrals required.



POS Open Access

This plan works like the HMO Open Access but provides access to non-contracted providers at a higher out of pocket cost to the member. No referrals would be needed.



PPO

Provides access to in and out of network providers. Using in network providers costs less. PPO's are typically higher cost than HMO and POS plans and typically reimburse at a higher rate to the provider. These plans are typically used where there are non-sufficient HMO/POS networks.

02



Employee
BENEFITS solutions.
SUPPLEMENTAL

Supplemental/Worksite Benefits

These are optional benefits that are employee-paid

Many employers offer these benefits as an incentive to attract high-quality candidates for positions in their organization. A good and comprehensive suite of supplemental benefits is often one of the most enticing things an employer can use to sway the mind of a prospective employee.



Group Voluntary Life and AD&D

Available to employees and dependents.



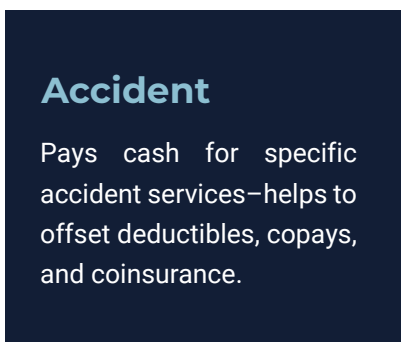
Group Voluntary Short Term Disability

Replaces a portion of weekly pay while out due to eligible illness or accident.



Group Voluntary Long Term Disability

Replaces a portion of monthly pay while out due to eligible illness or accident.



Accident

Pays cash for specific accident services—helps to offset deductibles, copays, and coinsurance.





Critical Illness

Pays cash for specific critical illness (heart, cancer, stroke) – helps to offset deductibles, copays and coinsurance, and other incidental expenses.

Cancer

Pays cash for cancer diagnosis – helps to offset deductibles, copays and coinsurance, and other incidental expenses.



Hospital Indemnity

Pays cash for in and out-patient hospital stays – pays a portion of your deductible.

GAP

pays a specific amount to help offset higher deductibles and out of pocket expenses due to inpatient hospital stays



03



Employee BENEFITS solutions. ANCILLARY

Group Long Term Disability

Group Short Term Disability

Group Basic Life and AD&D

Group Dental - Group Vision

Group Long Term Disability




Like Short Term Disability, Long Term Disability covers up to 70% of the employee's salary if they are unable to work because of an injury or illness that might take them out of commission for a longer amount of time.

The employee can receive coverage for anywhere between 5-10 years or as long as they are disabled until they turn 65. It would depend on the policy. LTD can cover illnesses like Cancer, musculoskeletal disorders, nervous system disorders, injuries from an accident, and even mental health problems. Typically, pre-existing conditions are not covered. This is employer paid.

Group Short Term Disability

This coverage is designed to protect both your business and its employees – especially if the worker is unable to continue doing their job as a result of illness or injury.



This plan covers leave from work for a temporary disability. When a qualifying event occurs that might disable the worker from working short-term, the worker can file a claim to receive the amount of income that is specified in their policy. This is employer paid.



Basic Life Insurance

Basic Life Insurance is one of the simplest life insurance policies. It is often offered as part of the benefits packages businesses offer their employees. Beneficiaries will receive a limited and predetermined benefit if the person holding the policy passes during the term of the coverage. This is Employer Paid.



AD&D (Accidental Death & Dismemberment)

AD&D (Accidental Death & Dismemberment) coverage can reimburse beneficiaries if the death of the policyholder occurs because of an accident caused by machinery, drowning, or slips, for instance. This is Employer Paid.

Group Dental - Group Vision

Dental benefits can help employees maximize their oral health and minimize out of pocket costs.

PPO plans provide an extensive network of providers to choose from and provide discounted fees for most services that can be 30 – 45% less than the average fees charged by dentists in the same community. Preventive Care is typically covered at 100%. Services where and when you need it.



DHMO: These plans provide a limited network of providers, and you must choose a provider up front. Discounts for specific services are provided and typically have a list of covered services and costs that are provided up front. There are no deductibles or claims forms to submit.



Vision: Vision benefits provide access to a wide provider network while providing a copayment for your full refractive eye exams and a deep discount on eyewear and lenses. While in network provider services provide the highest level of coverage and discount, there is a small reimbursement for services of an out of network provider.







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