

Hall County, GA Investment Summary

May 2, 2024

Solution Overview:

Marathon Health is proposing a few models for Hall County's evaluation to provide employees, spouses, and dependents convenient access to healthcare. Based on the population size, occupational health scope, utilization data provided in the RFP, and our experience in the public sector, we recommend operating the health center at the base 48 hours per week; however, we are open to discussions with the County based on their current experiences to determine what solution is most fitting for your specific goals and objectives.

We have provided the following options for the County's evaluation:

- 48-hour model – Physician (MD) led: We understand the County may desire to maintain having a physician as a part of the health center staff. While the MD is only reflected in this 48-hour model, this can be replicated with additional hours of operations if desired. We have prepared an ROI analysis to reflect this staffing model – see attached ROI Analysis for MD-led model.
- 48-hour – 52.5-hour model – Nurse Practitioner (NP) led: Based on Georgia regulations and the partnership with your full onsite pharmacy, a nurse practitioner is able to practice with a collaborating physician oversight. We have this model in operation at many of our health centers across the county. The nurse practitioners that we hire are expected to practice to the top of his or her licensure and therefore can perform majority of the services a physician would provide. We have prepared an ROI analysis to reflect this staffing model – see attached ROI Analysis for NP-led model.
- 58.5-hour model – Nurse Practitioner (NP) led: This model mirrors the previous APP led model (listed above) accounting for additional hours of operation.

We look forward to the opportunity to collaborate with the Hall County team to build the most meaningful solution for both you and your members.

Solution Overview			
	48 Hour with Physician	48-52.5 Hour with Advanced Providers	58.5 Hour with Advanced Providers
Eligibility	Employees:1,388 Spouses:541 Dependents:1,097 Retirees:164 Total Eligibility:3,190	Employees:1,388 Spouses:541 Dependents:1,097 Retirees:164 Total Eligibility:3,190	Employees:1,388 Spouses:541 Dependents:1,097 Retirees:164 Total Eligibility:3,190
Hours	48 hours per week	48-52.5 hours per week	58.5 hours per week

Staffing Model			
	48 Hour with Physician	48-52.5 Hour with Nurse Practitioners	58.5 Hour with Nurse Practitioners
Staffing Included	1.0 FTE Physician 1.0 FTE Nurse Practitioner 1.0 FTE Health Coach 3.0 FTE Medical Assistant	2.0 FTE Nurse Practitioner 1.0 FTE Health Coach 3.0 FTE Medical Assistant Collaborating Physician	2.6 FTE Nurse Practitioner 1.0 FTE Health Coach 4.0 FTE Medical Assistant Collaborating Physician

Solution Investment Overview			
	48 Hour with Physician	48-52.5 Hour with Nurse Practitioners	58.5 Hour with Nurse Practitioners
One-time Implementation Fee	\$77,326	\$77,326	\$77,326
Year 1 Annual Service Fee	\$1,645,563	\$1,427,543	\$1,796,378

Pricing Assumptions

- The onsite health center pricing is based on 1,388 eligible employees and 3,190 total eligible members. Marathon Health reserves the right to revisit the pricing and staffing model if the eligible population exceeds 110%.
- Marathon Health reserves the right to revisit the staffing costs, as part of the total annual service fee, if the actual salaries of the hired staff exceed 10% or more of the assumed salaries included in the proposed pricing.
- Standard contract term: 3 years and includes a 5% annual fee increase each year.
- Externally processed labs and vaccines will be charged to the client monthly at our cost as incurred.
- Staffing model is based on 65% employee engagement assumptions for year one.
- The one-time Implementation fee includes the recruiting and training of new staff positions, initial medical supplies and equipment, eligibility file set-up, IT and site set-up, and Project Management travel.
- The above proposed pricing is valid for up to 180 days.

SCOPE OF SERVICES

Services Included in Monthly Fee



Updated Terms 7/2/2024:

#1: Contract Terms: Marathon Health accepts the 1-year contract terms with four 1-year renewal options totaling to a total a 5-year contract before a new contracting period begins. Marathon requests a 180-day notice period prior to the contract end date to be included. This allows for staff to find new employment following the end of the Marathon Health contract period.

#2: Unfilled Staffing: We'd like to propose inclusion of language regarding a potential payment based on unfilled staffing hours:

- 0-7 Unplanned Absences per provider: no penalty
- 7-10 Unplanned Absences per provider: \$500 per day unfilled
- More than 10 unplanned absence per provider: \$750 per day unfilled

Unplanned Absences are defined as each workday where notice was given within less than 24 hours and not able to be backfilled. Virtual care may be utilized for backfill for 1st day of absence, and such coverage shall not be considered an Unplanned Absence. In-person backfill may be utilized at any time, and such coverage shall not be considered an Unplanned Absence. This would be reviewed on an annual basis, as needed, and credited at the following years' first month payment.

#3: Annual Escalator: Marathon Health agrees to reduce the annual escalator to 4%.

#4: Additional Terms:

- Year One annual fixed fee to \$1,619,276 for MD-led model.
- Implementation fee has been reduced to \$36,223
- Annual fee includes all technology, patient portal, wellness portal, reporting capabilities, referral services, and more.
- The only additional fees outside of listed above:
 - Labs (as consumed) passed-through directly to Hall County
 - Any furniture needs will be audited during implementation, and we will work with the County on getting the necessary additions purchased based on what is removed from the prior vendor and/or the County has available. Any needed items will be a pass-through cost.

SUMMARY SCORING SHEET PROPOSALS/PRICING AND THEN INTERVIEW

CRITERIA	Total Possible Points	COMPANY NAME/RATING				
		CareATC	Cigna/Evernorth	Marathon Health	Medici	Quad Med
Demonstrated understanding of the services and needs required by the County and provided solutions on how to address the following:						
Flexibility - including but not limited to appointment scheduling, attendance at open enrollment meetings, customized packets/forms	10	9.00	9.00	10.00	10.00	10.00
Technology integration-including but not limited to integration with medical records and mobile app for EE use	10	9.00	10.00	9.00	9.00	10.00
Ease Administrative Burden-including but not limited to eligibility verification, billing, claims questions, customer service support	10	10.00	9.00	10.00	10.00	10.00
Credentials, qualifications, experience, and financial stability of the firm, as well as the account manager and designated service team. Compliance with Contractual Terms and Conditions and overall quality and completeness of proposal response	10	10.00	10.00	10.00	10.00	10.00
Value Adds	5	5.00	4.00	5.00	5.00	4.00
Pricing Considerations: Cost/Rate Guarantee Length/Network Savings	40	38.00	40.00	38.00	35.00	30.00

TOTAL SCORE
 (out of 85): **81.00** **82.00** **82.00** **79.00** **74.00**

Rank: **3** **1** **1** **4** **5**

We will add the scoring here once we have tallied all the scores from the interview process...

	Total Points Possible	CareATC	Cigna/Evernorth	Marathon Health	Medici	Quad Med
SCORE FROM ABOVE	85	81.00	82.00	82.00	79.00	74.00
Interview/Finalist Presentation/References	15	13.00	11.00	14.00	n/a	n/a

TOTAL SCORE
 (out of 100): **94.00** **93.00** **96.00** **79.00** **74.00**

Rank: **2** **3** **1** **4** **5**