

Insurance & Financial Services



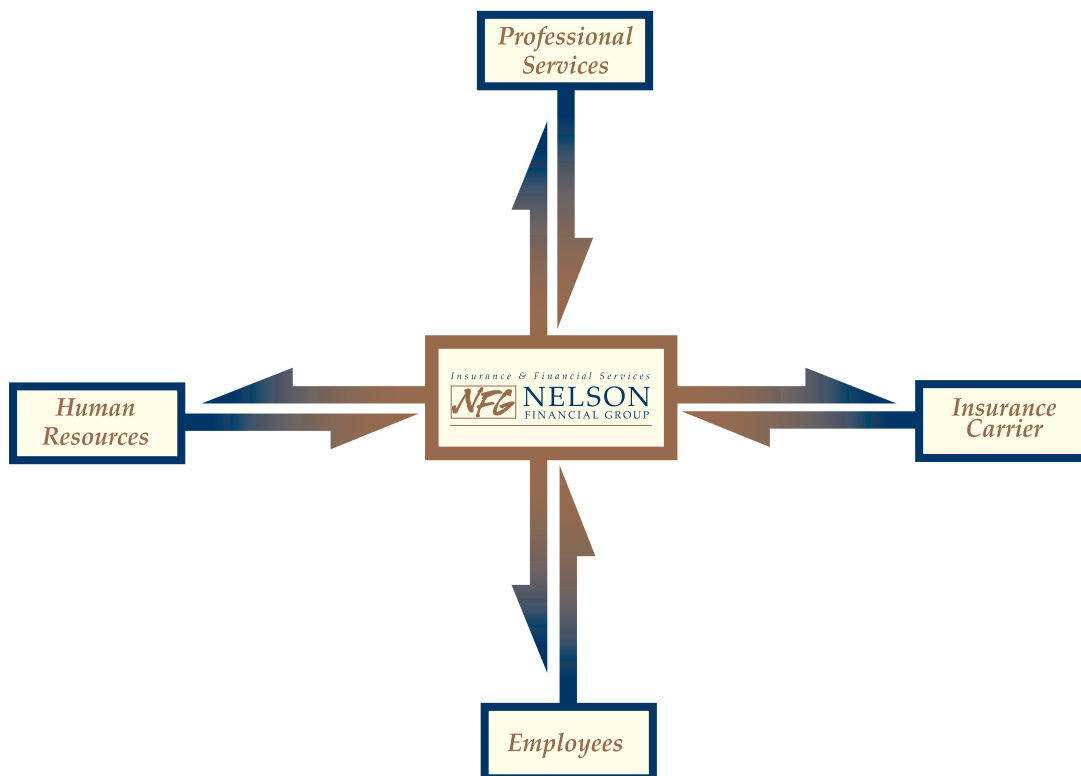
We Can Bring Solutions to Your Organization

- Group Health & Dental Insurance
- Group Life Insurance
- Group Disability Insurance
- Section 125 Cafeteria Plans
- Fully Insured/Self-funded Plans
- Life Insurance
- Business Continuation Planning
- Executive Bonus Plans
- Deferred Compensation
- Voluntary Benefit Options
- Business Overhead Expense
- Executive Carve-Out Group Plans

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Corporate Benefit Plans

- Attracting and retaining key employees is half the challenge. Keeping them - and keeping them motivated - is the other half, especially in today's tight labor market. One way to do that is to design and provide a competitive benefits package to your workforce. Carefully selected benefits can help reduce costly employee turnover, boost morale and, in turn, help assure your company's stability and productivity.
- As employee benefits become more powerful tools to attract and retain employees, staying on top of the latest trends is key to offering competitive benefit programs. Due to the rising cost of healthcare, understanding the constant change of today's employee benefits is critical to meeting your current challenges as an employer.



- We understand that finding innovative solutions in this volatile and changing environment should not cost you an arm and a leg. For example, a voluntary payroll deduction program will allow your employees, including you as an owner-employee, to acquire valuable benefits at little or no cost to the organization.
- At the Nelson Financial Group, we offer a vast array of group medical insurance plans and carriers. We have also aligned ourselves with many companies that provide ancillary products which, when offered, help to increase employee satisfaction.
- Our Employee Benefits Team uses an annual calendar and contact report to schedule quarterly service calls and periodic visits to help ensure client satisfaction throughout the year. We are committed to each of our clients and will provide the following consulting services to your organization throughout the year:



Research and Claims Analysis

- Annually research all of the options to find the most appropriate benefits and rates for your organization
- Review all market options, traditional and partially self-funded, in order to select the most appropriate benefits, provider network, and administrative costs for your organization
- Provide a comprehensive analysis of the prior year's claims data

Construct the Benefit Plan

- Complete the negotiation and benefit structure with sign-off from all levels of the organization well before the renewal date
- Make educated and informed plan recommendations based on claims history and analyze utilization for the upcoming plan year
- Keep the organization informed on new plan concepts and industry trends (H.S.A.'s, H.R.A.'s, Self-funded plans)

Service the Organization

- Facilitate the open enrollment meetings and provide quarterly service visits to the organization
- Provide two service representatives to work alongside your Human Resource team to assist with questions, claims, and all other service related items
- Educate the employees on preventive care and lower cost alternatives to help ensure the overall health of the organization and the success of the medical plan

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