

Program Developed for:



Matt Peterson Sr. Business Development Manager Midwest Markets 630 710 .0152 Direct Line

586.997.3377 Phone 586.997.3378 Fax

mpeterson@abopeo.com





WHO IS ABO?



I started America's Back Office Inc. (ABO) in 1999 with a mission to help small and medium sized businesses navigate the complexities of payroll, tax management, human resources, compliance, employee benefits, and risk mitigation. I recognized that the constantly evolving regulatory landscape, rising costs of benefits, and competition to attract and retain top talent is extremely challenging. The solution for many these companies was to outsource these functions and take advantage of the economies of scale that outsourcing provides. ABO was created to provide business owners with a turn-key solution that would lower costs, support compliance, enhance employee satisfaction and allow them to focus on their customers and growing their business. You didn't start your business to spend your time and resources in the "back office". Let the experts and ABO handle those details so you can focus on building your business.

~ DAVE OTTO

PEO TAXING EMPLOYER **COMPANY IS COMMON** OF RECORD LAW EMPLOYER Has complete operational control and makes all decisions over hiring, firing running the **EMPLOYEE**

WHY OUTSOURCE?

LEVERAGE

 Your company joins with 500 other companies to purchase better Benefits and Workers Compensation at lower costs

NATIONAL PRESENCE

 ABO works with companies in all 50 states, Puerto Rico and Guam

SUPPORT

- Our experts support your organization to provide efficiencies and technology to enhance employee experience and assure compliance.
- We allow our clients to focus their time on customers and building revenue instead of running their back office.



WHAT YOU GET

PAYROLL

- Employee/Employer Portals
- Time and Attendance
- PTO Management
- Dedicated Payroll Specialist
- W2's / 1099 / Employment Tax Filing
- Direct Deposit

BENEFITS

- Health
- Dental
- Vision
- STD/LTD
- Life
- Section 125/132 Cafeteria Plan Administration
- 401k Administration
- Cobra Administration
- · ACA Reporting 1095's



HR SERVICES

- Cloud Based HRIS
- FMLA
- Performance Management tools
- Employee Relations Support
- Handbook Development
- Policy Development
- · General HR Support
- HR Forms and Templates
- · Applicant Tracking
- I-9
- · Employee Orientation
- *Online/Onsite Training

RISK MITIGATION

- Payroll Compliance
- Transfer Workers Comp Liability/management
- Regulatory Compliance
- · Unemployment Claims Management







REPORTING









Time and Labor



PLATFORM







Data Bridge





HR Admin



Financial Operations



APIS

& SERVICES

RIVATE CLOUD



Private Data Storage



Scalability



Security



TECHNOLOGY



America's Back Office provides clients access to our State of the Art, Cloud Based HRIS platform. The platform is fully integrated and available on all devices and includes the features displayed above. Other integrated modules include Applicant Tracking (ATS), Performance Management and a Learning Management System (LMS). Our technology platform centralizes data, has robust customizable reporting capability and provides our clients with visibility to the meaningful data to better run their business.

PLUG INTO A FORTUNE 200 BENEFITS PLATFORM!



























WORKER'S COMPENSATION









- *State National Guaranteed Cost Captive brought to you by The AmWins Group
- **All A- or better rated carriers
- HOW ABO CREATES VALUE FOR YOUR WORKERS COMPENSATION SOLUTION:
 - Customizable Programs with a wide range of available codes
 - Three National A rated carriers
 - No Audits
 - No Deposits
 - Risk Management
 - · Claims Management
 - Back to Work Programs
 - Costs savings
 - Security

The Health Plans

\$2,056.33

\$2,570.42

Employee + 1

Family

Plan Specs	Plan 1	Plan 2	Plan 3	
Carrier	BlueCross BlueShield of Michigan	BlueCross BlueShield of Michigan	BlueCross BlueShield of Michigan	
Plan Name	Simply Blue \$500	Simply Blue \$1,000	Simply Blue \$2,500	
Plan Type	PPO	PPO	PPO	
Network	Simply Blue PPO	Simply Blue PPO	Simply Blue PPO	
In Network				
Deductible: Single	\$500	\$1,000	\$2,500	
Deductible: Family	\$1,000	\$2,000	\$5,000	
Co-Insurance	80%	80%	80%	
Out-of-Pocket Limit: Single	\$6,350	\$6,350	\$6,350	
Out-of-Pocket Limit: Family	\$12,700	\$12,700	\$12,700	
Inpatient Facility	80% Coinsurance and Deductible	80% Coinsurance and Deductible	80% Coinsurance and Deductible	
Outpatient Surgery	80% Coinsurance and Deductible	80% Coinsurance and Deductible	80% Coinsurance and Deductible	
Copays				
PCP	\$20	\$30	\$30	
Specialist	\$20	\$30	\$50	
Urgent Care	\$20	\$30	\$60	
ER	\$150	\$150	\$150	
Other Services				
Diagnostic Lab / X-Ray	80% Coinsurance and Deductible	80% Coinsurance and Deductible	80% Coinsurance and Deductible	
MRI & CT Scan	80% Coinsurance and Deductible	80% Coinsurance and Deductible	80% Coinsurance and Deductible	
Prescription Drugs				
Individual Prescription Deductible	N/A	N/A	N/A	
Family Prescription Deductible	N/A	N/A	N/A	
Generic / Preferred / Non Preferred /	\$10/\$40/\$80	\$10/\$40/\$80	\$10/\$40/\$80	
Specialty	\$10/\$40/\$00	\$10/\$40/\$00	\$10/\$40/\$00	
Out of Network				
Deductible: Single	\$1,000	\$2,000	\$5,000	
Deductible: Family	\$2,000	\$4,000	\$10,000	
Co-Insurance	60%	60%	60%	
Out-of-Pocket Limit: Single	\$12,700	\$12,700	\$12,700	
Out-of-Pocket Limit: Family	\$25,400	\$25,400	\$25,400	
Monthly Premiums				
Employee Only	\$856.81	\$805.11	\$721.31	

\$1,932.27

\$2,415.32

\$1,731.13

\$2,163.91

The Health Plans

Plan Specs	Plan 4	Plan 5	Plan 6
Carrier	BlueCross BlueShield of Michigan	BlueCross BlueShield of Michigan	BlueCross BlueShield of Michigan
Plan Name	Simply Blue \$3,000	Simply Blue HSA \$3,200	Simply Blue HSA \$6,350
Plan Type	PPO	PPO / HDHP	PPO / HDHP
Network	Simply Blue PPO	Simply Blue PPO	PPO / HDHP
In Network			
Deductible: Single	\$3,000	\$3,200	\$6,350
Deductible: Family	\$6,000	\$6,400	\$12,700
Co-Insurance	80%	100%	100%
Out-of-Pocket Limit: Single	\$8,150	\$6,900	\$6,350
Out-of-Pocket Limit: Family	\$16,300	\$13,800	\$12,700
Inpatient Facility	80% coinsurance	No Charge After Deductible	No Charge After Deductible
Outpatient Surgery	80% coinsurance	No Charge After Deductible	No Charge After Deductible
Copays			
PCP	\$40	No Charge After Deductible	No Charge After Deductible
Specialist	\$60	No Charge After Deductible	No Charge After Deductible
Urgent Care	\$60	No Charge After Deductible	No Charge After Deductible
ER	\$250	No Charge After Deductible	No Charge After Deductible
Other Services			
Diagnostic Lab / X-Ray	80% coinsurance	No Charge After Deductible	No Charge After Deductible
MRI & CT Scan	80% coinsurance	No Charge After Deductible	No Charge After Deductible
Telemedicine	-	-	_
Prescription Drugs			
Individual Prescription Deductible	N//A	N/A	N/A
Family Prescription Deductible	N/A	N/A	N/A
Generic / Preferred / Non Preferred /			
Specialty	\$10/\$40/\$80	\$10/\$40/\$80	No Charge After Deductible
Out of Network	t / 000	t / 400	#10.700
Deductible: Single	\$6,000	\$6,400	\$12,700
Deductible: Family	\$12,000	\$12,800	\$25,400
Co-Insurance	60%	80%	80%
Out-of-Pocket Limit: Single	\$16,300	\$13,800	\$15,000
Out-of-Pocket Limit: Family	\$32,600	\$27,600	\$30,000
Monthly Premiums	4	4/55.0/	4540.70
Employee Only	\$685.66	\$655.06	\$548.70
Employee + 1	\$1,645.57	\$1,572.15	\$1,316.85
Family	\$2,056.97	\$1,965.20	\$1,646.07



Dental



MetLife

Summary of Dental Benefits

Employer Sponsored Dental							
Class Description	High Plan		Mid Plan - MAC				
	In-Network	Out-of-Network	In-Network	Out-of-Network			
Reimbursement	Negotiated Fee	R&C	Negotiated Fee	Negotiated Fee			
	Schedule	80th Percentile	Schedule	Schedule			
Type A – Preventive	100%	100%	100%	100%			
Type B – Basic	80%	80%	80%	80%			
Type C – Major	50%	50%	50%	50%			
Calendar Year Deductible	B&C	B&C	B&C	B&C			
applies to: Individual	\$50	\$50	\$50	\$75			
	\$150	\$150	\$150	\$225			
 Family 	Aggregate	Aggregate	Aggregate	Aggregate			
Calendar Year							
Maximum	\$1,500	\$1,500	\$1,000	\$1,000			
(applies to A,B,C services)	V .,000	V 1,000	V 1,000	V 1,000			
Orthodontia	50%	50%	50%	50%			
Orthodontia Lifetime Maximum	\$1,500*	\$1,500*	\$1,000*	\$1,000*			
EMPLOYEE ONLY	High Plan	\$43.87	Mid Plan	\$29.36			
EMPLOYEE + ONE	High Plan	\$80.00	Mid Plan	\$54.36			
EMPLOYEE + FAMILY	High Plan	\$144.88	Mid Plan	\$96.79			

Thank You!



