



# **VALUE STUDY DESK MANUAL**

**PREPARED FOR: DEPARTMENT OF ENERGY  
Office of Contractor Human Resources Policy Division**

**September 26, 2012 UPDATE**

# VALUE STUDY DESK MANUAL

*Prepared for:* **DEPARTMENT OF ENERGY**

*By:* **BUCK  
CONSULTANTS**  
Under DE-AC01-96AD38107

*Update Prepared for:* **DOE**

*By:* **AON CONSULTING, INC.**  
Under Delivery Order DE-BP01-08MA345678,  
Contract No. DE-AB01-08-ME11881  
September 28, 2008

*Update Prepared for:* **DOE**

*By:* **Aon Hewitt Inc.**  
Under Delivery Order DE-BP01-08MA345678,  
Contract No. DE-AB01-08-ME11881  
September 26, 2012

## Contents

### PART I

#### Overview of Value Study

<b>Illustrative Flow Charts .....</b>	<b>1</b>
<b>1. Purpose .....</b>	<b>5</b>
Definition and Objectives: Implication of Results	
<b>2. Value Study Strength and Weaknesses Versus Cost Study.....</b>	<b>11</b>
Demographic Differences: Election Patterns, Funding Differences, Geographic Factors, Negotiated Pricing, Turnover and Retirement Issues.	

### PART II

#### Preliminary Steps

<b>1. Comparator Group Selection.....</b>	<b>18</b>
Definition of Market. Database Implications.	
<b>2. Employee Group Selection.....</b>	<b>23</b>
<b>3. Value Study Preparation.....</b>	<b>24</b>
Consultant Selection. Data Collection and Validation.	

### PART III

#### Valuation Methodology and Assumptions

<b>1. Overview .....</b>	<b>28</b>
<b>2. Assumptions .....</b>	<b>29</b>
Demographics. Election Patterns. Interest and Salary Scale. Missing Data. Turnover and Retirement.	
<b>3. Valuation Methodology .....</b>	<b>36</b>
Capital Accumulation. De Minimis Benefits. Death. Defined Benefit. Defined Contribution, Disability. Flex. Grandfathered Benefits. Health. Paid Time Off. Post Retirement Benefits.	
<b>4. Informal Programs .....</b>	<b>51</b>
Paid Time Off. Other.	
<b>5. Net Benefit Value.....</b>	<b>54</b>
Definition and Acceptable Value. Determination of Total Net Benefit Value.	
<b>6. Report .....</b>	<b>58</b>

**PART IV**  
**Field Office Review**

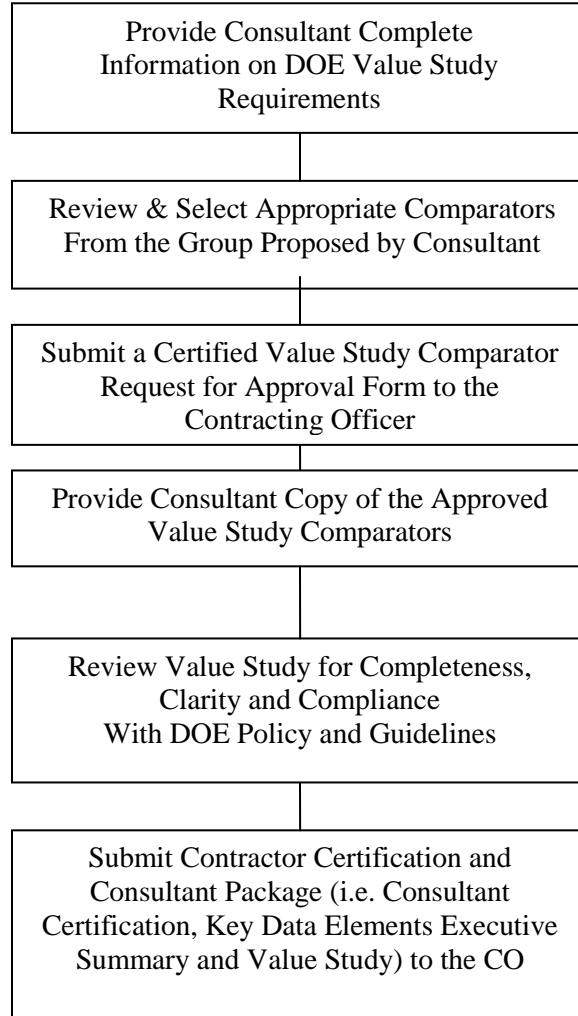
<b>1. Elements to be Reviewed .....</b>	<b>60</b>
<b>2. Uniform Electronic File Maintenance .....</b>	<b>61</b>
<b>3. Corrective Action Plan.....</b>	<b>63</b>

**Part V**  
**Supplemental Information**

<b>1. Forms .....</b>	<b>67</b>
Appendix A    Value Study Comparator Request for Approval Form .....	68
Appendix B    Contractor Certification .....	69
Appendix C    Actuarial Certification .....	72
Appendix D    Value Study Checklist Field Office Review .....	75
Appendix E    Corrective Action Plan Determination Checklist Field Office Review	78
Appendix F    Corrective Action Plan Implementation Checklist Field Office Review	79
Appendix G    Value Study Executive Summary.....	80
<b>2. References.....</b>	<b>81</b>
Exhibit A    Actuaries Code of Professional Ethics.....	86

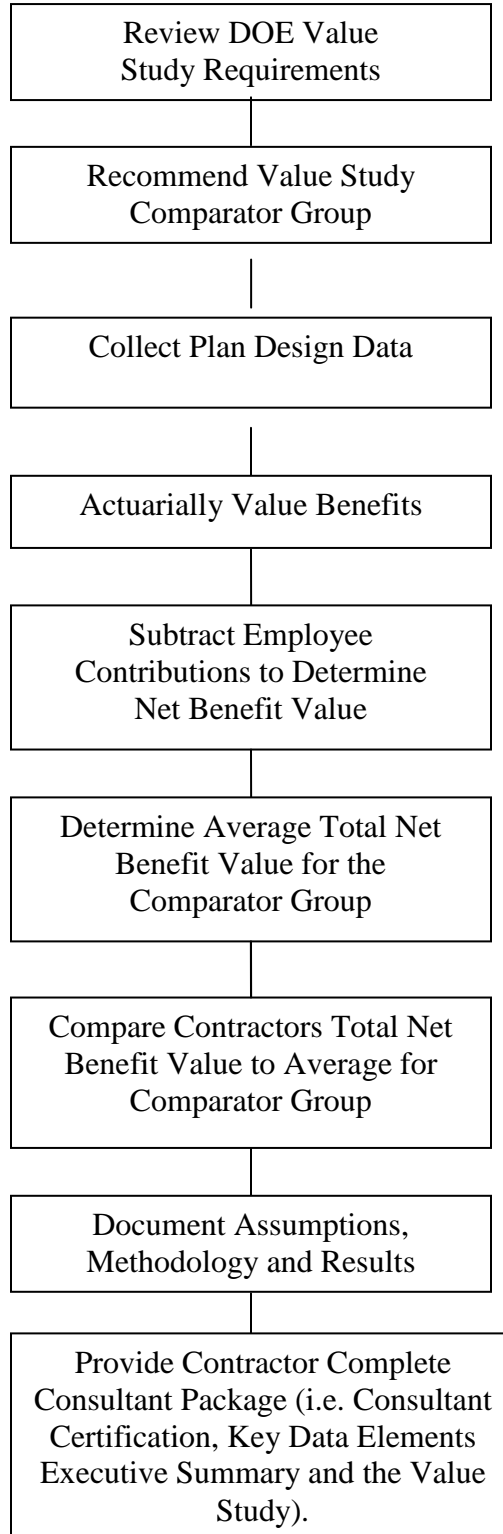
# Value Study Process Description

## DOE CONTRACTOR



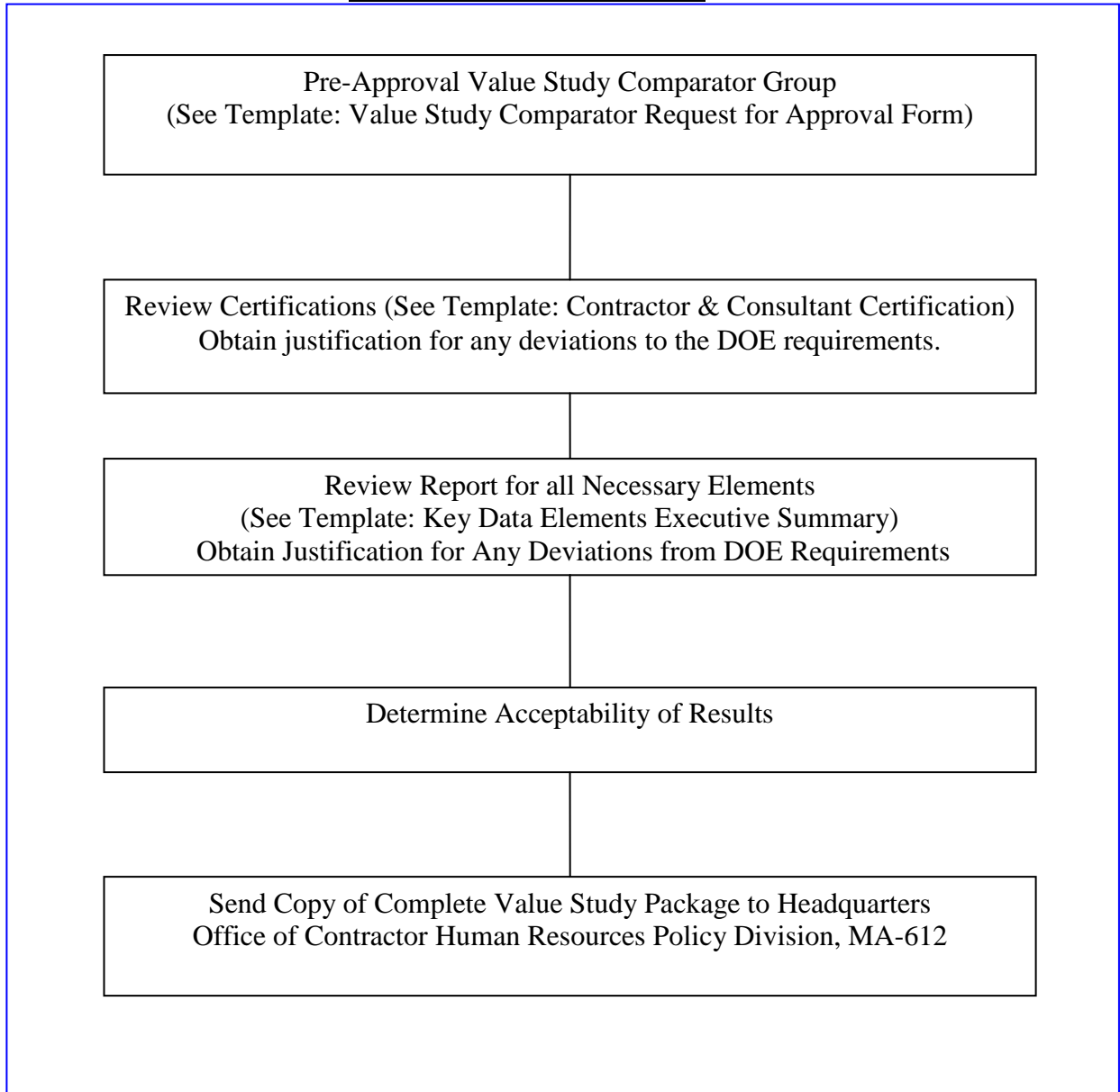
# Value Study Process Description

## CONSULTANT



# Value Study Process Description

## CONTRACTING OFFICER



**Part I.1. Purpose**  
**Definition and Objectives**

---

General Background Information

A value study and a cost study must be conducted to satisfy DOE's contractual requirement in Special Clause titled Pay and Benefits.

A Value Study is defined as an actuarial study which is intended to measure the relative worth of competing programs to employees regardless of the actual cost of such programs to the employer.

The study is performed using a single methodology and set of assumptions to value all competing programs. By doing so, it "normalizes" all variables which impact the cost of the programs other than differences in plan design and benefit levels themselves. Examples of variables which impact contractor cost which are "normalized" in a Value Study are: demographics, election patterns, funding practices, geographic factors, negotiated pricing, turnover and retirement rates, interest and salary increase assumptions.

Value Study results make it possible for a contractor with an average benefit package to pass DOE guidelines even if due to the variables discussed above the contractor has costs which exceed DOE guidelines. Thus a contractor is not held responsible for certain factors over which they have only limited control and is held accountable primarily for the value of the plan design provided.



## **Part I.1. Purpose**

### **Definition and Objectives**

---

#### DOE Requirements

##### DOE Benefit Value Study Objective

The Department's objective is to enable the hiring of "world class" nuclear workforce at DOE Facilities in accordance with the National Defense Authorization Act of 1997 and 1998 (the Acts).

The Acts created "The Commission on Maintaining the United States Nuclear Weapons Expertise" (also known as the Chiles Commission). The commission was directed to develop a plan for recruiting and retaining within the DOE nuclear weapons complex such scientific, engineering, and technical personnel as the Commission determines appropriate in order to permit the DOE to maintain over the long term period a safe and nuclear weapons stockpile. The study revealed the following: (1) aging nuclear workforce at DOE facilities, (2) there is a strong "war of talent" in DOE contractor's competitive market place, (3) number of college students in the field of science is shrinking, and (4) DOE management and program planning practices hinder the recruitment and retention of highly skilled workforce. In response to the commission's findings, the Department implemented a policy that utilizes employee benefits as a recruitment and retention tool for highly skilled nuclear workforce. In order for this policy to succeed, it is necessary to measure the value benefits. The benefit value study is the measurement tool used in determining the competitiveness of the DOE contractor's employee benefits program.

## **Part I.1. Purpose**

### **Definition and Objectives**

---

#### DOE Requirements (*continued*)

- (1) When conducting a Value Study, the following requirements apply:
  - (a) The contractor shall determine a list of no less than 15 participants to be a part of the study. The Contracting Officer shall approve the list prior to the performance of the study.
  - (b) The Value Study shall include major non-statutory benefit plans offered by the contractor, including qualified defined benefit and defined contribution retirement and capital accumulation plans, and death, disability, health, and paid time-off welfare benefit programs.
  - (c) The Value Study must be performed by a national consulting firm with expertise in benefit value studies.
  - (d) To the extent this methodology does not address post-retirement benefit programs, contractors shall provide the Contracting Officer separate cost and plan design data on post-retirement benefits other than pensions compared to external benchmarks of a nationally recognized survey source on a regular basis as specified in the terms of the contract.

#### DOE Guidelines for Preparation and Review

See Parts II, III and IV.

**Part I.1. Purpose**  
**Definition and Objectives**

---

Areas of Concern

In order to provide assurance that the Value Study provides a valid measure of the appropriateness of a contractor's benefit programs with respect to DOE guidelines, enforcement of the following Value Study components are of critical importance:

- The comparator group of companies selected must represent the contractor's labor market
- The data utilized must be current, complete and accurate
- The consulting firm selected must have expertise in performing such studies
- The valuation methodology and assumptions must be reasonable for the benefits valued.
- DOE guidelines must be followed with respect to development of results and documentation of methodology and assumptions
- Consistency of the comparator group, methodology and assumptions between initial and subsequent studies is essential

**Part I.1. Purpose**  
**Implications of Results**

---

General Background Information

A Cost Study provides a comparison of the contractor's per capita cost per full-time equivalent employee and the percent of payroll cost to a published broad based national employee benefits cost survey approved by the Contracting Officer. Thus a comparison is made of the actual cost of the contractor's plan to the average cost of the survey population.

A Value study does not measure the contractor's or competing participant's actual costs *per se*. Instead, a theoretical cost value for each program is actuarially assigned based solely on the plan design provisions and a standard methodology and assumptions. Under this approach, all participants with the same plan provisions will be calculated to provide the same dollar "value" of benefits regardless of the participant's actual cost. Thus, random differences in cost due to a variety of non-benefit related variables are eliminated from the Value Study results.

A Value Study result that says the contractor is 1.05 of the comparator group (i.e., 5% above) indicates that the contractor's employees are actuarially projected to receive 5% more benefits than if they were covered under the average plan design of the comparator group. The actual cost of providing such benefits may be higher or lower than the average cost for the comparator group.

## Part I.1. Purpose

### Implications of Results

---

#### Illustrations

Life insurance provides a simple illustration of the implications of the Value Study concept versus a Cost Study. Actual life insurance premiums vary by age of the underlying employee group and their prior claims experience. Under a Value Study, the impact of these variables on the results is eliminated.

	<u>Contractor</u>	<u>Employer A</u>	<u>Employer B</u>
<u>Cost Study</u>			
Life Insurance	\$ 95,000	\$ 100,000	\$ 100,000
Actual Premium	<u>\$0.23/\$1.000</u>	<u>\$0.16/\$1.000</u>	<u>\$0.24/\$1.000</u>
Actual Monthly Cost	\$ 21.85	\$ 16.00	\$ 24.00
Peer Group Average	\$ 20.00		
% of Average	109.00%		
<u>Value Study</u>			
Life Insurance	\$ 95,000	\$ 100,000	\$ 100,000
Theoretical Premium	<u>\$0.20/\$1.000</u>	<u>\$0.20/\$1.000</u>	<u>\$0.20/\$1.000</u>
Monthly Cost	\$ 19.00	\$ 20.00	\$ 20.00
Peer Group Average	\$ 20.00		
% of Average	95.00%		

Thus, a Value Study gives a much clearer picture than a Cost Study would of how the actual benefits to be received by an employee's beneficiary upon death compare to the average benefits paid by the comparator group.

## **Part I.2. Value Study Strengths and Weaknesses Versus Cost Study**

---

### **Demographic Differences**

#### General Background Information

One weakness of a Cost Study is that an employer with high cost demographics can be judged to be non-compliant with DOE's 5% above average cost guidelines, even if it is necessary to offer "Average" benefits to attract and retain competent and productive employees. That is, under certain demographic profiles, an average benefit program will cost more than 5% above average.

A Value Study eliminates the impact of "unfavorable" demographics by utilizing a single demographic profile for assigning an actuarial value to each employer's benefit package.

#### Areas of Concern

The demographic profile used in the Value Study can skew the weighting of the relative values between different plans, i.e., health care and retirement benefits, or paid time off and disability coverage, etc. Thus, the demographic assumption used must be reasonable in comparison to the contractor's actual demographics. See Part III.2 for more information on the impact of demographics.

## **Part I.2. Value Study Strengths and Weaknesses Versus Cost Study Election Patterns**

---

### General Background Information

One weakness of a Cost Study is that an employer with a higher percentage of family coverage, or higher percentage of 401(k) participation, than its comparator group can be judged to be non-compliant with DOE's 5% above average cost guidelines, even if it is necessary to offer "Average" benefits to attract and retain competent and productive employees. That is, under certain family coverage or 401(k) participation profiles, an average benefit program will cost more than 5% above average.

A Value Study eliminates the impact of "unfavorable" election patterns by utilizing a single set of election assumptions for assigning an actuarial value to each employers benefit package.

### Areas of Concern

The election pattern assumed in the Value Study can skew the rating of the relative values between different plans, i.e. health care and paid time-off, or defined benefit and 401(k) coverage, etc. Thus the election pattern used must be reasonable in comparison to the contractor's election patterns. See part III.2 for more information on the impact of election patterns.

**Part I.2. Value Study Strengths and Weaknesses Versus Cost Study**  
**Funding Differences**

General Background Information

Cost information presented by an employee benefits cost survey is impacted by employer funding decisions. It is impossible to assure and very unlikely that self-funded costs are calculated and reported on the same basis as insured programs. In addition, differences in funding levels, asset returns and actuarial assumptions ensure a broad range of possible cost for defined benefit programs. These differences are eliminated in a Value Study by using a single set of valuation assumptions and methodology for determining the value of competing programs.

Illustrations

A comparison of insured and self-funded plan rates show that even if the self-funded plan uses the same reserve levels and administrative expenses as an insured product (which in actual practice would probably not be the case) the insured plan will almost always include a claims fluctuation margin ranging from 2 to 5 percent. This results in the cost reported by employers differing even when the benefits are identical.

	<u>Insured</u>	<u>Self-Funded</u>
Incurred and Paid Claims	\$1,000	\$1,000
Reserves	\$ 250	\$ 250
Administrative Expenses	\$ 50	\$ 50
Margin	<u>\$ 26</u>	<u>\$ ----</u>
	\$1,326	\$1,300

In addition, a defined benefit plan may have a cost of \$0 even though it provides a significant value to plan participants. This can occur through a combination of contributing more than the minimum funding requirements in past years and high asset returns which can result in the plan being "fully funded" for tax purposes.

A Value Study eliminates the impact of both these issues by using a single set of valuation assumptions and methodology.



**Part I.2. Value Study Strengths and Weaknesses Versus Cost Study  
Funding Differences**

---

Areas of Concern

The assumptions used in valuing a defined benefit plan should be a reasonable projection of future experience under the plan. See Part III.2 for additional information. In addition, this concern is covered by the Actuarial Certification contained in Appendix C. Any concerns in an actual study should be referred to the Office of Contractor Management Policy Division for technical review.

**Part I.2. Value Study Strengths and Weaknesses Versus Cost Study**  
**Geographic Factors**

---

General Background Information

Cost of providing medical coverage can vary dramatically based on where employees are located. For example, medical plan costs in Los Angeles may average 2 times the cost of the same plan in the rural midwest. Likewise, dental costs in Los Angeles may be 1.7 times the cost of the same plan in the rural midwest.

Thus, one weakness of a Cost Study is that an employer in a high cost geographic area can be judged to be non-compliant with DOE 5% above average cost guidelines even if it is necessary to offer "Average" benefits to attract and retain competent and productive employees. That is, under certain geographic distributions of employees, an average benefit program will cost more than 5% above average.

A Value Study eliminates the impact of "unfavorable" geographic distributions of employees by utilizing a single set of actuarial cost factors regardless of the geographic area in which employees are located.

**Part I.2. Value Study Strengths and Weaknesses Versus Cost Study  
Negotiated Pricing**

---

General Background Information

Significant differences in contract terms and rates can exist in either insured or administrative service only contracts for self-funded benefit programs. These differences clearly impact the results of a Cost Study. These differences are eliminated in a Value Study through the use of a single set of cost factors which are related strictly to benefit plan design. As such, the relative strength of the negotiator's expertise does not impact the Value Study results. In addition, most standard HMO plans will receive a higher relative value in a Value Study than a traditional indemnity medical plan even though the cost of the HMO may be lower due to its managed care characteristics.

Areas of Concern

The DOE is concerned that its contractors are diligent in negotiating the best possible rates for their benefit programs. The results of a Value Study do not reflect the relative effectiveness of the contractors' rate negotiations. Therefore, if a Value Study is utilized, the Contracting Officer should be particularly diligent in administering DOE O 350.1 Chapter V Paragraph (b) (1), (2), and (13) to assure that effective cost management of the benefits program is being pursued by the contractor.

## **Part I.2. Value Study Strengths and Weaknesses Versus Cost Study Turnover and Retirement Issues**

---

### General Background Information

Employers with high turnover and low early retirement rates will realize less cost for their defined benefit retirement program than those with low turnover and high early retirement rates. Similar to demographic differences, election patterns, and geographic factors, these factors can cause one contractor to fail a Cost Study, while another contractor with identical benefit programs would pass due to such differences in actual experience. This issue is eliminated from a Value Study by using a common set of turnover and retirement assumptions to value each employer's plan.

### Areas of Concern

The turnover and retirement assumptions used in the Value Study can skew the results of the defined benefit plan values due to differences in accrual rates and early retirement subsidies. These assumptions can also skew the comparison between different plans, i.e. defined benefit and 401(k). Thus the turnover and retirement assumptions used must be reasonable in comparison to the contractor's actual experience. See Part III.2 for more information on the impact of turnover and retirement assumptions.

## **Part II.1. Comparator Group Selection**

---

### **Definition of Market**

#### General Background Information

Unlike Cost Study guidelines which preclude selection of individual employers by the contractor, a Value Study is predicated on selection of a relatively small number of employers by the contractor to serve as their comparator group. This makes it critical that the comparator group selected is representative of the market in which the contractor competes for employees.

#### DOE Requirements Under DOE O 350.1

DOE O 350.1 Chapter V- Benefits  
Attachment 1, Paragraph 2.a.(1)

"When selecting the benefit value study comparator group, the following requirements apply

(a)The contractor shall determine a list of no less than 15 participants to be part of the study. The Contracting Officer shall approve the list prior to the performance of the study."

This shall be interpreted to mean 15 participants in addition to the contractor.

## **Part II.1. Comparator Group Selection**

---

### **Definition of Market**

#### DOE Guidelines for Preparation and Review

All 15 or more study participants must be approved in advance of the study by the Contracting Officer as representing the appropriate market in which they compete for employees.

#### **Value Study Methodology**

- Value Study participants represent the contractor's parent organization, where applicable, and organizations in the same industries from which the contractor competes for employees.
- No other DOE contractors are required to be participants. However, if they are used, no more than 20 percent of the participants may be DOE contractors.
- Participants for multi-employer plans (site-wide plans) proportionately represent the different contractors within the plan.

The following additional clarification is provided to further define the competitive market from which comparator firms are to be selected:

- All study participants must compete for exempt level professional staff (non-executives) in the same industry as the contractor, or
- In rare situations, a contractor may propose an unexpected comparator company because of job losses to that employer. In these situations, the contractor must document that they have gained or lost more than 4 exempt level professional staff (non-executives) to the comparator firm during the prior 5 years who have the same skill sets as professional staff of the comparator firm. Such conditions should be certified by the contractor as shown in Appendix A along with submission of appropriate documentation.
- Subsequent studies should use identical comparator groups unless advance approval is granted by the Contracting Officer.

## **Part II.1. Comparator Group Selection**

---

### **Definition of Market**

#### Areas of Concern

The results of a Value Study are extremely sensitive to the comparator group selection. To avoid invalid conclusions, it is critical that the Contracting Officer approve the appropriateness of the market comparator group prior to commencement of the study. Subsequent studies should require use of an identical comparator group. The DOE is concerned that replacement of a "low value" participant with a "high value" participant in a subsequent study could significantly alter the study results in the contractor's favor. Lack of willingness to provide current data by a prior study participant should be independently verified by the Contracting Officer before they are allowed to be replaced in the comparator group of a subsequent study.

## **Part II.1. Comparator Group Selection**

---

### **Database Implications**

#### General Background Information

Several National Consulting firms maintain and update databases of employee benefit plan design for specified employers on an annual basis. However, data may be custom surveyed from employers not participating in the general database for the purpose of performing a Value Study.

#### DOE Requirements Under DOE O 350.1

None

#### DOE Guidelines for Preparation and Review

The DOE is equally comfortable with the contractor selecting participants from an existing database or requesting their consultant to custom survey participants. Regardless of the approach however, participants:

- Must satisfy the “Definition of Market”.
- Must have supplied current data (see Part II.3. Data Collection and Validation),
- Must meet the minimum number of participants in addition to the contractor (15), and,
- Must remain consistent from one Value Study to the next.

The DOE recognizes that the cost of the study may be impacted by the need to conduct a custom survey in the initial or subsequent years. However, the lack of participation of approved participants in a particular database should not override the need to meet all four of the guidelines previously stated if such guidelines can be met through a custom survey.



## **Part II.1. Comparator Group Selection**

---

### **Database Implications**

#### Areas of Concern

In order to minimize the cost of the Value Study a contractor may wish to use participants in an existing database. The contractor's desire to use an existing database will not be a justification to modify DOE requirements for comparator group selection.

## **Part II.2. Employee Group Selection**

---

### General Background Information

Employers may specify different levels of benefits for different subsets of employees. Typical subsets may include bargained employees, non-bargained hourly, salaried and executives. Subsets other than the four listed above may also be identified, e.g, incumbent employees and new hires, as may be required by the terms of a follow-on contract.

### DOE Requirements Under DOE O 350.1

Reserved for citation

### DOE Guidelines for Preparation and Review

In order to ensure apples to apples comparisons, a single subset of employees must be specified. Benefits information applicable to that subset of employees for each of the comparator group employers must be collected and valued on a consistent basis. The benefits data collected for a Value Study under DOE guidelines should be that applicable to exempt level professional staff (non-executives). The contractor and consultant should each certify that the appropriate subset has been used in accordance with Appendices B and C.

### Areas of Concern

The use of the definition “salaried” employees has specifically been avoided due to the overly broad use of the term. The term “salaried” may encompass non-exempt salaried, salaried non-professional, salaried professional, and executive staff. It has been determined that the value added by DOE contractors stem primarily from our access to the work product of their “exempt-level professional staff.” Therefore, the benefit plans valued for each employer in the comparator group should be those provided to this level of employee.

## **Part II.3. Value Study Preparation**

---

### **Consultant Selection**

#### General Background Information

It is the intent of the DOE to allow Value Studies to be performed by any qualified national consulting firm with expertise in performing such studies. In doing so, it is recognized that minor differences in the approach to data collection and validation, valuation methodology and assumptions, and report presentation will arise. It is not the intent of the DOE to prescribe how such studies are performed as to do so may preempt the contractor's freedom to choose their consultant. The guidelines in this manual have been developed with the intention that the broadest latitude be granted in the performance of such studies while ensuring compliance with the minimum standards necessary to provide valid and consistent results.

#### DOE Requirements Under DOE O 350.1

DOE O.350.1 Chapter V-Benefits  
Attachment 1, Paragraph 2.a.1.(c)

DOE requires that "the Value Study must be performed by a national actuarial consulting firm with expertise in benefit value studies."

#### DOE's Guidelines for Preparation and Review

To satisfy the definition as a national consulting group, the DOE would expect the consultant to have revenues in excess of \$5,000,000 annually.

In addition, it is required that a qualified actuary within the firm will provide a certification, as shown in Appendix C, of the firm's expertise in performing such studies.

## **Part II.3. Value Study Preparation**

---

### **Consultant Selection**

#### Areas of Concern

It is difficult in advance to judge the qualifications of the selected consultant. However, the actuarial profession is expected to adhere to a Code of Professional Conduct. (see Exhibit B) As such, the DOE is willing to rely on an actuarial certification as outlined in Appendix C to insure that the study has been performed in accordance with DOE guidelines regarding consultant expertise. In the absence of such an actuarial certification, it is expected the consultant will substitute such documentation and proof of its expertise as necessary to comply with the requirements of the contract.

## **Part II.3. Value Study Preparation**

### **Data Collection and Validation**

#### General Background Information

Critical to the accuracy of the valuation project is the collection of complete, accurate and up-to-date data on the comparator groups benefit plans. Due diligence should be exercised to ensure all data utilized is sufficient and appropriate to development of the Value Study results.

#### DOE Requirements Under DOE O 350.1

None

#### DOE Guidelines for Preparation and Review

The contractor shall ensure that the comparison organization's benefit data is up-to-date (as of the beginning of the evaluation year). As a practical matter, this responsibility may be delegated to the consulting firm utilized.

Due to the possibility of evaluation years not corresponding with the calendar year or the plan years for the comparator group we will clarify the definition of up-to-date. Participant data is considered up-to-date if it accurately reflects the participants' plans as of the January 1 coincident with or immediately preceding (if the evaluation year is other than a calendar year) the first day of the evaluation year. For example if the evaluation year is July 1, 2011 through June 30, 2012, participant data which is accurate as of January 1, 2011 or later shall be considered up-to-date.

The consultant shall be required to include a statement as to the current status of the data as part of their actuarial certification (see Appendix C).

If in a subsequent year the participant is unwilling to supply current data, the Contracting Officer is responsible for independently verify such position with the consultant. If it is determined that current data meeting the guidelines is not available, the contractor should request a change of comparator group through their DOE Contracting Officer with an explanation of the reason for such request. Such change in comparator group must be approved before the Value Study is undertaken.

**Part II.3. Value Study Preparation**

---

**Data Collection and Validation**

Areas of Concern

Certain benefit plan provisions may change annually, e.g. employee contributions, or profit sharing contributions. These changes can materially affect the Value Study results. Therefore the Contracting Officer must enforce this aspect of the DOE requirements to ensure valid results are received.

## **Part III.1. Overview**

---

### General Background Information

The valuation methodology utilized to produce a Value Study is intended to develop a theoretical actuarial value of benefits provided by an employer. This theoretical value is developed using a single assumed demographic profile for all participants and a single set of economic assumptions. Thus, variations in value from one participant to the next are strictly related to differences in benefit provisions between the plans.

## **Part III.2. Assumptions**

### **Demographics**

---

#### General Background Information

Demographic data include age, salary and service data. Cost Studies are very sensitive to demographics. Average costs recorded by cost surveys reflect the average demographic profile of all employers in the database. Costs for all benefits valued are highly sensitive to these demographics, with higher costs generally associated with higher ages, higher salaries and longer service. Thus a contractor with an average benefit plan, but high cost demographics, can easily exceed 105% of average cost under the cost survey study.

A Value Study eliminates the impact of these demographic differences by utilizing a common set of demographics to value all participants' plans. Thus the result of the Value Study is not affected by differences between the demographic profiles of the contractor and the other study participants.

#### DOE Requirements Under DOE O 350.1

None

#### DOE Guidelines for Preparation and Review

The Value Study report should include a statement regarding whether the contractors actual demographics were used to value the plans or an assumed general population demographic profile. Both alternatives are acceptable. However, once an alternative has been selected, the same approach should be used for all future Value Studies so that trends may be analyzed and consistency of analysis assured. Advance approval must be obtained from the Contracting Officer prior to changing the basis of the demographic profile for subsequent studies.



**Part III.2. Assumptions**

**Demographics**

Illustrations

The impact of differences in demographics on a Cost Study can be illustrated by comparing theoretical differences in cost between an assumed general population and an illustrative contractor population.

	<u>General Population</u>	<u>Illustrative Contractor</u>
Average Salary	\$40,000	\$ 51,000
Average Age	38	40
Average Service	8	12

Even with the minor demographic differences above, the contractor would likely fail a Cost Study if they offered an average benefit program. All salaried related benefits would cost 27.5% more than the general population. Benefits not related to pay (e.g., medical, dental, disability) would on average cost 2% to 6% more than average because of a 2 year older covered population. Paid Time Off and salary related defined benefit retirement benefits would not only cost 27.5% more based on salary, but would likely have higher costs based on higher vacation accrual rates due to the longer service.

Under a Value Study all participants' benefit plans in the above illustration would be valued under a single set of demographics (i.e., either the contractor's own demographics or a general population assumption). In either case, if the contractor offered average benefits, their value under the study would be 1.00 which would satisfy the DOE requirements.

Areas of Concern

Using either the contractor's demographics or general population demographic assumption should lead to satisfactory results if used consistently from study to study. The primary concern therefore is that the assumption may be changed from one study to the next or that a "non-standard" population assumption could be developed which favors the contractor's program. Both of these issues are addressed in the requested Actuarial Certification shown in Appendix C.

## **Part III.2. Assumptions**

### **Election Patterns**

---

#### General Background Information

Election patterns exist for a variety of benefits including family coverage categories for medical/dental coverage, 401(k) plans and partially contributory death and disability benefits. For each benefit, the employers cost may vary by the benefits elected by employees. Thus, election patterns can make a significant difference in the results of both cost studies and value studies. In addition, if multiple benefit options are offered, or even under flexible benefits, the distribution of benefit elections will impact both cost and value studies.

#### DOE Requirements Under DOE O 350.1

None

#### DOE Guidelines for Preparation and Review

Using either (1) the contractor's election patterns, (2) a standard election pattern, (3) the average election pattern for the participant group, or (4) each participant's specific election pattern, is acceptable. However, once an alternative has been selected, the same approach should be used for all future Value Studies so that trends may be analyzed and consistency of analysis assured. Advance approval must be obtained from the Contracting Officer prior to changing the basis of the election patterns assumed for subsequent studies.

If an average election pattern for the participant group or an assumed standard population election pattern is used, the assumption should be reviewed to assure that no benefit type (i.e., medical, dental, disability, etc.) with a company contribution is assumed to be elected less than 50% of the time. If an assumption of less than 50% is used, the assumed election pattern should be forwarded to the DOE/headquarters office for further technical review and approval.

With respect to elections within a benefit type (i.e., multiple medical and dental plans), either an assumption that everyone is enrolled in the plan with the highest participation or that gives a weighted value based on actual enrollment should be acceptable, as in practice only minor differences in value will occur.

**Part III.2. Assumptions**

**Election Patterns**

---

Illustrations

The impact of differences in election patterns on a Cost or Value Study can be illustrated by comparing the difference in cost/value between an assumed general population and an illustrative contractor population using an average plan design.

	<u>General Population</u>	<u>Contractor Population</u>
Single Medical Premium	\$ 1,000	\$ 1,000
Family Medical Premium	\$ 2,750	\$ 2,750
Single Enrollment	50%	20%
Family Enrollment	50%	80%
Cost/Value	\$ 1,850	\$ 2,400
401(k) Participation	60%	80%
Average Pay	\$40,000	\$51,000
Avg. 40 1(k) Match - \$.50		
Match on 6% of Pay	\$ 720	\$ 1,224

Areas of Concern

A Value Study utilizing employee only medical and dental values would be inappropriate as many employers traditionally subsidize family benefits. Likewise an assumption that everyone has family benefits would weight these benefits too highly in the Total Benefit Value. Any of the four approaches described in these guidelines is acceptable.

## **Part III.2. Assumptions**

### **Interest and Salary Scale**

---

#### General Background Information

An interest and salary scale assumptions are used to project the economic value of long term benefit obligations. Examples of long term benefit obligations are defined benefit retirement plans, and other post-retirement benefit programs.

#### DOE Requirements Under DOE O 350.1

None

#### DOE Guidelines for Preparation and Review

The Headquarters, Office of the Chief Financial Officer, will issue guidance periodically on a range of assumptions which is considered reasonable for the valuation of long term benefit obligations. The assumptions used in the benefit value study must be consistent with this guidance.

Assumptions should be fully documented in the Value Study Report. Assumptions falling outside the range must be submitted with supporting documentation to the Contracting Officer in advance of the study.

#### Areas of Concern

Long term benefit obligations can make up significant portion (well in excess of 10%) of the total value of benefits provided. Thus, to avoid skewing of the overall results, such benefits must be valued under “realistic assumptions”.

## **Part III.2. Assumptions**

---

### **Missing Data**

#### General Background Information

The validity of the Value Study results is directly related to the quality of the data utilized. Inaccurate and incomplete data will result in questionable results.

#### DOE Requirements Under DOE O 350.1

None

#### DOE Guidelines for Preparation and Review

Because the contractor is in complete control of its own data, no study should be accepted based on incomplete data from the contractor.

With respect to other study participants in the comparator group, every effort must be made to assess and ensure completeness of the data utilized. If data is missing, the most conservative assumption should be made, i.e. the assumption resulting in the lowest relative value for the participant's plan. In many cases this will mean assuming that the participant's benefit for the missing data has a net benefit value of \$0. Any other assumption requires submission of supporting rationale to the headquarters office in advance of study completion. An actuarial certification as to the completeness of the data may be relied upon by the Contracting Officer absent any evidence to the contrary.

#### Areas of Concern

Refer to Part II.2 on data collection and validation.

## **Part III.2. Assumptions**

### **Turnover and Retirement**

#### General Background Information

Turnover and retirement assumptions are used to project the economic value of long term benefit obligations. Examples of long term benefit obligations are defined benefits retirement plans, and other post-retirement benefit programs.

#### DOE O Requirements Under DOE O 350.1

None

#### DOE Guidelines for Preparation and Review

The DOE does not intend to be prescriptive with respect to these assumptions at this time. However the following assumptions are considered unacceptable for purposes of a Value Study, submitted to the DOE.

#### Unacceptable Assumption

Turnover:	No Turnover
Retirement:	No Early Retirement

Assumptions for turnover and retirement should be documented in the Value Study Report for the purposes of verifying consistency between successive reports.

A statement should be included in the actuarial certification (Appendix C) representing that the assumptions result in a reasonable projection of anticipated experience under the plans valued.

#### Areas of Concern

Manipulation of turnover and retirement assumptions can materially impact study results. Therefore the reasonableness of the assumptions must be certified by the actuary preparing the study.

### **Part III.3. Valuation Methodology**

#### **Capital Accumulation**

##### General Background Information

Any benefit program which provides for the accumulation of account balances to be paid in a subsequent tax year (e.g. following retirement, termination, death or disability) is considered a Capital Accumulation Plan. The account balance may be expressed in dollars or share/units of stock depending on the underlying investments and accounting methodology.

The definition of capital accumulation plans includes all typical defined contribution plans, i.e. profit sharing, 401(k), money purchase. In addition it may include Stock Purchase plans where a significant employer discount from market price is provided.

##### DOE Requirements Under DOE O 350.1

DOE O 350.1, Chapter V – Benefits  
Attachment 1, Paragraph 2.a.(1)(b)

"The Value Study shall include major non-statutory benefit plans offered by the contractor, including...capital accumulation plans,..."

##### DOE Guidelines for Preparation and Review

Some consultants will include stock purchase plans in their definition of Defined Contribution or Capital Accumulation Plans.

Other consultants include only employee stock ownership plans where all employees receive an allocation of company paid stock, or plans which match employee 401(k) contributions in stock, and do not include discounted stock purchase plans in their value study results under the theory that the discounted purchase is not a benefit per se.

DOE is willing to accept either approach with respect to the inclusion/exclusion of stock purchase plans as long as it is consistent in subsequent value studies performed for the contractor.

Issues regarding valuation of all other forms of capital accumulation are discussed in the section on defined contribution valuation.

**Part III.3. Valuation Methodology**

---

**Capital Accumulation**

Areas of Concern

See defined contribution valuation section. Consistency in valuation methodology between subsequent Value Studies should be maintained to avoid gamesmanship of results.



## **Part III.3. Valuation Methodology**

---

### **De Minimis Benefits**

#### General Background Information

Each consulting firm has developed standard procedures for collection of benefit data which are unique to their organization. As such, the level of plan design detail utilized by different consulting firms to develop the values in the study will be different.

#### DOE Requirements under DOE O 350.1

##### DOE O 350.1 Chapter V - Benefits Attachment 1, Paragraph 2.a.(1)(b)

All major categories of benefits should be included in the study including post-retirement benefit programs (PRB) other than pension (defined benefit or defined contribution).

#### DOE Guidelines for Preparation and Review

It is the intent that all major benefit provisions be valued. For purposes of these guidelines, it is anticipated that the net benefit value of any benefit not valued in the study be less than 1% of the total net benefit value for the employer. Examples of such benefits may be dependent life coverage, accidental death and dismemberment benefits, hearing and in some cases vision benefits. Absent information to the contrary, the Contracting Officer may rely on a statement similar to that contained in the sample actuarial certification in Appendix C that all benefits have been included in the study which will have at least a 1% impact on the total net benefit value

## **Part III.3. Valuation Methodology**

---

### **Death**

#### General Background Information

Depending on the consulting firm utilized, the value of death benefits may be limited to life insurance, or may include the value of survivor income plans, and pre-retirement death benefits under a defined benefit or defined contribution plan.

#### DOE Requirements Under DOE O 350.1

DOE O 350.1 Chapter V-Benefits  
Attachment 1, Paragraph 2.a.(1)(b)

"The Value Study shall include major non-statutory benefit plans offered by the contractor including...death...benefit programs."

#### DOE Guidelines for Preparation and Review

Life insurance should be valued in all Value Studies. Ancillary death benefits provided under a defined benefit plan need not be explicitly valued as long as they are not valued for any of the participants. Death benefits payable under a defined contribution plan need not be valued if a "current total value" approach, rather than a "projected value" approach is used to value the defined contribution plan (see a description of these approaches in Part III.3. Valuation Methodology - Defined Contribution).

#### Areas of Concern

Substantial variation exists between consulting firms in the approach to valuing death benefits. While the DOE does not wish to be prescriptive in determining the approach used, it should follow the guidelines given above. In addition, once chosen, the methodology should remain consistent for subsequent valuations.

### **Part III.3. Valuation Methodology**

#### **Defined Benefit**

##### General Background Information

A defined benefit plan includes any promise to pay a pre-determined benefit upon retirement of a plan participant if they meet the plans eligibility criteria. The benefit is typically a function of pay and/or length of service.

##### DOE Requirements Under DOE O 350.1

DOE O 350.1 Chapter V-Benefits  
Attachment 1, Paragraph 2.a.(1)(b)

"The Value Study shall include major non-statutory benefit plans offered by the contractor including qualified defined benefit ... programs."

##### DOE Guidelines for Preparation and Review

Under DOE O 350.1 Chapter V, Paragraph 4.b.(14) the DOE is responsible for reimbursement of retirement benefits paid subsequent to contract termination for those who have earned such benefits. Therefore, the value of such benefits should be calculated on a basis consistent with the methodology for calculating the Service Cost component of the Net Periodic Pension Cost under the Unit Credit Method.

A statement from the valuation actuary similar to that contained in Appendix C shall be considered sufficient to verify such benefits have been properly valued, absent evidence to the contrary.

##### Areas of Concern

The consultant may or may not value ancillary benefits for death and disability provided through the defined benefit plan. Either approach is acceptable as long as it is applied consistently to all participants and does not change for subsequent valuations.

## **Part III.3. Valuation Methodology**

---

### **Defined Contribution**

#### General Background Information

Defined contribution programs specify a formula by which a contribution is made to an individual account for the participant which is paid out in a subsequent tax year (e.g. following retirement, termination, death or disability). The definition of defined contribution plan includes profit sharing, 401(k) and money purchase plans.

#### DOE Requirements

DOE O 350.1 Chapter V-Benefits  
Attachment 1, Paragraph 2.a.(1)(b)

"The Value Study shall include major non-statutory benefit plans offered by the contractor including ....defined contribution retirement....."

#### DOE Guidelines for Preparation and Review

Two distinct methods are utilized by consultants to assign the value of defined contribution benefits. Either approach is acceptable as long as it is used consistently in subsequent valuations. No universal terminology has been agreed upon to describe these approaches. The terminology used in this guideline is intended to be descriptive in nature only.

The "current total value" approach assigns a value based on the expected contribution to the plan as a percentage of pay in the current year. Assumptions to election patterns for voluntary programs (e.g. 401(k)) are discussed in Part III.2. Assumptions.

A second approach used by some consulting firms is the "projected value" approach. Under such an approach the accumulated account balance is projected using assumptions regarding contributions, interest earnings, and turnover/retirement rates. This projected account balance is then assigned a value by a process similar to a defined benefit plan. As such, portions of the defined contribution value may be reassigned as death benefits, disability benefits, and retirement benefits-in the final report.

### **Part III.3. Valuation Methodology**

---

#### **Defined Contribution**

##### Areas of Concern

Regardless of approach used, the consultant should meet the guidelines for valuation assumptions discussed in Part III.2.Assumptions. The approach and assumptions should be consistent in subsequent valuations in order to provide stable results.

### **Part III.3. Valuation Methodology**

---

#### **Disability**

##### General Background Information

Disability programs include sick leave, salary continuance, short term disability, long term disability, and any other program which provides benefits for employees who are unable to attend work due to illness or recovery from an accident. For reporting purposes such programs may be combined into one or more subcategories or reported separately.

##### DOE Requirements Under DOE O 350.1

DOE O 350.1 Chapter V-Benefits  
Attachment 1, Paragraph 2.a.(1)(b)

"The Value Study shall include major non-statutory benefit plans offered by the contractor including ....disability.... ."

##### DOE Guidelines for Preparation and Review

Disability benefits should be included in all Value Studies. Ancillary disability benefits provided under a defined benefit plan need not be explicitly valued as long as they are not valued for any of the participants. Disability benefits payable under a defined contribution plan need not be valued if a "current total value" approach, rather than a "projected value" approach is used to value the defined contribution plan (see a description of these approaches in Part III.3. Valuation Methodology -Defined Contribution).

The report should cover valuation of all disability benefits regardless of duration and whether they are insured or administered as salary continuance/sick leave.

### **Part III.3. Valuation Methodology**

---

#### **Disability**

##### Areas of Concern

Informal leave programs (i.e., those available by supervisory approval only) should be included with a value of \$0 unless the participating employer can provide average utilization data from which an assumed level of coverage can be derived. The contractor is required to provide average utilization data on any Informal Leave Programs provided to their employees - covering the contractor's employees as a \$0 disability benefit value is considered unacceptable for purposes of developing Value Study results.

**Part III.3. Valuation Methodology**

---

**Flex**

General Background Information

A Flexible Benefits program traditionally gives employees a pool of dollars they may use to spend on those benefits which are most desirable to them as an individual.

DOE Requirements Under DOE O 350.1

None

DOE Guidelines for Preparation and Review

If any of the participating companies offer flexible benefits, the consultant should provide a description of how Flex credits impact the results of the study.

The Contracting Officer should review this description to determine how "excess flex credits" if any, are factored into the Total Net Benefit Value. "Excess flex credits" are defined as credits in excess of the amount necessary to purchase the benefits assumed to be selected.

In addition, if a cash option exists for benefits waived, the consultant should disclose the impact of these "waiver credits" on the calculation of the Total Net Benefit Value.

Areas of Concern

The treatment of flexible benefits is primarily only of concern if the contractor offers a flexible benefits program. If the contractor offers such a program it is important to make sure that the value of any excess flex credits or any waiver credits, is appropriately reflected in the "Total Net Benefit Value". As this is an area where substantial creativity in plan design may exist, the Contracting Officer may wish to request additional review of the methodology for dealing with flex credits by the Headquarters office if a flexible benefits program exists for the contractor.



### **Part III.3. Valuation Methodology**

---

#### **Grandfathered Benefits**

##### General Background Information

Employers who redesign their benefit program will occasionally choose to grandfather certain subgroups of employees in their prior benefits. Examples include grandfathering all employees hired before a specific date, or all employees who have met certain age and for service requirements on the date of change.

##### DOE Under DOE O 350.1

None

##### DOE Guidelines for Preparation and Review

If there is evidence of grandfathered benefits, the consultant should value both the current and grandfathered benefits levels. A single "Total Net Benefit Value" should be developed based on the weighted average value of the current and grandfathered benefits. The weighting is utilized to approximate the current mix of grandfathered and redesigned benefits. A simple weighting utilizing the relative proportion of grandfathered vs. non-grandfathered employees as of the beginning of the evaluation year (January 1 coincident with, or immediately preceding the evaluation year if it is other than a calendar year) maybe used in lieu of specifically valuing each separate population.

##### Areas of Concern

Depending on the rate of turnover and the benefit involved, the impact of grandfathered benefits can be a significant cost factor for many years. The DOE guideline is designed to ensure that only reasonable costs of benefits are reimbursed. Thus, if the value of the grandfathered benefit were not recognized, a contractor's plan which might otherwise fail the 5% test could be brought into compliance by simply modifying benefits for future employees, even though the current benefit costs in total would fail the DOE acceptability tests.

**Part III.3. Valuation Methodology**

---

**Health**

General Background Information

Health Benefits include medical and dental plans. Many plan designs may carve out pieces of the coverage for coverage under a stand-alone plan, e.g. mental health and substance abuse, or prescription drugs. All significant Healthcare Benefits should be included in the Value Study.

DOE Requirements under DOE O 350.1

DOE Order 350.1 Chapter V-Benefits  
Attachment 1, Paragraph 2.a.(1)(b)

"The Value Study shall include major non-statutory benefit plans offered by the contractor including ....health....."

DOE Guidelines for Preparation and Review

All health benefits which could significantly impact the results of the Value Study should be included. The Contracting Officer may rely, lacking evidence to the contrary, on an actuarial certification similar to that contained in Appendix C which states that the anticipated net benefit value of any benefit not valued in the Value Study is less than 1% of the total net benefit value.

The consultant's valuation methodology should assign value based on the plan design parameters (e.g. deductibles, co-pays, limits, etc.) and not on the participants' cost of providing such benefits.

Areas of Concern

None, other than inclusion of all significant benefits be verified.

**Part III.3. Valuation Methodology**

**Paid Time Off**

---

General Background Information

Paid Time Off includes vacation and holiday pay. Such programs may be administered on a stand-alone basis or as part of a combined leave policy which includes coverage for brief periods of incapacity due to illness or injuries.

Most consultants value 1 day of paid time off as the equivalent of 1/260th of projected annual base pay. Thus, Paid Time Off has a significant impact on the Total Net Benefit Value.

DOE Requirements

DOE Order 350.1 Chapter V-Benefits  
Attachment 1, Paragraph 2.a.(1)(b)

"The Value Study shall include major non-statutory benefit plans offered by the contractor including ...paid time off welfare benefit programs".

DOE Guidelines for Preparation and Review

The Contracting Officer may rely, lacking evidence to the contrary, on an actuarial certification similar to that contained in Appendix C which states that "The valuation assumptions and methodology utilized produce a reasonable projection of the value provided by the participant's benefit plans."

Areas of Concern

See Part III.4 Informal Programs - PTO

**Part III.3. Valuation Methodology**

**Post-Retirement Benefits**

---

General Background Information

Post-Retirement Benefits for this purpose are defined as any benefit paid following retirement excluding qualified defined benefit and defined contribution retirement and capital accumulation plans.

DOE Requirements

DOE O 350.1 Chapter V-Benefits  
Attachment 1, Paragraph 2.a.(1)(d)

"To the extent this methodology does not address post-retirement benefit programs, contractors shall provide the Contracting Officer separate cost and plan design data on post-retirement benefits other than pensions compared to external benchmarks of a nationally recognized survey source

DOE Guidelines for Preparation and Review

Under DOE O 350.1 Chapter V.4.b.(14) the DOE is responsible for reimbursement of post-retirement benefits paid subsequent to contract termination for those who have earned such benefits. Therefore if such benefits are part of a Value Study the value for such benefits should be calculated on a basis consistent with the methodology for calculating the Service Cost component of the Net Periodic Post-Retirement Benefit Cost under the Unit Credit Cost Method.

A statement from the valuation actuary similar to that contained in Appendix C shall be considered sufficient to verify such benefits have been properly valued absent evidence to the contrary.

### **Part III.3. Valuation Methodology**

---

#### **Post-Retirement Benefits**

##### Areas of Concern

Not all consulting firms have developed the standard methodology necessary to include Post-Retirement Benefits in their Value Study in accordance with DOE guidelines. Unless the consulting firm certifies that they have valued such programs in accordance with DOE guidelines, the total benefit values developed should exclude such benefits and they should be separately addressed in accordance with DOE O 350.1 Chapter V Attachment 1.2.a.(1)(d).

**Part III.4. Informal Programs**

---

**Paid Time Off**

General Background Information

Some employers do not provide formal paid time off programs.

An example is University faculty who may be under contract to provide services for a stated number of months per year and are compensated based on the number of months under contract. During the contract period, faculty is responsible for providing services to the University and can take time off for illness, seminars, or other personal reasons without adversely affecting their compensation as long as their basic duties are performed.

DOE Requirements

"The Value Study shall include major non-statutory benefit plans offered by the contractor including ....paid time off welfare benefit programs".

## **Part III.4. Informal Programs**

### **Paid Time Off**

---

#### DOE Guidelines for Preparation and Review

The value assigned to informal PTO programs shall be calculated in accordance with the following philosophies, as interpreted in the following paragraphs

- The contractor's value must be substantiated by data from the contractor.
- The comparator group participants' values shall be assumed to be 0 unless utilization levels can be substantiated by actual data.

When valuing an informal PTO program of the contractor, if any, the consultant must rely on data provided by the contractor which substantiates the average number of days taken off with pay during a recent twelve month period and shall treat such days as if they have been provided under a formal program.

When valuing the informal PTO program of one of the comparator group participants, the consultant shall assume such participant has a PTO program with 0 value, absent evidence which can be substantiated to the contrary. However, the consultant may include the average number of holidays provided under formal programs by all other members of the comparator group as a minimum level of paid time off provided by the informal program.

#### Areas of Concern

The value of paid time off may not be excluded from the Value Study calculation of the "Total Net Benefit Value" simply because one or more of the comparator group participants provides such benefits under an informal PTO program. If such informal programs exist, they must be valued in the spirit of the previously outlined guidelines for preparation and review.

## **Part III.4. Informal Programs**

---

### **Other**

#### General Background Information

Like paid time off, other benefits may be provided through informal programs. While very infrequent, an example is an employer who pays disability benefits at the discretion of the supervisor. If such benefits are significant, they should be included in the calculation of the "Total Net Benefit Value".

#### DOE Requirements Under DOE O 350.1

None

#### DOE Guidelines for Preparation and Review

In the event an informal benefit program is discovered, it should be referred to the DOE/headquarters office for review to determine if it is likely to be a significant benefit. If it is determined to be significant, it should be valued in accordance with the following philosophy:

- The contractor's value must be substantiated by data from the contractor.
- The comparator group participants' values shall be assumed to be 0 unless higher utilization can be substantiated by actual data.

See Part III.4.Informal Programs Paid Time Off for an example of how such a philosophy is applied in a similar context.

#### Areas of Concern

The value of any significant benefit program may not be excluded from the Value Study calculation of the "Total Net Benefit Value" simple because one or more of the comparator group participants provides such benefits under an informal program. If such informal programs exist, they must be valued in the spirit of the previously outlined guidelines for preparation and review.



## **Part III.5. Net Benefit Value**

---

### **Definition and Acceptable Value**

#### General Background Information

The net benefit value is the value of the benefit as assigned by the Value Study less any employee contributions. The sum of the net benefit values for each benefit is defined as the Total Net Benefit Value. The Value Study results should express the Total Net Benefit Value of the contractor as a percentage of the mean average Total Net Benefit Value for the comparator group.

#### DOE Requirements Under DOE O 350.1

##### DOE O 350.1 Chapter V-Benefits Paragraph 4.b.(6)(a)

Specify that the contractor "Pass" DOE requirements "When the contractor's cost or value is within the range of acceptability (i.e. no more than 5 percent above the comparator for other organizations),..."

The term "value" for these purposes is interpreted to mean the Total Net Benefit Value.

#### DOE Guidelines for Preparation and Review

The Contracting Officer is responsible for determining if the Total Net Benefit Value falls within the acceptable range of no more than 5% above the mean average for the comparator group. Such determination shall take into account whether or not all DOE guidelines for preparation and review have been followed in the development of the Total Net Benefit Value.

If the Total Net Benefit Value does not fall into the acceptable range (i.e., it is more than 5% above the mean average for the comparator group), the Contracting Officer will be responsible for monitoring a corrective action plan by the contractor.

**Part III.5. Net Benefit Value**  
**Definition and Acceptable Value**

---

Areas of Concern

The DOE is not concerned with the Net Benefit Value of individual benefits as long as the Total Net Benefit Value for all benefits falls within the acceptable range.

**Part III.5. Net Benefit Value**

---

**Determination of Total Net Benefit Value**

General Background Information

Total Net Benefit Value is the sum of the Net Benefit Value for all employer sponsored benefits.

DOE Requirements Under DOE O 350.1

None

DOE Guidelines for Preparation and Review

If it is not clear from the report that each benefit is assigned a dollar value and that the Total Net Benefit Value is the sum of the Net Benefit Value on a dollar basis of all benefits, then further investigation should be made to determine if the methodology utilized to develop the results is reasonable.

## **Part III.5. Net Benefit Value**

### **Determination of Total Net Benefit Value**

---

#### Illustrations

During the typical Value Study process, each benefit is scaled to its value in dollars, and is divided into employer-provided and employee-paid components. A simple example best explains how these components are calculated for one benefit provided by employer "A".

#### Facts:

- \* Employer A has a benefit that is worth twice as much (based solely on design) as the sponsoring employer's benefit
- \* The sponsoring employer's benefit value is \$1,000 per employee
- \* Employer A has employees contribute \$800 annually

#### Value Study Calculations:

- \* The employer plus employee value of Employer A's plan is \$2,000 (=2 \* \$1,000) regardless of the actual cost of the benefit
- \* The employee-paid value is \$800 based on actual contributions
- \* The employer-provided value is \$1,200 (2,000 -\$800) regardless of the actual amount Employer A is paying

The Total Net Benefit Value is then calculated by summing the Net Benefit Value for all employer sponsored benefits. As a final step in the Value Study, the contractors Total Net Benefit Value is compared to the average Total Net Benefit Value for the comparator group.

#### Areas of Concern

None

## Part III.6. Report

---

### General Background Information

The Value Study report prepared by the consultant serves as a mechanism to convey key information regarding the preparation and results of the Value Study.

### DOE Requirements Under DOE O 350.1

None

### DOE Guidelines for Preparation and Review

The following guidance was previously provided to the Heads of Contracting Activity, operations staff, and contractors in the implementation of Chapter V Value Study methodology outlined in the chapter.

#### Value Study Methodology Recommendations:

- \* A complete copy of the Value Study <shall> include the methodology used to define each benefit plan, a description of the benefits plans, a list of survey respondents, and the actuarial assumptions.

The following additional clarification is provided to further identify information which should be included in the final report.

- \* The report should also include a description of the valuation methodology in accordance with the guidelines presented in Part III.3. Valuation Methodology, Part III.4. Informal Programs (if applicable), and the calculation of Total Net Benefit Value as presented in Part III.5. Net Benefit Value
- \* The report should be accompanied by a contractor certification, an actuarial certification, and a Key Data Elements Executive Summary as illustrated in Appendix B, Appendix C and Appendix G, respectively.

## **Part III.6. Report**

---

### Areas of Concern

It is not possible to ensure that results of the Value Study are valid without receipt of all elements designated in these guidelines. In addition, it is impossible to verify that the results of any subsequent Value Study have been calculated consistently if full documentation of all critical actuarial assumptions and the valuation methodology is not included in the report.

**Part IV.1. Field Office Review**  
**Elements to be Reviewed**

---

General Background Information

Because it is impossible to control all of the variables which impact a Value Study, it is important that a thorough review of the preparation, documentation and results presented in the report be under taken.

DOE Requirements Under DOE O 350.1

None

DOE Guidelines for Preparation and Review

Appendix D contains a checklist of all elements which should be reviewed by the Contracting Officer. If the report is incomplete in any way, the additional information should be requested. The initial request will be delivered to the contractor, who may authorize direct contact with the consultant to expedite the request.

Areas of Concern

The DOE's need for thorough documentation may exceed the standard documentation of the consultant preparing the study. However, it is the DOE'S position that if the consultant's documentation does not meet DOE guidelines, the cost of the study will not be considered a reimbursable expense and the results will be considered invalid. Therefore, it is incumbent upon the consultant to modify their standard documentation if necessary to DOE guidelines, regardless of whether or not it increases the cost of the study. There is no reason to believe the DOE requirements will cause the need for more than a brief supplement, if any, to comply fully.

**Part IV.2 Field Office Review**  
**Uniform Electronic File Maintenance**

---

General Background Information

Because the benefit value study is one of the Department's performance measurement tool for determining cost reasonableness and allowability of contractor's total employee benefit program, it is necessary to document the benefit value study process, i.e., contractor/consultant preparation and the DOE field office review and approval steps. To support the Contracting Officer and his/her support DOE Contractor Human Resource (HR) Specialist, Appendix A thru G of this manual have been designed to document the process. It is also important that the benefit value study files be readily available for DOE management reviews as well as for audit/review purposes of the Office of the Inspector General and the General Accountability Office. To support these management actions and comply with the audit/review requirements for DOE submission of complete, verifiable, and auditable data, the Contracting Officer and/or the DOE Contractor HR Specialist shall maintain an electronic file of the consultant/contractor deliverables and the documented field office review steps and checklists in a uniform manner prescribed below.

DOE Requirements Under DOE O 350.1

None



## DOE Guidelines for Preparation and Review

### **Contractor Deliverables**

Naming the Benefit Value Report: the electronic file name should be:  
<contractorname>.ValueStudy<YYYY>.<MMDDYYYY>(insert date of submission to the Contracting Officer).pdf

Naming Appendix A, B, C, and G (name each appendix individually): the electronic file name should be:

<contractorname>.ValueStudy<YYYY>.Appendix<letter>.<MMDDYYYY>(insert date of submission to the Contracting Officer).pdf

### **DOE Field Office Review Steps and Checklists**

Naming Appendix D, E, and F: the electronic file name should be  
<contractorname>.ValueStudy<YYYY>.Appendix<letter>.<MMDDYYYY>(insert date of submission to the Contracting Officer).pdf

**Part IV.3 Field Office Review**  
**Corrective Action Plan**

---

General Background Information

The 2011 General Accountability Office (GAO) review of DOE oversight of the Department Contractor's retirement benefits program, Report No. GAO-11-378, Progress Made Overseeing the Costs of Contractor Post Retirement Benefits, But Additional Actions Could Help Address Challenges, recommends that DOE improves its process by:

Clarifying existing guidance on correcting contractor benefit packages that exceed DOE's standard by:

- Establishing a defined timeline by when contractors must submit corrective action plans to their DOE contracting officer if the value of their benefit package is determined to exceed DOE' standard, as well as timeline of when DOE contracting officers must reach a decision on such plans;
- Developing criteria for contracting officers to use when deciding whether to waive a required corrective action plan;
- Requiring review of these contracting officer decisions by the responsible headquarters office in order to help ensure consistent application of the criteria across the Department.

DOE concurred with the GAO recommendation.

DOE Requirements at DOE O 350.1

Reserved

## **Part IV.3 Field Office Review**

### **Corrective Action Plan**

---

#### DOE Guidelines for Preparation and Review

1. When the value of the contractor's total employee benefits exceeds the DOE standard i.e., a benefit value (benva) of no more than 105 percent, the CO shall, no later than 14 days after receipt of the benva study, notify the contractor to submit a CAP as required by the terms of the contract.
2. The notification letter shall require the contractor to develop and submit an acceptable CAP for CO's review and approval no later than 60 days after the date of the CO notification letter.
3. When the contractor fails to submit an acceptable CAP during the 60-day submission period and CO determines that there is a legitimate reason for the contractor's delay, the CO may allow a 30-day extension for the contractor to submit an acceptable CAP. The CAP extension letter shall include a reservation of DOE's right to implement a corrective action by withholding DOE reimbursement of the appropriate portion of the total employee benefits cost, if the contractor continuously fails to submit an acceptable CAP.
4. Should the contractor fail to submit an acceptable CAP by the end of the extension period, the CO shall issue a final notification to advise the contractor of DOE's intent to withhold the reimbursement of the portion of employee benefits cost attributed to the benva score net of the DOE standard 105 percent, 30 days from the date of the final notification letter. This net benva score represents the level of benefits above what is deemed reasonable under the terms of the contract, and the cost attributed to this score may be deemed unallowable when it is determined that there is no reasonable cause for contractor's failure to follow the CO's direction or cure for contractor's noncompliance with the terms of the contract. If the CO is unable to determine the associated unallowable cost from the benva report and the contractor has not provided information to identify cost savings opportunities to reduce the excess benva score, the CO may consider unallowable costs from a cost study report when the result shows that contractor's cost on a per capita basis and/or percentage of payroll is over the DOE 105 percent standard.

DOE Guidelines for Preparation and Review (Continued)

5. CAP Exemption/Waiver. DOE policy does not contemplate the approval of CAP exemption/waiver requests by Department contractors because these actions preclude the CO's ability to ensure that DOE pays no more than the cost of a competitive employee benefits program. However, DOE policy recognizes there are circumstances when DOE approval of a CAP exemption/waiver may be warranted. This guidance requires that the CO approval of CAP exemption/waiver requests, be made only when there is clear and convincing evidence that the DOE's interest is protected from the reimbursement of unreasonable costs. The CO shall obtain approval of a CAP waiver/exemption from the Head of Contracting Activity, with concurrence from the Senior Procurement Executive, except under the following circumstances:
  - a. Deviation is statistically insignificant. When the contractor's benefit value exceeds the DOE standard by less than one percentage point, the CO may consider the difference to be "statistically insignificant" and approve the contractor's request for a CAP waiver. It is important to remember that a benefit of 105 percent does not represent average value of benefits. The average is 100 percent. A benefit of 105 percent means, that the contractor's value of benefits is 5 percent greater than the average value of the total benefits of the contractor's comparator group in the same competitive market.
  - b. Costs are deemed allowable under FAR. Pursuant to FAR 31.3, Contracts With Educational Institutions, the allowability of cost to government contracts with educational institutions are subject to the cost principles of the Office of Management Budget (OMB) Circular A-21. Pursuant to Circular A-21, the cost of the university's corporate employee benefit programs is reasonable and allowable if DOE's costs conform to the established policies of the institutions consistently applied. In lieu of a CAP on a corporate benefits program, the CO shall ensure that periodic audit of indirect cost including the cost of employee benefits be conducted to ensure that the contractor's methodology for developing and allocating the corporate employee benefits cost to the DOE contract is consistent with costs charged to non DOE components.

## **Part IV.3 Field Office Review**

### **Corrective Action Plan**

---

#### DOE Guidelines for Preparation and Review (Continued)

- c. Total net benefit value within 105 percent. When the “total net benefit value” for incumbent and non-incumbent employees is no more than 105 percent, and the CO determines that the “total net benefit value” was properly determined based on the weighted average value of the incumbent and the non-incumbent employees, the CO may allow the contractor’s request for a CAP waiver.
- d. Cost Study is within 105 percent. When the contractor submitted cost study report reveals that benefits provided to contractor employees do not exceed the DOE Standard of 105 percent.
- e. Integrated Cost and Benefit Value Study Analysis. When the documented results of an integrated cost and benefit value study analysis reveals that the higher benefit value index has not resulted in the reimbursement of costs that are not reasonable when compared to comparable organizations in the market, the CO may approve the contractor’s request for a CAP waiver.
- f. Total Compensation Study. When the documented results of a total compensation study reveals that the higher benefit value index has not resulted in the reimbursement of total compensation, including salaries that are not reasonable when compared to comparable organizations in the market, the CO may approve the contractor’s request for a CAP waiver.

Appendices

**Appendix A - Value Study Comparator Request for Approval Form**

**Contractor Name:** \_\_\_\_\_

**Subset of employees included, if applicable (e.g., incumbent, new hires, etc.)** \_\_\_\_\_

**First Time Study:**    Yes    No

<b>Comparator Group</b>	
<b><u>YYYY BenVal (Prior)</u></b>	<b><u>YYYY BenVal (Current)</u></b>
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.
7.	7.
8.	8.
9.	9.
10.	10.
11.	11.
12.	12.
13.	13.
14.	14.
15.	15.
16.	16.
17.	17.
18.	18.
19.	19.
20.	20.

Change in number from \_\_\_\_\_ to \_\_\_\_\_.

For each “dropped” comparator company, state reason why dropped

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

For each “added” comparator, state reason why added

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Appendix A - Value Study Comparator Request for Approval Form (cont'd)**

Place check mark (✓) in space, as applicable

Comparator Group Selection meets DOE guidelines

\_\_\_\_\_ 15 or more participants compete for exempt level professional staff (non-executives)

\_\_\_\_\_ No more than 20 percent of participants (excluding contractor) are DOE contractors

\_\_\_\_\_ All participants represent contractor's competitive market

\_\_\_\_\_ compete for exempt level professional staff (non-executives) in same industry , or

\_\_\_\_\_ Proof that contractor has gained or lost more than four exempt level professional staff (non-executives) to the comparator firm during the prior years who have the same skills set as professional staff of the comparator firm.

Information disclosed above is certified to be correct to the best of my knowledge and ability and is submitted for approval this <day> day of <month>, <year> by:

\_\_\_\_\_  
Signature and Title

(Must be an officer or otherwise specifically authorized to sign on behalf of your company)

\_\_\_\_\_  
Print Name and Title

\_\_\_\_\_  
DOE Use Only:

Comparator list of companies is approved by:

\_\_\_\_\_  
Contracting Officer

\_\_\_\_\_  
Date



**Appendix B - Contractor Certification**

**Contractor Name:** \_\_\_\_\_

**Subset of employees included, if applicable (e.g. incumbent, new hires, etc.)**\_\_\_\_\_

**First Time Study:**     Yes     No

Attached is a Value Study completed in compliance with DOE O 350.1. I hereby certify that the following statements are true to the best of my knowledge:

- A list of the Value Study comparators was submitted and approved by the DOE Contracting Officer on <insert date> prior to the performance of the study.
- *<Pick applicable statements.>* All study comparators compete for exempt level professional staff (non-executives) in the same industry as *<Insert Contractor Name>*. As an alternative, a study comparator has been included with proof that we have gained or lost more than 4 exempt level professional staff (non-executives) within the last 5 years from/to such comparator who have same skills sets as professional staff of *<Insert Participant Name>*.
- No more than 20 percent of the study comparator (excluding *<Insert Contractor Name>*) are DOE Contractors. The following are DOE contractors: <insert DOE contractor names>.
- All known major non-statutory benefit plans of *<Insert Contractor Name>* and the study comparators have been valued, including qualified defined benefit, defined contribution retirement and capital accumulation plans, death, disability, health and paid time-off welfare benefit programs. All plans were valued based on current plan provisions applicable to exempt professional level staff (non-executives). Post-retirement benefits (other than pensions) *<were/were not>* included in the study.
- <Check all that is applicable concerning what has occurred since the last Value Study submitted to the DOE in accordance with DOE O 350.1. (If this is the first such study, omit this item.)>

	First Time Study	Prior Report Not Available	No Change	Change occurred and why
Comparator group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consulting firm performing study	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plans Valued	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Valuation methodology/assumptions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- No request of any kind has been made of *<Insert name of National Consulting Group>* to modify the approved study comparators, data provided by study comparators, their standard valuation methodology or the valuation assumptions in any manner which is not required to conform with the principles set forth in DOE O 350.1, and which jeopardizes

their professional independence or is intended to significantly impact a determination of compliance with the measures provided in DOE O 350.1.

**Appendix B - Contractor Certification (cont'd)**

- The complete Value Study Report, along with all Appendices and or supplemental material prepared by < ***Insert name of National Consulting Group*** > has been sent to DOE for review. No pages, topics, formatting, summary or variation have been deleted or edited prior to providing material to DOE for review.
  
- Informal programs were referred to the Contracting Officer for review. If a benefit was determined to be significant, it was valued based on data substantiated by <***Insert DOE Contractor Name***> and the comparator group participants' shall be valued at 0 unless higher utilization can be substantiated by actual data. If a benefit was determined not to be significant, it has not been included in the Value Study
  
- Accompanying this certification are the completed:
  - Value Study Report
  - Executed Consultant Certification
  - Executed Value Study Comparator Request for Approval Form, and
  - Key Data Elements Executive Summary
  
- If DOE has any questions regarding any of the information included or reviewed the following person should be contacted

Name: \_\_\_\_\_  
Email: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

Certified this <day> day of <month>, <year> by:

\_\_\_\_\_  
Signature and Title

(Must be an officer or otherwise specifically authorized to sign on behalf of your company)

\_\_\_\_\_  
Print Name and Title

**Appendix C - Actuarial Consultant Certification**

**Contractor Name:** \_\_\_\_\_  
**Subset of employees included, if applicable (e.g., incumbent, new hires, etc.)** \_\_\_\_\_

**First Time Study:**     Yes     No

<*Insert Name of National Consulting Group*> has performed a Value Study for <*Insert Contractor Name*> in accordance with our understanding of DOE O 350.1. Such study was performed for the benefits in effect for the evaluation year beginning <*Insert First Day of Year*>. I hereby certify the following statements are true to the best on my knowledge:

- We are a national consulting with evaluation more than <*Insert Number*> offices nationwide and in excess of \$5,000,000 revenue annually. We have the actuarial and employee benefit expertise necessary to perform the study as required.
- <*Insert Contractor Name*> provided an approved list of at least 15 comparator companies (excluding <*Insert DOE Contractor Name*>) to represent the comparator group.
- DOE approval of comparator group has been provided.
- We have exercised prudent measures to validate comparator data as accurate, reflecting the value of employee benefit plans offered by the comparators as of the January 1 coincident with or immediately preceding (if the evaluation year is other than a calendar year) the first day of <*Insert Contractor Name*> evaluation year. To the extent employees of <*Insert Contractor Name*> as of January 1 may be entitled to grandfathered benefits based on date of hire (or other variable), our calculations are based on the weighted average enrollment in each of the plans as of this date
- All calculations impacting employee demographic data and or assumptions used to prepare the Value Study were based on: <*check all that apply*>
  - \_\_\_ A single subset of employees
  - \_\_\_ Exempt level professional staff (non executives)
  - \_\_\_ <*DOE Contractor Name*> actual demographics
  - \_\_\_ Assumed general demographics
- All calculations impacting employee demographic data and or assumptions used to prepare the Value Study were based on: <*check which statement applies*>
  - \_\_\_ Same demographic profile model as was used Value Study immediately preceding this one
  - \_\_\_ Different demographic profile than prior Value Study and <*DOE Contractor name*> provided documentation of prior approval from DOE contracting officer; and this documentation is attached
  - \_\_\_ Do not know the answer
- The benefits values are those available to exempt level professional staff (non-executives) of the study participants in the same industry.

## Appendix C - Actuarial Consultant Certification (cont'd)

- We have reviewed the demographics and enrollment patterns for <Insert Contractor Name> and have performed such test as necessary to determine that they do not vary from our standard assumptions in a manner which will cause the total net benefit value calculated for <Insert Contractor name> expressed as a percentage of the peer group average to vary by more than one percentage point (i.e., if our standard assumptions develop a total net benefit value of 1.10, the values calculated using actual demographics and enrollment patterns would fall in a range of 1.09 to 1.11).
- The valuation assumptions and methodology utilized produce a reasonable projection of the value provided by the participant's benefit plans.
- The method of valuing retirement benefits provided under a defined benefit pension or other post-retirement benefit cost is representative of an amount ratably accrued over an employees' entire career.
- Benefits valued include all known qualified defined benefit, defined contribution retirement and capital accumulation plans, death, disability, health and paid time off welfare benefit programs. The anticipated net benefit value of any benefit not valued in our study is estimated to be less than 1% of the total net benefit value actually reported.
- <Check applicable statement>  
\_\_\_Entire Comparator Group (including <insert Contractor name>) offered defined benefit pension and post-retirement medical benefits  
\_\_\_Not all employers in the Comparator Group offered defined benefit pension and post-retirement medical benefits
- The Value Study submitted to <insert Contractor name> included a description of the specific valuation methodology utilized if:
  - Any study participants including the DOE contractor do not offer
    - Post retirement medical, or
    - Define benefit pension planOR
  - Any study participants including the DOE contractor have
    - Frozen defined benefit pension plans, or
    - Frozen or "grandfathered" retiree medical plans
- The definition of net benefit value for purposes of the Value Study is the value of the benefit as assigned by the Value Study less any employee or retiree contributions.
- The total net benefit value for <Insert Contractor Name> was calculated as (or is equivalent to) the sum of the net benefit values for each benefit provided by the contractor, divided by the arithmetic mean (average) of the sum of the net benefit values for each benefit provided for all other participants.

**Appendix C - Actuarial Consultant Certification (cont'd)**

- Informal programs were fully disclosed and submitted to contracting officer for review. If a benefit was determined to be significant, it was valued based on data substantiated by *<Insert DOE Contractor Name>* and the comparator group participants' shall be valued at 0 unless higher utilization can be substantiated by actual data. If a benefit was determined not to be significant, it has not been included in the Value Study.
- No significant benefit data was missing for *<Insert Contractor Name>*. For other participants, no significant benefit data was missing or if it was, we have disclosed in our report what assumption we used to complete the data and rationale for doing so.
- *<Insert statement as to the treatment of "excess flex credits" and its impact on the study results. For this purpose, define "excess flex credits" as credits granted in excess of those needed to purchase the assumed level of benefits selected. Also insert a statement as to the treatment of "waiver credits".>*
- *<Check all that is applicable concerning what has occurred since the last Value Study submitted to the DOE in accordance with DOE O 350.1. (If this is the first such study, omit this item.)>*

	First Time Study	Prior Report Not Available	No Change	Change occurred and why
Comparator group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plans Valued	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Valuation methodology/assumptions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- We have not been requested to modify, nor have we modified in any way, the approved study participants, data provided by the participants, our standard valuation methodology or valuation assumptions in any manner which does not conform with the principles set forth in DOE O 350.1, and which jeopardizes our professional independence or is intended to significantly impact a determination of compliance with the measures provided in DOE O 350.1.

Certified this <day> day of <month>, <year> by:

\_\_\_\_\_  
 Signature and Title (Must be an officer or otherwise specifically authorized to sign on behalf of your company)

\_\_\_\_\_  
 Print Name and Title

List all applicable actuarial designations or other professional designations, if any, of signatory:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Appendix D – Value Study Checklist Field Office Review**

**Contractor Name:** \_\_\_\_\_

**Subset of employees included, if applicable (e.g., incumbent, new hires, etc.)**\_\_\_\_\_

\_\_\_\_\_

**First Time Study:**  Yes  No

**BenVal Evaluation Period Begin Date:** \_\_\_\_\_

*Initial and date each item reviewed.*

*Attach a statement describing any variance from DOE guidelines.*

\_\_\_\_\_ Appendix A: Value Study Comparator Request for Approval Form attached

\_\_\_\_\_ Appendix B: Contractor Certification received and reviewed for consistency with sample language

Note Discrepancies: \_\_\_\_\_

\_\_\_\_\_ Appendix C: Actuarial Certification received and reviewed for consistency with sample language

Note Discrepancies: \_\_\_\_\_

\_\_\_\_\_ Ben Val Key Data Elements received and reviewed

\_\_\_\_\_ Complete BenVal Report (including all appendices and sub-indices) submitted

\_\_\_\_\_ Report meets DOE guidelines

Includes definition of each benefit plan

Includes description of each benefit plan

Includes description of valuation methodology

Includes description of actuarial assumptions

Appropriately deals with informal programs (if applicable)

\_\_\_\_\_ BenVal Results:

Acceptable – Employer Total Relative Benefit Value not more than 5% above participant group average

Unacceptable: Corrective Action Required – Employer Total Relative Benefit Value more than 5% above participant group average

Unacceptable: Corrective Action Not Required – Employer Total Relative Benefit Value more than 5% above participant group average

Justification (attach copy of regulation or DOE management approval as applicable): \_\_\_\_\_

Additional pages for Appendix D, BenVal Results

\_\_\_\_\_ BenVal Results: For (name or subset of employees)  
 Acceptable – Employer Total Relative Benefit Value not more than 5% above participant group average  
 Unacceptable: Corrective Action Required – Employer Total Relative Benefit Value more than 5% above participant group average  
 Unacceptable: Corrective Action Not Required – Employer Total Relative Benefit Value more than 5% above participant group average  
Justification (attach copy of regulation or DOE management approval as applicable): \_\_\_\_\_  
\_\_\_\_\_.

\_\_\_\_\_ BenVal Results For (name or subset of employees)  
 Acceptable – Employer Total Relative Benefit Value not more than 5% above participant group average  
 Unacceptable: Corrective Action Required – Employer Total Relative Benefit Value more than 5% above participant group average  
 Unacceptable: Corrective Action Not Required – Employer Total Relative Benefit Value more than 5% above participant group average  
Justification (attach copy of regulation or DOE management approval as applicable): \_\_\_\_\_  
\_\_\_\_\_.

\_\_\_\_\_ BenVal Results:  
 Acceptable – Employer Total Relative Benefit Value not more than 5% above participant group average  
 Unacceptable: Corrective Action Required – Employer Total Relative Benefit Value more than 5% above participant group average  
 Unacceptable: Corrective Action Not Required – Employer Total Relative Benefit Value more than 5% above participant group average  
Justification (attach copy of regulation or DOE management approval as applicable): \_\_\_\_\_  
\_\_\_\_\_.

**Appendix D – Value Study Checklist Field Office Review (cont'd)**

\_\_\_\_\_ Electronic copy of results sent to DOE Headquarters

Reviewed by:

\_\_\_\_\_  
CHR Specialist Date

Concurred with:

\_\_\_\_\_  
CHR Team Leader Date

Approved by:

\_\_\_\_\_  
Contracting Officer Date

cc: Office Contractor Human Resource  
Management Division, MA-631  
1000 Independence Avenue  
Washington, D.C 20585  
Attn: Ellen Leyba



**Appendix E – Corrective Action Plan Determination Checklist Field Office Review**

*Initial and date each item reviewed.*

**Contractor Name:** \_\_\_\_\_

**Subset of employees included, if applicable (e.g., incumbent, new hires, etc.)**\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**BenVal Results**

Unacceptable: Corrective Action Required (Complete Appendix E)

Name or subset of employees, if applicable \_\_\_\_\_

Unacceptable: Corrective Action Not Required (See Appendix D)

Name the subset of employees, if applicable \_\_\_\_\_.

\_\_\_\_\_ Required contractor to develop a corrective action plan by \_\_\_\_\_.

\_\_\_\_\_ Corrective action plan approved on \_\_\_\_\_.

Corrective Action Plan Implementation Schedule:

The Total Net Benefit Value of \_\_\_\_\_% will be reduced to no more than 5% of the participant group average over the following period.

\_\_\_\_\_ % on \_\_\_\_\_

\_\_\_\_\_ % on \_\_\_\_\_

Provide new target date(s) and explanation for any changes in schedule.

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Electronic copy of the CAP sent to HQ.

\_\_\_\_\_ Electronic copy of the changes to CAP sent to HQ.

Reviewed by:

\_\_\_\_\_  
Contractor HR Specialist

\_\_\_\_\_  
Date

Concurred with:

\_\_\_\_\_  
Contractor HR Team Leader

\_\_\_\_\_  
Date

Approved by:

\_\_\_\_\_  
Contracting Officer

\_\_\_\_\_  
Date

**Appendix F – Corrective Action Plan Implementation Checklist Field Office Review**

**Contractor Name:** \_\_\_\_\_

**Subset of employees included, if applicable (e.g., incumbent, new hires, etc.)**\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**BenVal Results**

**Unacceptable: Corrective Action Required (Complete Appendix E)**

Name or subset of employees, if applicable \_\_\_\_\_

**Unacceptable: Corrective Action Not Required (See Appendix D)**

Name the subset of employees, if applicable \_\_\_\_\_.

*Initial and date each item reviewed.*

\_\_\_\_\_ Year 1 CAP implemented as scheduled. Attach supporting documentation.

Provide explanation and new target(s) for any changes in the schedule

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Year 2 CAP implemented as schedule. Attach supporting documentation.

Provide explanation and new target(s) for any changes in the schedule.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Supporting Documentation sent to DOE HQ.

Reviewed by:

\_\_\_\_\_  
Contractor HR Specialist

\_\_\_\_\_  
Date

Concurred with:

\_\_\_\_\_  
Contractor HR Team Leader

\_\_\_\_\_  
Date

Approved by:

\_\_\_\_\_  
Contracting Officer

\_\_\_\_\_  
Date

cc: Office Contractor Human Resource  
Management Division, MA-631  
1000 Independence Avenue  
Washington, D.C 20585  
Attn: Ellen Leyba

**Appendix G: Value Study Executive Summary**

**Section I Comparators**

A. Provide the requested comparator lists below.

Approved Participants (Appendix A)	Participants In Attached Value Study
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.
7.	7.
8.	8.
9.	9.
10.	10.
11.	11.
12.	12.
13.	13.
14.	14.
15.	15.
16.	16.
17.	17.
18.	18.
19.	19.
20.	20.

B. Indicate below if there was a change in number of comparator companies included in the last Value Study submitted to DOE for review versus the current Value Study submitted for review.

Change in number from \_\_\_\_\_ to \_\_\_\_\_.

C. For each “dropped” comparator company, state the reason why it was dropped

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

D. For each “added” comparator, state the reason why it was added

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

E. DOE executed Value Study Participant Approval Form attached

**Appendix G: Value Study Executive Summary (cont'd)**

**Section II Employer Total Net Benefit Value**

Enter net benefit values (the value of the benefit less any employee or retiree contributions) for each benefit category.

If there are different level of benefits for different groups or subset of employees (e.g., a prior level of benefits provided to incumbent employees based on date of hire) show the values of the benefits separately for each group or subset of employees.

NET BENEFIT VALUE – (Name or subset of employees)

	Prior Value Study Results		Value Study Results	
	Date:		Date:	
	Weight (%)	Index/value	Weight (%)	Index/value
<b>Retirement</b>				
<i>Defined Benefit</i>				
<i>Defined Contribution</i>				
<b>Death</b>				
<i>Pre-retirement</i>				
<i>Post- retirement</i>				
<b>Disability</b>				
<b>Health Care</b>				
<i>Pre-retirement</i>				
<i>Post- retirement</i>				
<b>Paid time off</b>				
<b>Total Net Benefit Value</b>	100%		100%	

NET BENEFIT VALUE – (Name or subset of employees)

	Prior Value Study Results		Value Study Results	
	Date:		Date:	
	Weight	Index/value	Weight	Index/value
<b>Retirement</b>				
<i>Defined Benefit</i>				
<i>Defined Contribution</i>				
<b>Death</b>				
<i>Pre-retirement</i>				
<i>Post- retirement</i>				
<b>Disability</b>				
<b>Health Care</b>				
<i>Pre-retirement</i>				
<i>Post- retirement</i>				
<b>Paid time off</b>				
<b>Total Net Benefit Value</b>	100%		100%	

Additional pages for Appendix G, Net Benefit Value

NET BENEFIT VALUE – (Name or subset of employees)

	Prior Value Study Results		Value Study Results	
	Date:		Date:	
	Weight (%)	Index/value	Weight (%)	Index/value
<b>Retirement</b>				
<i>Defined Benefit</i>				
<i>Defined Contribution</i>				
<b>Death</b>				
<i>Pre-retirement</i>				
<i>Post- retirement</i>				
<b>Disability</b>				
<b>Health Care</b>				
<i>Pre-retirement</i>				
<i>Post- retirement</i>				
<b>Paid time off</b>				
<b>Total Net Benefit Value</b>	100%		100%	

NET BENEFIT VALUE – (Name or subset of employees)

	Prior Value Study Results		Value Study Results	
	Date:		Date:	
	Weight	Index/value	Weight	Index/value
<b>Retirement</b>				
<i>Defined Benefit</i>				
<i>Defined Contribution</i>				
<b>Death</b>				
<i>Pre-retirement</i>				
<i>Post- retirement</i>				
<b>Disability</b>				
<b>Health Care</b>				
<i>Pre-retirement</i>				
<i>Post- retirement</i>				
<b>Paid time off</b>				
<b>Total Net Benefit Value</b>	100%		100%	

**Appendix G: Value Study Executive Summary (cont'd)**

**Section III Sub-Indices/Values**

Complete the chart below for both the prior and current value study.

	<b>Prior Value Study</b>	<b>Current Value Study</b>
All Retirement		
All Health		
All Life/Disability		
All Time Loss		

Affirm that sub-indices and their definitions are attached

**Section IV Weighting Methodologies**

Complete the charts below by providing the weighting used in developing the Employer Total Net Benefit Value for both the prior and current value study.

	<b>Prior Value Study</b>	<b>Current Value Study</b>
<b>Retirement</b>		
Primary Retirement Income		
Match Savings		
<b>Death</b>		
Pre-retirement		
Post-retirement		
<b>Disability</b>		
<b>Health Care</b>		
Pre-retirement		
Post-retirement		
<b>Paid Time Off</b>		
<b>Total</b>	100%	100%

Explain the methodology for determining the weighting outlined above.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

	<b>Prior Value Study</b>	<b>Current Value Study</b>
Non-Incumbent Employees		
Incumbent Employees		
<b>Total</b>	100%	100%

Explain the methodology for determining the weighting outlined above.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

---

**Section V Adherence to DOE Policy and Guidelines**

---

Affirm each statement if true.

- A. State that you are familiar with the policy describing Value Study requirements set forth in DOE Policy and Guidelines.
- B. The valuation results were performed to conform to the policy set forth in DOE Policy and Guidelines.
- C. The prior Value Study report was made available to us by the DOE Contractor and reviewed as part of completing the current Value Study  First Time Study
- D. An explanation for any change in methodology, assumptions, plans valued, etc. between prior Value Study and current Value Study is attached.  First Time Study

---

**Section VI Valuation Details**

---

The following valuation details are found on the designated pages of this study.

Demographic group/data	Page # _____
Definition of each benefit plan	Page # _____
Detailed description of each benefit plan	Page # _____
Description of valuation methodology	Page # _____
Description of actuarial assumptions	Page # _____
Statement regarding informal programs	Page # _____
Definition of sub-indices set forth above	Page # _____

Submitted by:

---

(Name of Actuary/Consultant)

(Date)

---

(Name of Actuarial/Consultant Firm)

Exhibits



## Enclosure A: Actuaries Code of Professional Ethics

Effective January 1, 2001, the five U.S.-based actuarial organizations adopted this Code of Professional Conduct. It was adopted by the Board of Directors of the American Academy of Actuaries on September 28, 2000, and applies to all members.

The Code of Professional Conduct sets forth what it means for an actuary to act as a professional. It identifies the responsibilities that actuaries have to the public, to their clients and employers, and to the actuarial profession. The Board of the American Academy of Actuaries thanks the Joint Committee on the Code of Professional Conduct for their hard work and perseverance in drafting the Code and obtaining the approval of all five organizations' boards.

### **Code of Professional Conduct**

The purpose of this Code of Professional Conduct ("Code") is to require Actuaries to adhere to the high standards of conduct, practice, and qualifications of the actuarial profession, thereby supporting the actuarial profession in fulfilling its responsibility to the public. An Actuary shall comply with the Code. An Actuary who commits a material violation of the provisions of the Code shall be subject to the profession's counseling and discipline procedures.

The Precepts of the Code identify the professional and ethical standards with which an Actuary must comply in order to fulfill the Actuary's responsibility to the public and to the actuarial profession. The Annotations provide additional explanatory, educational, and advisory material on how the Precepts are to be interpreted and applied.

In addition to this Code, an Actuary is subject to applicable rules of professional conduct or ethical standards that have been promulgated by a Recognized Actuarial Organization for the jurisdictions in which the Actuary renders Actuarial Services. Actuarial Services are considered to be rendered in the jurisdictions in which the Actuary intends them to be used unless specified otherwise by an agreement between a Recognized Actuarial Organization for any such jurisdiction and the organizations that have adopted the Code.

Laws may also impose obligations upon an Actuary. Where requirements of Law conflict with the Code, the requirements of Law shall take precedence.

An Actuary must be familiar with, and keep current with, not only the Code, but also applicable Law and rules of professional conduct for the jurisdictions in which the Actuary renders Actuarial Services. An Actuary is responsible for securing translations of such Laws or rules of conduct as may be necessary.

### **Definitions**

As used throughout the Code, the following terms are capitalized and have the meanings indicated:

- ® Actuarial communication: A written, electronic, or oral communication issued by an Actuary with respect to Actuarial Services.
- ® Actuarial Services: Professional services provided to a Principal by an individual acting in the capacity of an actuary. Such services include the rendering of advice, recommendations, findings, or opinions based upon actuarial considerations.
- ® Actuary: An individual who has been admitted to a class of membership to which the Code applies by action of any organization having adopted the Code. When the term “actuary” is used without being capitalized, it refers to any individual practicing as an actuary, regardless of organizational membership or classification.
- ® confidential information: Information not in the public domain of which an Actuary becomes aware as a result of providing Actuarial Services to a Principal. It includes information of a proprietary nature and information that is legally restricted from circulation.
- ® Law: Statutes, regulations, judicial decisions, and other statements having legally binding authority.
- ® principal: A client or employer of the Actuary.
- ® recognized Actuarial organization: An organization that has been accepted for full membership in the International Actuarial Association or a standards setting, counseling, or discipline body to which authority has been delegated by such an organization.

### **Professional Integrity**

Precept 1: An Actuary shall act honestly, with integrity and competence, and in a manner to fulfill the profession’s responsibility to the public and to uphold the reputation of the actuarial profession.

**Annotation 1-1.** An Actuary shall perform Actuarial Services with skill and care.

**Annotation 1-2.** An Actuary shall not provide Actuarial Services for any Principal if the Actuary has reason to believe that such services may be used to violate or evade the Law or in a manner that would be detrimental to the reputation of the actuarial profession.

**Annotation 1-3.** An Actuary shall not use a relationship with a third party or with a present or prospective Principal to attempt to obtain illegal or materially improper treatment from one such party on behalf of the other party.

**Annotation 1-4.** An Actuary shall not engage in any professional conduct involving dishonesty, fraud, deceit, or misrepresentation or commit any act that reflects adversely on the actuarial profession.

## Qualification Standards

Precept 2: An Actuary shall perform Actuarial Services only when the Actuary is qualified to do so on the basis of basic and continuing education and experience, and only when the Actuary satisfies applicable qualification standards.

**Annotation 2-1.** It is the professional responsibility of an Actuary to observe applicable qualification standards that have been promulgated by a Recognized Actuarial Organization for the jurisdictions in which the Actuary renders Actuarial Services and to keep current regarding changes in these standards.

**Annotation 2-2.** The absence of applicable qualification standards for a particular type of assignment or for the jurisdictions in which an Actuary renders Actuarial Services does not relieve the Actuary of the responsibility to perform such Actuarial Services only when qualified to do so in accordance with this Precept.

## Standards of Practice

Precept 3: An Actuary shall ensure that Actuarial Services performed by or under the direction of the Actuary satisfy applicable standards of practice.

**Annotation 3-1.** It is the professional responsibility of an Actuary to observe applicable standards of practice that have been promulgated by a Recognized Actuarial Organization for the jurisdictions in which the Actuary renders Actuarial Services, and to keep current regarding changes in these standards.

**Annotation 3-2.** Where a question arises with regard to the applicability of a standard of practice, or where no applicable standard exists, an Actuary shall utilize professional judgment, taking into account generally accepted actuarial principles and practices. **Annotation 3-3.** When an Actuary uses procedures that depart materially from those set forth in an applicable standard of practice, the Actuary must be prepared to justify the use of such procedures.

## Communications and Disclosure

Precept 4: An Actuary who issues an Actuarial Communication shall take appropriate steps to ensure that the Actuarial Communication is clear and appropriate to the circumstances and its intended audience, and satisfies applicable standards of practice.

**Annotation 4-1.** An Actuary who issues an Actuarial Communication shall ensure that the Actuarial Communication clearly identifies the Actuary as being responsible for it.

**Annotation 4-2.** An Actuary who issues an Actuarial Communication should indicate the extent to which the Actuary or other sources are available to provide supplementary information and explanation.

Precept 5: An Actuary who issues an Actuarial Communication shall, as appropriate, identify the Principal(s) for whom the Actuarial Communication is issued and describe the capacity in which the Actuary serves.

Precept 6: An Actuary shall make appropriate and timely disclosure to a present or prospective Principal of the sources of all direct and indirect material compensation that the Actuary or the Actuary's firm has received, or may receive, from another party in relation to an assignment for which the Actuary has provided, or will provide, Actuarial Services for that Principal. The disclosure of sources of material compensation that the Actuary's firm has received, or may receive, is limited to those sources known to, or reasonably ascertainable by, the Actuary.

**Annotation 6-1.** An Actuary who is not financially and organizationally independent concerning any matter related to the performance of Actuarial Services should disclose to the Principal any pertinent relationship that is not apparent.

**Annotation 6-2.** An Actuary employed by a firm that operates in multiple locations is subject to the requirement of disclosure of sources of compensation that the Actuary's firm may receive in relation to Actuarial Services with respect to a specific assignment for that Principal, regardless of the location in which such compensation is received.

### Conflict of Interest

Precept 7: An Actuary shall not knowingly perform Actuarial Services involving an actual or potential conflict of interest unless: the Actuary's ability to act fairly is unimpaired; there has been disclosure of the conflict to all present and known prospective Principals whose interests would be affected by the conflict; and all such Principals have expressly agreed to the performance of the Actuarial Services by the Actuary.

### Control of Work Product

Precept 8: An Actuary who performs Actuarial Services shall take reasonable steps to ensure that such services are not used to mislead other parties.

**Annotation 8-1.** An Actuarial Communication prepared by an Actuary may be used by another party in a way that may influence the actions of a third party. The Actuary should recognize the risks of misquotation, misinterpretation, or other misuse of the Actuarial Communication and should therefore take reasonable steps to present the Actuarial Communication clearly and fairly and to include, as appropriate, limitations on the distribution and utilization of the Actuarial Communication.

### Confidentiality

Precept 9: An Actuary shall not disclose to another party any confidential Information unless authorized to do so by the Principal or required to do so by Law.

### Courtesy and Cooperation

#### Precept 10:

An Actuary shall perform Actuarial Services with courtesy and professional respect and shall cooperate with others in the Principal's interest.

**Annotation 10-1.** Differences of opinion among actuaries may arise, particularly in choices of assumptions and methods. Discussions of such differences between an Actuary and another actuary, or in observations made by an Actuary to a Principal on the work of another actuary, should be conducted objectively and with courtesy and respect.

**Annotation 10-2.** A Principal has an indisputable right to choose a professional advisor. An Actuary may provide service to any Principal who requests it, even though such Principal is being or has been served by another actuary in the same matter.

**Annotation 10-3.** An Actuary in the course of an engagement or employment may encounter a situation such that the best interest of the Principal would be served by the Actuary's setting out an alternative opinion to one expressed by another actuary, together with an explanation of the factors that lend support to the alternative opinion. Nothing in the Code should be construed as preventing the Actuary from expressing such an alternative opinion to the Principal.

**Annotation 10-4.** An Actuary may be requested to advise a Principal for whom the Actuary knows or has reasonable grounds to believe that another actuary has provided, or is providing, Actuarial Services with respect to the same matter. In such event, the Actuary may choose to consult with such other actuary both to prepare adequately for the assignment and to make an informed judgment as to whether there are circumstances involving a potential violation of the Code that might affect acceptance of the assignment. The Actuary should request the Principal's consent prior to such consultation.

**Annotation 10-5.** When a Principal has given consent for a new or additional actuary to consult with an Actuary with respect to a matter for which the Actuary is providing or has provided Actuarial Services, the Actuary shall cooperate in furnishing relevant information, subject to receiving reasonable compensation for the work required to assemble and transmit pertinent data and documents. The Actuary shall not refuse to consult or cooperate with the prospective new or additional actuary based upon unresolved compensation issues with the Principal unless such refusal is in accordance with a pre-existing agreement with the Principal. The Actuary need not provide any items of a proprietary nature, such as internal communications or computer programs.

## Advertising

**Precept 11:** An Actuary shall not engage in any advertising or business solicitation activities with respect to Actuarial Services that the Actuary knows or should know are false or misleading.

**Annotation 11-1.** Advertising and business solicitation activities encompass all communications by whatever medium, including oral communications, that may directly or indirectly influence any person or organization in deciding whether there is a need for Actuarial Services or in selecting a specific Actuary or firm to perform Actuarial Services.

## Titles and Designations

**Precept 12:** An Actuary shall make use of membership titles and designations of a Recognized Actuarial Organization only in a manner that conforms to the practices authorized by that organization.

**Annotation 12-1.** "Title" refers to any title conferred by a Recognized Actuarial Organization related to a specific position within that organization. "Designation" refers to a specific reference to membership status within such organization.

## Violations of the Code of Professional Conduct

**Precept 13:** An Actuary with knowledge of an apparent, unresolved, material violation of the Code by another Actuary should consider discussing the situation with the other Actuary and attempt to resolve the apparent violation. If such discussion is not attempted or is not successful, the Actuary shall disclose such violation to the appropriate counseling and discipline body of the profession, except where the disclosure would be contrary to Law or would divulge Confidential Information.

**Annotation 13-1.** A violation of the Code is deemed to be material if it is important or affects the outcome of a situation, as opposed to a violation that is trivial, does not affect an outcome, or is one merely of form.

**Annotation 13-2.** An Actuary is not expected to discuss an apparent, unresolved material violation of the Code with the other Actuary if either Actuary is prohibited by Law from doing so or is acting in an adversarial environment involving the other Actuary.

**Precept 14:** An Actuary shall respond promptly, truthfully, and fully to any request for information by, and cooperate fully with, an appropriate counseling and disciplinary body of the profession in connection with any disciplinary, counseling, or other proceeding of such body relating to the Code. The Actuary's responsibility to respond shall be subject to applicable restrictions on Confidential Information and those imposed by Law.