

**Board Summary**

**MOBE, LLC**

3933 Campus Dr., Suite E180, Plymouth, MN 55441  
 Jeff Warren, Chief Financial Officer  
 Headquarters and Research & Development

Date: March 21, 2019  
 Main Location: Carson City

Business Type: New County: Washoe County Development Authority Representative: Stan Thomas, EDAWN

**APPLICATION HIGHLIGHTS**

- MOBE, LLC (MOBE) is considering establishing a Headquarters and R&D Innovation Incubator in Reno.
- The Reno facility will house key roles including guided management, engagement specialists, and data scientists. The company also anticipates building new teams in the fields of digital and creative content development.
- MOBE is considering the formation of additional related healthcare startup companies, which could also be headquartered in Reno.

**PROFILE**

MOBE is a guided health solutions company that partners with health insurance companies, and large employers across the US, to provide innovative health solutions based on principals of self-management and with the goal to improve outcomes and lower healthcare costs. The company was founded in 2014 after identifying a gap in the healthcare system where covered plan members may not be receiving the assistance necessary to address their unique health challenges. These members have chronic issues that can have a significant impact on their daily lives, and as a result they end up using the healthcare system, more often than others, in search of relief. Until now, health plans only offered additional services, to people with serious or complex conditions, when they hit a certain spend threshold. MOBE makes it possible to reach more people who need extra support and attention, offering tailored solutions based on self-management to get them feeling better. MOBE services are offered as part of a patient's existing insurance plan, at no additional cost. MOBE's resources can be accessed via phone, through the MOBE Health Guide app, or online. The success of self-management is a key component in MOBE's programming and also been supported by organizations like the National Institutes of Health and the National Academies of Sciences, Engineering, and Medicine. Overall, MOBE's model has potential to positively impact population health, medical spending, and outcomes for health plans, employers, and plan members alike. *Source: MOBE, LLC*

**SIGNIFICANCE OF ABATEMENTS IN THE COMPANY'S DECISION TO RELOCATE/EXPAND**

In addition to a number of parameters that made Reno attractive, such as business tax structure, language capabilities, local talent pool, Reno / Vegas medical schools, proximity to Silicon Valley, and logistical advantages offered by the region, the State Incentive Program is a key factor driving intent to locate operations in Nevada. Given the relatively high cost of MOBE's employee profile, and its desire to hire 50 to 200 people over the next 2 years, having access to an incentive such as the modified business tax abatement is financially compelling. *MOBE, LLC*

REQUIREMENTS	Statutory	Application	Sufficient	% Over / Under
Job Creation	50	100		100%
Average Wage	\$22.54	\$65.53	Company meets	191%
Equipment Capex (SU & MBT)	\$1,000,000	\$1,000,000	abatement eligibility	0%
Equipment Capex (PP)	\$1,000,000		requirements	0%

INCENTIVES	Requested Terms	Estimated \$ Amount
Sales Tax Abmt.	2% for 2 years	\$62,650
Modified Business Tax Abmt.	50% for 4 years	\$541,422
Personal Property Tax Abmt.	50% for 10 years	\$16,409
<b>Total</b>		<b>\$620,481</b>

JOB CREATION	Contracted	24-Month Projection	5-Year Projection
	50	100	300

OTHER CAPITAL INVESTMENT	Land	Building Purchase	BTS / Building Improvements
	\$0	\$1,600,000	\$7,000,000

ECONOMIC IMPACT ESTIMATES (10-Year Cumulative)	Total	Construction
Total Jobs Supported	744	75
Total Payroll Supported	\$468,981,776	\$3,459,648
Total Output Estimate	\$1,110,460,576	\$11,167,560

Estimate includes jobs, payroll & output by the company assisted as well as the secondary impacts to other local businesses.

NEW TAX REVENUE ESTIMATES (10-Year Cumulative)	Direct	Indirect	Total
<b>Local Taxes</b>			
Property	\$889,776	\$9,365,479	<b>\$10,255,255</b>
Sales	\$285,058	\$7,587,405	<b>\$7,872,463</b>
Lodging	\$0	\$224,036	<b>\$224,036</b>
<b>State Taxes</b>			
Property	\$43,342	\$547,644	<b>\$590,986</b>
Sales	\$111,000	\$2,907,687	<b>\$3,018,687</b>
Modified Business	\$3,800,991	\$1,943,747	<b>\$5,744,738</b>
Lodging	\$0	\$74,679	<b>\$74,679</b>
<b>Total</b>	<b>\$5,130,167</b>	<b>\$22,650,677</b>	<b>\$27,780,844</b>

**NEVADA BUSINESS LICENSE**

- Current  Pending  Will comply before receiving incentives

**EMPLOYEE BENEFITS**

- Percentage of health insurance covered by company: 65%.
- Health care package cost per employee - \$8,681 annually with options for dependents.
- PTO/Sick/Vacation, Merit Increases, Tuition Assistance, Retirement Plan/ Profit Sharing / 401(K), Bonus.

**NOTES**

- Percentage of revenue generated by the new jobs contained in this application from outside Nevada: 80%.
- The company is also considering Minnesota, Oregon, and Las Vegas as potential locations.

February 11, 2019

Director Paul Anderson  
Governor's Office of Economic Development  
808 West Nye Lane  
Carson City, NV 89703

Re: MOBE, LLC

Dear Paul;

EDAWN hereby supports the application of MOBE, LLC for the Sales & Use, Modified Business, and Personal Property Tax Abatements.

MOBE works with health insurance companies and large employers to provide an innovative guided health solution based on principals of self-management with the goal to improve outcomes and lower healthcare costs. The company plans to expand their operations to Reno and increase their capacity in key roles including guided management, engagement specialists, data scientists, other operations teams, and a new dual corporate headquarters (in addition to its current headquarters in Plymouth, MN).

MOBE will be investing approximately \$1,000,000 in capital equipment and plans to hire 100 employees by the end of year two at an average wage of \$65.00 per hour. By the end of year five they plan to have 300 employees.

The company's compensation package includes medical, dental, and vision insurance. Other benefits include merit increases, PTO/sick/vacation, retirement plan/profit sharing/401K, bonus, COLA adjustment, and tuition assistance. Employee health insurance is covered 65% by the company and commences upon employment.

EDAWN supports this application as the company meets three of three incentive requirements. Your consideration and support of the incentive application for MOBE, LLC is a significant factor in their pending decision to expand in northern Nevada and speaks favorably to the State's business-friendly environment.

Sincerely,



Stan Thomas  
EDAWN, Executive Vice-President  
Business Development



MOBE, LLC  
3033 Campus Dr, Suite E180  
Plymouth, MN 55441

February 6, 2019

Governor's Office of Economic Development  
808 West Nye Lane  
Carson City, NV 89703

Dear Commission Members:

MOBE works with health insurance companies and large employers to deliver innovative guided health solutions based on principals of self-management. Our success is based on the ability to improve outcomes and lower healthcare spend. Given the growth experienced in the last couple of years, and our desire to scale, we plan on expanding our presence from our current location in Plymouth, Minnesota, to Reno Nevada. We intend to hire and train employees from the local Reno area, and begin to operate key functions out of the Reno facility. The target date for the expansion is Q2 / Q3 2019.

MOBE's decision to expand our operations to Reno was based on several factors, including the business tax structure, language capabilities, local talent pool, Reno / Vegas medical schools, proximity to Silicon Valley and other logistical advantages offered by the region. In addition, MOBE is aware of the benefits of the State Incentive Program, which also played a critical factor in our decision to expand to Reno.

The expansion plan to Reno involves increasing our capacity in key roles including guided management, engagement specialists, and data scientists. Our expectation is to also build new teams in the fields of digital and creative content development. In support of our expansion, we intend to invest in capital equipment, primarily in the form of furniture and fixtures. In order to staff and perform our operations, the plan is to hire a total of 50 – 200 employees over the next two years. The average annual wage for hired employees is projected to be ~\$135k per year. We are also considering moving two higher paid senior executives to Reno. This group of individuals will be providing care for patients across the nation, and therefore exporting most of their services. Additionally, we are considering the formation of a couple of other related healthcare startup companies, which could be headquartered in Reno.

We are excited about the opportunities presented by this expansion and the advantages that locating this facility in Reno will offer our company. In conjunction with Nevada's business-friendly environment, we see this as a first step in what will be increased growth for MOBE.

Sincerely,

Chad Martinson, MOBE Board Member

Chris Cronin, Chief Operating Officer

# MOBE<sup>®</sup>

March 11, 2019

Mr. Paul Anderson

Executive Director

Nevada Governor's Office of Economic Development

555 E. Washington Avenue, Suite 5400

Las Vegas, NV 89101

RE: APPLICATION FOR INCENTIVES – REQUEST FOR  
CONFIDENTIALITY OF RECORDS AND DOCUMENTS

Dear Director Anderson:

On February 06, 2019 MOBE, LLC submitted an application to you as the Executive Director of the State of Nevada Governor's Office of Economic Development ("GOED") requesting approval of economic incentives for the new operation in Washoe County, Nevada. The purpose of this letter is to request that any and all records and other documents in GOED's possession concerning initial contact with, research and planning for MOBE, LLC, including but not limited to certain information in that application, and if amended, all be kept confidential pursuant to Section 4 of Assembly Bill No. 17 (2015 Regular Session) as codified in NRS 231.069.

Please be advised that MOBE, LLC specifically deems the following information proprietary and confidential:

- (i) The detailed schedule of Capital Equipment List, 5(A);
- (ii) The detailed schedule of Employment List, 5(B);
- (iii) The detailed schedule of Evaluation of Health Plan, 5(C); and
- (iv) The Powerpoint presentation attached to MOBE's application.

Thank you for your consideration. If you have any questions or require any further information, please do not hesitate to contact me.



Jeff Warren

CFO

MOBE, LLC

## REQUEST FOR CONFIDENTIALITY DETERMINATION

Pursuant to NRS 231.069, and upon the request of applicant MOBE LLC, the Executive Director of the Office has determined the:

- (i) The detailed schedule of Capital Equipment List, 5(A)
- (ii) The detailed schedule of Employment List, 5(B)

are confidential proprietary information of the business, are not public records, and shall be redacted in its entirety from the copy of the application that is disclosed to the public.

  
\_\_\_\_\_  
Paul Anderson  
Executive Director

3/13/2019  
\_\_\_\_\_  
Date

**ECONOMIC DEVELOPMENT**

**Incentive Application**

Company Name: MOBE, LLC  
 Date of Application: February 6, 2019

Company is an / a: (check one)  
 New location in Nevada  
 Expansion of a Nevada company

**Section 1 - Type of Incentives**

Please check all that the company is applying for on this application:

- Sales & Use Tax Abatement
- Modified Business Tax Abatement
- Personal Property Tax Abatement
- Sales & Use Tax Deferral
- Recycling Real Property Tax Abatement
- Other: \_\_\_\_\_

**Section 2 - Corporate Information**

COMPANY NAME (Legal name under which business will be transacted in Nevada) <b>MOBE, LLC</b>		FEDERAL TAX ID # <b>46 533 0952</b>	
CORPORATE ADDRESS <b>3033 Campus Dr, Suite E180</b>	CITY / TOWN <b>Plymouth</b>	STATE / PROVINCE <b>MN</b>	ZIP <b>55441</b>
MAILING ADDRESS TO RECEIVE DOCUMENTS (If different from above)		CITY / TOWN	STATE / PROVINCE ZIP
TELEPHONE NUMBER <b>(844) 841-9725</b>	WEBSITE <a href="https://www.mobeforlife.com/">https://www.mobeforlife.com/</a>		
COMPANY CONTACT NAME <b>Jeff Warren</b>	COMPANY CONTACT TITLE <b>Chief Financial Officer</b>		
E-MAIL ADDRESS <a href="mailto:jeff.warren@mobeforlife.com">jeff.warren@mobeforlife.com</a>	PREFERRED PHONE NUMBER <b>651-333-0253</b>		

Has your company ever applied and been approved for incentives available by the Governor's Office of Economic Development?  Yes  No  
 If Yes, list the program awarded, date of approval, and status of the accounts (attach separate sheet if necessary):

**Section 3 - Program Requirements**

Please check two of the boxes below; the company must meet at least two of the three program requirements:

- A capital investment of \$1,000,000 in eligible equipment in urban areas or \$250,000 in eligible equipment in rural areas are required. This criteria is applicable to new businesses. In cases of expanding businesses, the capital investment must equal at least 20% of the value of the tangible property owned by the business.
- New businesses locating in urban areas require fifty (50) or more permanent, full-time employees on its payroll by the eighth calendar quarter following the calendar quarter in which the abatement becomes effective. In rural areas, the requirement is ten (10) or more. For an expansion, the business must increase the number of employees on its payroll by 10% more than its existing employees prior to expansion, or by 25 (urban) or 6 (rural) employees, whichever is greater.
- In urban areas, the average hourly wage that will be paid by the business to its new employees is at least 100% of the average statewide hourly wage. For in rural areas, the average hourly wage will equal or exceed the lesser of the county-wide average hourly wage or statewide average hourly wage.

Note: Criteria is different depending on whether the business is in a county whose population is 100,000 or more or a city whose population is 60,000 or more (i.e., "urban" area), or if the business is in a county whose population is less than 100,000 or a city whose population is less than 60,000 (i.e., "rural" area).

**Section 4 - Nevada Facility**

Type of Facility:

- Headquarters
- Technology
- Back Office Operations
- Research & Development / Intellectual Property
- Service Provider
- Distribution / Fulfillment
- Manufacturing
- Other: Dual HQ

<b>PERCENTAGE OF REVENUE GENERATED BY THE NEW JOBS CONTAINED IN THIS APPLICATION FROM OUTSIDE NEVADA</b> 80%	EXPECTED DATE OF NEW / EXPANDED OPERATIONS (MONTH / YEAR) <b>Q2 / Q3 2019</b>
NAICS CODE / SIC <b>621999</b>	INDUSTRY TYPE <b>Healthcare Services</b>

DESCRIPTION OF COMPANY'S NEVADA OPERATIONS

Act as second headquarters with the following key functions: guided management, engagement specialists, data scientists, digital and creative content.

PROPOSED / ACTUAL NEVADA FACILITY ADDRESS <u>Considering 2 locations in Reno: 1 E. Liberty St., Ste 101 &amp; 750 East 5th</u>	CITY / TOWN <b>Reno</b>	COUNTY <b>Washoe County</b>	ZIP <b>89501</b>
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WHAT OTHER STATES / REGIONS / CITIES ARE BEING CONSIDERED FOR YOUR COMPANY'S RELOCATION / EXPANSION / STARTUP?  
Minnesota, Oregon, Las Vegas

**Section 5 - Complete Forms (see additional tabs at the bottom of this sheet for each form listed below)**

Check the applicable box when form has been completed.

- 5 (A)  Equipment List
- 5 (B)  Employment Schedule
- 5 (C)  Evaluation of Health Plan, with supporting documents to show the employer paid portion of plan meets the minimum of 65%.

**Section 6 - Real Estate & Construction (Fill in either New Operations/Startup or Expansion, not both.)**

New Operations / Start Up - Plans Over the Next <u>Ten</u> Years	Expansions - Plans Over the Next <u>10</u> Years
<p>Part 1. Are you currently/planning on leasing space in Nevada? <u>Yes</u></p> <p><b>If No, skip to Part 2. If Yes, continue below:</b></p> <p>What year(s)? <u>2019</u></p> <p>How much space (sq. ft.)? <u>~2,600</u></p> <p>Annual lease cost of space: <u>\$66,000.00</u></p> <p>Do you plan on making building tenant improvements? <u>No</u></p> <p><b>If No, skip to Part 2. If Yes *, continue below:</b></p> <p>When to make improvements (month, year)? _____</p> <hr/> <p>Part 2. Are you currently/planning on buying an owner occupied facility in Nevada? <u>No</u></p> <p><b>If No, skip to Part 3. If Yes *, continue below:</b></p> <p>Purchase date, if buying (month, year): _____</p> <p>How much space (sq. ft.)? _____</p> <p>Do you plan on making building improvements? _____</p> <p><b>If No, skip to Part 3. If Yes *, continue below:</b></p> <p>When to make improvements (month, year)? _____</p> <hr/> <p>Part 3. Are you currently/planning on building a build-to-suit facility in Nevada? <u>Yes</u></p> <p><b>If Yes *, continue below:</b></p> <p>When to break ground, if building (month, year)? <u>Q3 / Q4 2019</u></p> <p>Estimated completion date, if building (month, year): <u>Q3 / Q4 2020</u></p> <p>How much space (sq. ft.)? <u>24,000</u></p>	<p>Part 1. Are you currently leasing space in Nevada? _____</p> <p><b>If No, skip to Part 2. If Yes, continue below:</b></p> <p>What year(s)? _____</p> <p>How much space (sq. ft.)? _____</p> <p>Annual lease cost at current space: _____</p> <p>Due to expansion, will you lease additional space? _____</p> <p><b>If No, skip to Part 3. If Yes, continue below:</b></p> <p>Expanding at the current facility or a new facility? _____</p> <p>What year(s)? _____</p> <p>How much expanded space (sq. ft.)? _____</p> <p>Annual lease cost of expanded space: _____</p> <p>Do you plan on making building tenant improvements? _____</p> <p><b>If No, skip to Part 3. If Yes *, continue below:</b></p> <p>When to make improvements (month, year)? _____</p> <hr/> <p>Part 2. Are you currently operating at an owner occupied building in Nevada? _____</p> <p><b>If No, skip to Part 3. If Yes, continue below:</b></p> <p>How much space (sq. ft.)? _____</p> <p>Current assessed value of real property? _____</p> <p>Due to expansion, will you be making building improvements? _____</p> <p><b>If No, skip to Part 3. If Yes *, continue below:</b></p> <p>When to make improvements (month, year)? _____</p> <hr/> <p>Part 3. Do you plan on building or buying a new facility in Nevada? _____</p> <p><b>If Yes *, continue below:</b></p> <p>Purchase date, if buying (month, year): _____</p> <p>When to break ground, if building (month, year)? _____</p> <p>Estimated completion date, if building (month, year): _____</p> <p>How much space (sq. ft.)? _____</p>
* Please complete Section 7 - Capital Investment for New Operations / Startup.	* Please complete Section 7 - Capital Investment for Expansions below.

BRIEF DESCRIPTION OF CONSTRUCTION PROJECT AND ITS PROJECTED IMPACT ON THE LOCAL ECONOMY (Attach a separate sheet if necessary):

**Section 7 - Capital Investment (Fill in either New Operations/Startup or Expansion, not both.)**

New Operations / Start Up	Expansions
How much capital investment is planned? (Breakout below):	How much capital investment is planned? (Breakout below):
Building Purchase (if buying): <u>\$1,600,000</u>	Building Purchase (if buying): _____
Building Costs (if building / making improvements): <u>\$7,000,000</u>	Building Costs (if building / making improvements): _____
Land: _____	Land: _____
Equipment Cost: <u>\$1,000,000</u>	Equipment Cost: _____
<b>Total: <u>\$9,600,000</u></b>	<b>Total: _____</b>
	Is the equipment purchase for replacement of existing equipment? _____
	Current assessed value of personal property in NV: _____
	(Must <b>attach</b> the most recent assessment from the County Assessor's Office.)

**Section 8 - Employment (Fill in either New Operations/Startup or Expansion, not both.)**

New Operations / Start Up	Expansions
How many full-time equivalent (FTE*) employees will be created by the end of the first eighth quarter of new operations?: <u>100</u>	How many full-time equivalent (FTE*) employees will be created by the end of the first eighth quarter of expanded operations?: _____
Average hourly wage of these <u>new</u> employees: <u>\$65.53</u>	Average hourly wage of these <u>new</u> employees: _____
	How many FTE employees prior to expansion?: _____
	Average hourly wage of these <u>existing</u> employees: _____
	Total number of employees after expansion: _____

\* FTE represents a permanent employee who works an average of 30 hours per week or more, is eligible for health care coverage, and whose position is a "primary job" as set forth in NAC 360.474.

OTHER COMPENSATION (Check all that apply):

- Overtime                       Merit increases                       Tuition assistance                       Bonus  
 PTO / Sick / Vacation               COLA adjustments                       Retirement Plan / Profit Sharing / 401(k)               Other: \_\_\_\_\_

BRIEF DESCRIPTION OF ADDITIONAL COMPENSATION PROGRAMS AND ELIGIBILITY REQUIREMENTS (Attach a separate sheet if necessary):

**Section 9 - Employee Health Insurance Benefit Program**

Is health insurance for employees and an option for dependents offered?     Yes (*copy of benefit plan must be attached*)     No

Package includes (check all that apply):

Medical                       Vision                       Dental                       Other: \_\_\_\_\_

Qualified after (check one):

Upon employment               Three months after hire date               Six months after hire date               Other: \_\_\_\_\_

Health Insurance Costs:	Percentage of health insurance coverage by (min 65%):
Cost of health insurance for company (annual amount per employee): <u>\$ 8,681.00</u>	Company: <u>65%</u>
Health Plan annual out-of-pocket maximum (individual): <u>\$ 3,500.00</u>	Employee: <u>35%</u>

[SIGNATURE PAGE FOLLOWS]



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**Section 10 - Certification**

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I, the undersigned, hereby grant to the Governor's Office of Economic Development access to all pertinent and relevant records and documents of the aforementioned company. I understand this requirement is necessary to qualify and to monitor for compliance of all statutory and regulatory provisions pertaining to this application.

Being owner, member, partner, officer or employee with signatory authorization for the company, I do hereby declare that the facts herein stated are true and that all licensing and permitting requirements will be met prior to the commencement of operations. In addition, I and /or the company's legal counsel have reviewed the terms of the GOED Tax Abatement and Incentives Agreement, the company recognizes this agreement is generally not subject to change, and any material revisions have been discussed with GOED in advance of board approval.

Jeff Warren

\_\_\_\_\_  
Name of person authorized for signature

*Jeff Warren*

\_\_\_\_\_  
Signature

Chief Financial Officer

\_\_\_\_\_  
Title

February 6, 2019

\_\_\_\_\_  
Date

**Nevada Governor's Office of Economic Development**

555 E. Washington Ave., Ste 5400 • Las Vegas, Nevada 89101 • 702.486.2700 • (Fax) 702.486.2701 • [www.diversifynevada.com](http://www.diversifynevada.com)

# Site Selection Factors

Company Name: MOBE, LLC

County: Washoe

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## Section I - Site Selection Ratings

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Directions: Please rate the select factors by importance to the company's business (1 = very low; 5 = very high). Attach this form to the Incentives Application.

Availability of qualified workforce:	<u>5</u>	Transportation infrastructure:	<u>3</u>
Labor costs:	<u>3</u>	Transportation costs:	<u>3</u>
Real estate availability:	<u>3</u>	State and local tax structure:	<u>5</u>
Real estate costs:	<u>3</u>	State and local incentives:	<u>5</u>
Utility infrastructure:	<u>2</u>	Business permitting & regulatory structure:	<u>3</u>
Utility costs:	<u>2</u>	Access to higher education resources:	<u>5</u>

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Please summarize the importance of the abatement program to your decision (please include at least a paragraph summary):

On top of a number of parameters that made Reno attractive (business tax structure, language capabilities, local talent pool, Reno / Vegas medical schools, proximity to Silicon Valley and other logistical advantages offered by the region), the benefits of the State Incentive Program are a key factor driving our intent to expand in that location. Given the relatively high cost of our employee profile, and our desire to hire 50 to 200 people over the next 2 years, having access to an incentive such as the modified business tax abatement is very compelling financially.

## **Equipment Schedule, Detailed**

**The Office has determined the detailed equipment schedule as described in this application constitutes confidential proprietary information of MOBE, LLC, and is not a public record.**

## **Employment Schedule, Detailed**

**The Office has determined the detailed employment schedule as described in this application constitutes confidential proprietary information of MOBE, LLC, and is not a public record.**

## 5(C) Evaluation of Health Plans Offered by Companies

Company Name: MOBE, LLC County: Washoe County

Total Number of Full-Time Employees:	100
Average Hourly Wage per Employee	\$65.00
Average Annual Wage per Employee (implied)	\$135,200.00
Annual Cost of Health Insurance per Employee	\$8,681.00
Percentage of Cost Covered by:	
Company	65%
Employee	35%
Health Plan Annual Out-of-Pocket Maximum	\$3,500

### Generalized Criteria for Essential Health Benefits (EHB)

*[following requirements outlined in the Affordable Care Act and US Code, including 42 USC Section 18022]*

Covered employee's premium not to exceed 9.5% of annual wage	3.5%	MMQ
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Annual Out-of-Pocket Maximum not to exceed \$7,150 (2017)	\$3,500	MMQ
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Minimum essential health benefits covered (Company offers PPO):

- |  |                                     |
|--|-------------------------------------|
| (A) Ambulatory patient services                                      | <input checked="" type="checkbox"/> |
| (B) Emergency services   | <input checked="" type="checkbox"/> |
| (C) Hospitalization  | <input checked="" type="checkbox"/> |
| (D) Maternity and newborn care                                       | <input checked="" type="checkbox"/> |
| (E) Mental health/substance use disorder/behavioral health treatment | <input checked="" type="checkbox"/> |
| (F) Prescription drugs   | <input checked="" type="checkbox"/> |
| (G) Rehabilitative and habilitative services and devices             | <input checked="" type="checkbox"/> |
| (H) Laboratory services  | <input checked="" type="checkbox"/> |
| (I) Preventive and wellness services and chronic disease management  | <input checked="" type="checkbox"/> |
| (J) Pediatric services, including oral and vision care               | <input checked="" type="checkbox"/> |

No Annual Limits on Essential Health Benefits	<input checked="" type="checkbox"/>
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I, the undersigned, hereby declare to the Governor's Office of Economic Development that the facts herein stated are true, and that I have attached sufficient plan information highlighting where our plan reflects meeting the 65% minimum threshold for the employee paid portion of the plan for GOED to independently confirm the same.

Jeff Warren

*Jeff Warren*

\_\_\_\_\_  
Name of person authorized for signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Chief Financial Officer  
Title

\_\_\_\_\_  
2/6/2019  
Date