



REQUEST FOR PROPOSAL

PARKLAND COLLEGE GROUP COMPREHENSIVE MAJOR MEDICAL PLAN

**HEALTH INSURANCE THIRD PARTY ADMINISTRATIVE AND NETWORK SERVICES
AND SPECIFIC AND AGGREGATE STOP-LOSS COVERAGE**

DATE OF ADVERTISEMENT: FEBRUARY 28, 2025

PROPOSALS TO BE RECEIVED BY 9 AM: APRIL 4, 2025

NOTICE REQUEST FOR PROPOSAL

PARKLAND COLLEGE GROUP COMPREHENSIVE MAJOR MEDICAL PLAN HEALTH INSURANCE THEIR PARTY ADMINISTRATIVE AND NETWORK SERVICES AND SPECIFIC AND AGGREGATE STOP-LOSS COVERAGE

Parkland College requests proposals from any prospective Proposer for the above captioned subject.

PROPOSALS ARE DUE BY 9 AM, APRIL 4, 2025.

Emailed proposals will be received by Friday, APRIL 4, 2025 at 9 AM (Central Time). No proposals will be accepted after 9 AM on the above scheduled due date. Proposals may be submitted electronically to Melanie Lewis, Manager, Benefits & Employee Services via email to mnlewis@parkland.edu. No faxed proposals will be accepted.

All proposals shall confirm to all the terms and conditions of this Request for Proposal, as stated in this document. Failure to conform to the terms and conditions of the Request for Proposal will render the proposal non-responsive and ineligible for further consideration.

Questions regarding this Request for Proposal may be addressed to Melanie Lewis, Manager, Benefits & Employee Services at Parkland College via email at mnlewis@parkland.edu.

The College reserves the right to accept any Request for Proposal or any parts thereof or to reject any and all Request for Proposals. A successful Proposer will be required to comply with all applicable Federal and State laws and regulations as required.

SCOPE OF WORK

A. Overview/General Scope of Work

The Parkland College committee reviewing the Requests for Proposals consists of the following:

Vice President for Administrative Services/CFO
Associate Vice President, Human Resources/CHRO
Chief Accounting Officer
Manager, Benefits & Employee Services
Benefits Specialist
Representatives from the following Collective Bargaining Units:
 Parkland Academic Employees
 Professional Support Staff Employees
 Public Safety Officers' Association

The parameters of the College's health insurance benefits for premiums, deductibles, co-insurance, pharmacy copays, wellness programs, etc are collectively bargained by the three full-time bargaining units. The committee has the responsibility of conducting the search for the Third-Party Administrator.

The plan year runs from July 1 through June 30 to coincide with the fiscal year of Parkland College. The plan is self-insured, and the current third-party administrator is Health Alliance Medical Plans. Health Alliance also provides Specific and Aggregate Stop-Loss Coverage. The College has approximately 395 full-time employees enrolled under its medical/RX plan. The plan currently has approximately 1,000 covered lives.

Coverage Requested:

We are requesting a medical/Rx proposal including specific and aggregate stop-loss coverage from your organization that matches the College's existing plan and in-network providers. In addition to current plan design, Parkland College requests cost projections on deductible and plan design changes as noted on page 21. Upon request, Parkland College will provide the following resources in an electronic format. Please email Melanie Lewis, Manager, Benefits & Employee Services at mnlewis@parkland.edu to submit your request by no later than March 14, 2025.

- Parkland College Group Health Plan Summary Plan Description for current plan year.
- Current Membership Census as of 2/1/25
- Claims Disruption Report for the period of 7/1/24-1/31/25
- Rx Claims Analysis Report for the period of 7/1/24-1/31/25
- Large Claimant Information including diagnosis and prognosis
- Link to in-network provider list.

Third-Party Administrator Requirements:

- Match existing plan design and network.
- In addition to current plan design, provide cost projections on deductible changes as noted on page 21.
- Strong network discounts.
- Specific & aggregate stop-loss coverage.
- Competitive administrative fees.
- Limited provider disruption.

B. Timetable

- February 28, 2025 – RFP Released
- March 14, 2025 – Deadline for questions about RFP and requests for resources.
- March 18, 2025 – Parkland College will provide answers and respond to all requests by this date.
- April 4, 2025 – Submission Deadline
- April 7 - April 11, 2025 – Proposers should be available for questions and/or clarifications.
- April 23, 2025 – The final recommendation will be presented to the Parkland College Board of Trustees.

The selected vendor should be expected to begin implementation work in April for an effective date of July 1, 2025.

Cost Proposal

The Proposal shall include labor, materials, equipment, supplies and expertise necessary to provide the services as outlined in this Request for Proposal.

The Proposal shall include the costs for the following services. A two-year rate guarantee is requested.

- Claims Administration
- Utilization Review
- Specific & Aggregate Stop Loss Coverage
- Case Management
- HIPAA Administration and Compliance
- Repricing Fee
- Network Fee
- Pharmacy Benefit Management
- Disease Management/Predictive Modeling
- Internal & External Appeals Process
- Wellness Programming

Please clearly identify what services, if any, you do not provide within your proposal. For the services provided, please clearly outline the cost of each or indicate if it is included in other fees.

Vendor Qualifications

The Proposer must demonstrate that it has been in business for a minimum of five (5) consecutive years and has a minimum of one (1) year of experience in the services required under *Scope of Work*.

The following elements must be included in each TPA proposal:

- Description of Company
- Experience
- References
- Legal Requirements
- Answers to Questionnaire

The submittal requirements for each of these elements follow. Please note that proposals must include the information requested here in the manner specified. If the information is not included in the manner specified, the proposal will be considered non-responsive and may be eliminated from consideration.

A. Description of Company

The Proposer shall describe its company including the following data:

- Name of company; if a joint venture, name of joint venture with affiliates.
- Address or corporate headquarters and Champaign-Urbana location, if different.
- Telephone, Email and Website for headquarters and Champaign-Urbana location, if different.
- Form of company, i.e. sole proprietor, partnership, corporation.
- Provide the Federal Employer Identification number (FEIN).
- Date company formed; date incorporated if a corporation.
- Company principals including President, Chairman, VPs, COO, CFO, and general managers.
- Licenses (provide a copy of all licenses and/or permits required to do business in the State of Illinois.)

The Proposer will disclose any pending acquisitions or divestitures that could impact this contract.

B. Experience

The Proposer will provide a listing of other government agencies or private entities for which similar work has been performed by the Proposer (i.e., provide name of entity, address, phone number, email, contact person and brief description of project). The Proposer will provide details regarding experience performing TPA services of comparable scope to the work outlined in this Request for Proposal. This information must also be provided for any and all subcontractors.

C. References

The proposal shall include the names, addresses and phone numbers of at least three non-affiliated references (reference letters may also be included) for financial and managerial performance.

D. Equal Employment Opportunity

Parkland College upholds a commitment to Equal Employment Opportunity (EEO) by ensuring a workplace free from discrimination in all aspects of employment, contractual services, and college facility construction.

Questionnaire

Network

1. Complete Network Disruption Analysis
2. Prepare a projection of future claim costs for plan year 2025-2026.
3. Are you currently able to honor the in-network providers Parkland currently allows? Link available upon request.
4. If not, what is your plan to implement this national network by 7/1/25?
5. What is the target PMPM medical cost for the network provided for the 2025-2026 plan year? 2026-2027 plan year?
6. Are you willing to place guarantees on provider discounts attained? Please provide the structure of the guarantee.

Claim Services

7. Where would the primary claim-paying unit be located for Parkland College?
8. For which services and to whom do you outsource the following:
 - a. Mental Health
 - b. Prescription Drugs
 - c. Laboratory
 - d. Network Management
 - e. Utilization Management
 - f. Utilization Review Services
 - g. Subrogation
 - h. Other Services?
9. To what extent do you involve the patient and/or family in the review process? Be specific.
10. What percentage of all cases are reviewed by a physician and what determines whether a physician becomes involved?
11. Describe your review criteria for the following:
 - a. Medical necessity for proposed care.
 - b. Medical necessity for admission.
 - c. Necessity for continued stay.
 - d. Length of stay.
 - e. Mental health care (inpatient and outpatient).
 - f. Chemical dependency treatment (inpatient and outpatient).
 - g. Necessity for surgical procedures (inpatient and outpatient).
 - h. Case management.
 - i. Outpatient services.
12. Describe how your UR system is integrated with claim payment.
13. How do you define case management?
14. What is your fee structure? Do you charge on a monthly or case rate?

Member Services

15. Describe the staffing of the Parkland College member services team (number of processors, number of other accounts in unit, etc.).

16. Does the member services staff have the ability to make online corrections to the claim systems when additional information is received?

Customer and Consumer Tools

17. Are provider directories available on your public website? How often are they updated?
18. What value added services are provided?
19. Are your medical web tools interactive?
20. Does your website provide market and average network pricing for procedures?
21. Can members request ID cards on your website?
22. Describe the information available to employees regarding claim activity for each of their dependents.
23. Do members have access to a mobile app? If so, what functions are available through the app?

Management Information

24. Who would have primary account management responsibility for Parkland College?
25. Utilization and paid claims reports will be required on a weekly basis. Please confirm that you can accommodate this requirement and provide a sample report.
26. How will these reports be delivered? Will they be in a downloadable format that can be manipulated (such as Excel)?
27. Parkland tracks claim in numerous ways, including actives, COBRA participants, over and under age 65, for example. Please confirm that you can accommodate this type of claim tracking.
28. Enrollment for Parkland's plan is broken down between four subgroups defined by employment category. Will your system be able to accommodate this type of setup?
29. Parkland College is also looking for specific and aggregate stop-loss coverage. Are you able to provide these services or do you contract this service out?
30. As part of the stop-loss coverage, do you provide advance funding?
31. Describe your banking arrangements and requirements, including any mandatory deposits.
32. Define the criteria under which you would re-evaluate the rates, fees and factors.
33. Parkland College currently works with WEX for flexible spending plans and COBRA administration. What process will you institute to integrate with WEX for claims transfer and COBRA enrollment information?

Communication and Administration

34. What communication materials do you provide and what enrollment meeting support do you provide? Is it included in your pricing?
35. What is your deadline for receiving eligibility in order for you to guarantee that ID cards will be received before the plan effective date?
36. Do you handle the creation of an SPD? What is the timeframe of draft to printed copy?

37. Please provide an estimated implementation timeline assuming a 7/1/25 effective date.
38. Please include a draft of your Standard Administrative Services Agreement.
39. Do you offer performance guarantees? If so, please provide the guarantee with this proposal.

Prescription Drug – PBM

40. Complete an Rx Claims Analysis.
41. Please describe the PBM you utilize, and the services provided by this company. Does your PBM restrict which pharmacies may be utilized?
42. List the discounts off AWP your PBM offers for retail and mail order, both generic and retail.
43. How do your PBM manage pharmacy rebates?
44. Describe your Drug Utilization Review procedures.
45. What prescription drug pricing and alternative information is available on your website or mobile app?
46. Is the formulary available on your website or mobile app?
47. How often do your formulary change?
48. Does your pharmacy website always provide generic alternative information when generics are available?
49. How does your PBM process pharmacy claims for which a member uses a coupon program like GoodRx? What is the processing lag time for this?

Failure to provide the information as required above may render your proposal non-responsive and may result in disqualification.

Insurance Requirements

The Proposer, at its sole expense and prior to engaging upon the work agreed to be done, shall procure, maintain and keep in force during the entire term of the Agreement such required insurance. The specific type(s) and amount(s) of coverage of this Agreement are specified below. The College must be named as an additional covered party on every insurance certificate for this Agreement in respect to Commercial General Liability.

Workers' Compensation Insurance in the statutory amount and Employer's Liability Insurance in an amount not less than \$1,000,000.

Commercial General Liability Insurance

Bodily Injury - \$1,000,000 each occurrence; \$1,000,000 aggregate

Property Damage - \$500,000 each occurrence; \$500,000 aggregate

Errors & Omissions - \$1,000,000 each occurrence; \$1,000,000 aggregate

Provisions

The Proposer and all Independent/Subcontractor's Insurance coverage shall be primary insurance as respect to the College.

Any insurance or self-insurance maintained by the College shall not contribute to the Proposer's insurance.

The insurance policy required by this clause shall be endorsed to state that coverage shall not be suspended, voided, canceled, non-renewed or reduced in coverage or in limits except after sixty (60) days prior written notice by certified mail, return receipt requested, has been given to the Parkland College Chief Financial Officer.

Insurance (workers' compensation - general liability) is to be placed with insurers authorized to do business in the State of Illinois with Best's rating of no less than A: covering all operations under this contract. Exceptions to this clause are at the discretion of the College.

Proposers and Independent/Subcontractors shall furnish the College with certificate(s) of insurance and with original endorsements affecting coverage required by this clause. The certificate(s) and endorsements for each insurance policy are to be signed by a person authorized by that insurer to bind coverage on its behalf. Certificate(s) and endorsements are to be received and approved by the College. The College reserves the right to require complete certified copies of all required insurance policies at any time.

The College shall have no responsibilities whatsoever to Proposer with respect to any insurance coverage, its procurement or the absence thereof.

Proposers and Independent/Subcontractors expressly understand and agree that any insurance protection furnished by the Proposer hereunder shall in no way limit its responsibility to indemnify and save harmless the College under the Provision of this Agreement.

The College maintains the right to modify, delete, alter or change these requirements. The insurer shall agree to waive all the rights of subrogation (workers' compensation – general liability) against the College for losses arising from this Agreement.

Proposal Document

Proposals will be received by Melanie Lewis, Manager, Benefits & Employee Services in accordance with the conditions set forth herein. The requirements for the Proposal Document are addressed in the following two parts:

- Format and Preparation
- Submission.

Proposals must be organized according to the outline presented in this Request for Proposal. Proposals are advised that proposals must be well-ordered, detailed, comprehensive, and clear to ensure a thorough evaluation.

A. Format and Preparation

Proposers must follow the following format and preparation requirements to be considered responsive to this Request for Proposal.

Format

Each proposal shall be submitted electronically. The cover letter shall clearly state the project title and the Proposer's name. The Proposer may designate those portions of the proposal which contain trade secrets or other proprietary data which must remain confidential.

Preparation

Each Proposer shall furnish the information required by this Request for Proposal. Proposals for supplies or services other than those specified will not be considered unless authorized by the Request for Proposal. Each Proposer must state a definite time for performance of services unless otherwise specified in the Request for Proposal.

The corporate seal shall be included in the PDF submission. In the event the proposal is executed by an individual other than the president, a certified copy of that section of the corporate by-laws or other authorization by the corporation which permits the person to execute the offer for the corporation shall be included with the proposal.

If Proposer is a partnership, all partners shall sign the proposal unless one partner has been authorized to sign for the partnership, in which case, evidence of such authority must be submitted to the satisfaction of the reviewing committee.

A "Partnership" or "Sole Proprietor" operating under an Assumed Name must be registered with the Illinois County in which located, as provided in 805 ILCS 405/0.01.

B. Submission

Proposals must be submitted electronically no later than 9 am on April 4, 2025 to:

Melanie Lewis
Manager, Benefits & Employee Services
Email: mnlewis@parkland.edu
Parkland College
2400 W Bradley Ave
Champaign, IL 61821

Phone: 217-353-2259

Proposals should be submitted in electronic format (PDF) with the subject line:
“RFP for Group Health Plan – [Your Organization Name].”

Evaluation and Selection Process

Parkland College will review all proposals in accordance with the evaluation criteria. The College reserves the right to accept or reject any, some or all proposals, to take exception to parts of proposals, and to request written clarification of proposals and supporting materials. The College further reserves the right to negotiate with any Proposer with respect to amendments to their proposal.

The College may award a contract, based upon initial proposals received without discussion of such proposals. Accordingly, each initial proposal should be submitted on the most favorable terms which the Proposer can submit to the College. The review committee will rank the proposals and make a final recommendation that will be forwarded to the Parkland College Board of Trustees for consideration.

The College will use the following criteria evaluating proposals:

Understanding of the Project: Demonstration of the Proposer's understanding of the project to be completed.

Approach to the Work: A work plan reflecting a feasible approach to the delivery of the services outlined in this Request for Proposal.

Cost of Services: Proposed services will be evaluated for cost efficiency.

Technical Competence: The composition of:

- The professional qualifications and experience of the Proposer necessary for satisfactory performance of services.
- The professional qualifications, certifications and experience of committed personnel.
- The specialized experience of the Proposer and/or personnel committed to the project; and
- The performance of the Proposer on other contracts in terms of quality of work and compliance with performance schedules.

Compliance with Insurance Requirements: Stipulations contained in *Insurance Requirements*.

Submission of Licenses and Permits: Submittal of such documentation to perform business in the State of Illinois.

Equal Employment Opportunity: Parkland College upholds a commitment to Equal Employment Opportunity (EEO) by ensuring a workplace free from discrimination in all aspects of employment, contractual services and college facility construction. The opportunity to be gainfully employed without discrimination are human rights in any free society.

Checklist

The following list of items must be included for a proposal to be considered responsive. Failure of the Proposer to include each item listed in the checklist will render the proposal non-responsive and rejected.

A Cover Letter signed by an authorized representative of the Proposer. The cover letter must contain a commitment to provide the services described within the required time-frames with the personnel specified in the proposal. The letter shall indicate that the proposal is a firm offer for a period of at least one hundred and twenty (120) days.

Executive Summary (or Introduction) shall include the name of the Proposer, the location of the Proposer's principal place of business and, if different, the place of performance of the contract, branch office locations, the age of the Proposer's business and the average number of employees over the most recent five-year period. The summary must also include a brief statement of understanding and the Proposer's approach to perform the services required by Parkland College (maximum length: two (2) pages).

Questionnaire Provided in Request for Proposal should be completed to the best of the ability of the proposer. Documents submitted with this proposal should include the completed network disruption analysis, future claims projections and completed Rx Claims analysis.

Cost Proposal must be completed consistent with the information requested in the Request for Proposal.

Vendor Qualifications, the submittal of elements as required in *Vendor Qualifications*.

Insurance Requirements must be acknowledged and agreed to by the Proposer.

Bidder Affidavit must be completed, executed and attested by the Proposer.

Terms and Conditions

1. Examination by Proposer

Proposers are expected to examine all parts of the Request for Proposal. Failure to do so will be at the Proposer's own risk.

2. Competency of Proposer

No proposal will be accepted from or contract awarded to any person, firm or corporation that is in arrears or is in default with Parkland College upon any debt of contract, or that is defaulter, as surety or otherwise, upon any obligation to said College, or has failed to perform faithfully on any previous contract with the College.

3. Incurring Cost

All costs incurred in the preparation and submission of responses shall be borne by the Proposer.

4. Withdrawal of Proposals

Proposer may withdraw their proposals at any time prior to that specified in the advertisement, up until the closing time for the receipt of proposals. However, no Proposer shall withdraw or cancel its proposal for a period of one hundred and twenty (120) calendar days after said advertised closing time for the receipt of proposals, nor shall the successful Proposer withdraw or cancel or modify its proposal, after having been notified by Parkland College that the proposal has been accepted by the College.

5. Incomplete Proposals

Proposers must address all requirements outlined in this Request for Proposal. Proposals submitted to the contrary will be considered incomplete and may be rejected.

6. Consideration of Proposals

The Parkland College Review Committee shall represent the College in all matters pertaining to this proposal. The Review Committee reserves the right to reject any or all proposals and to disregard any informality in the proposals when, in their opinion, the best interests of the College will be served by such action.

7. Request for Explanation and Information

General questions regarding the Proposal process should be addressed to:

Melanie Lewis, Manager, Benefits & Employee Services
Parkland College
2400 W Bradley Ave, A116
Champaign, IL 61821
217-353-2259
mnlewis@parkland.edu

8. Addenda and Supplements to Specification

If it becomes necessary or appropriate to change or supplement any part of this Request for Proposal, an addendum will be issued to all recipients. Receipt by a Proposer of an addendum or supplement to this request must be acknowledged by email to Melanie Lewis at mnlewis@parkland.edu.

9. Inadvertent Error

Inadvertent errors that have a correction submitted after the designated filing date may be considered, at the sole discretion of the Parkland College Review Committee if the Proposer submits sufficient information with the correction to prove the error was inadvertent. Amendments are not favored, and, in the case of doubt, requests will be denied. The College reserves the right to request additional information at any time from any or all Proposers based on the initial evaluation of proposals.

10. Submission of Proposals

Proposals must be submitted no later than 9 am on April 4, 2025, to:

Melanie Lewis
Manager, Benefits & Employee Services
Email: mnlewis@parkland.edu
Parkland College
2400 W Bradley Ave
Champaign, IL 61821

Phone: 217-353-2259

Proposals should be submitted in electronic format (PDF) with the subject line: "RFP for Group Health Plan – [Your Organization Name]."

11. Acceptance of Proposal

A contract will be awarded to the responsive Proposer whose proposal, in conforming to the Request for Proposal, will be the most advantageous to Parkland College, price and other factors considered. The College may accept, within the time specified therein, any proposal, whether or not there are negotiations subsequent to

its receipt unless the proposal is withdrawn by written notice received by the College prior to the response due date. If subsequent negotiations are conducted, they shall not necessarily constitute a rejection or counter proposal on the part of the College.

12. Assignment

The Proposer shall not assign, sublet, transfer all or any part of the interest of the Proposer in this Agreement without prior written consent of Parkland College.

13. Bidder Affidavit

See page 20 of this Request for Proposal.

14. Conflict of Laws

The Proposer expressly agrees that the Agreement shall be governed by Illinois and that Illinois law will be controlling law in the event of any disputes, claims or controversies should arise out of or in connection with this Agreement and any subsequent contract that is awarded pursuant thereto. Any party to a dispute shall request that a hearing be scheduled within Champaign County in Illinois subject to the reasonable availability of the parties and their representatives. In the event that any of the provisions of the Agreement conflict with any provisions set forth in the Request for Proposal, it is the intentions of the parties that the provisions of the Agreement shall control.

15. Contract Termination

The contract may be terminated in whole or in part unilaterally by Parkland College at any time with 60-day notice to the Proposer, subject to equitable settlements of all interests and obligations that have accrued to date of termination.

16. Business Enterprise for Minorities, Females, and Persons with Disabilities

Consistent with the Business Enterprise for Minorities, Females, and Persons with Disabilities Act, 30 ILCS 575/0.01, et seq. (the "Act"), it is the policy of Parkland College to foster and encourage the continued economic development of minority-owned businesses, female-owned businesses, and businesses owned by a person with a disability. When Parkland College is required to competitively bid a contract, the bid documents shall additionally require all potential bidders to submit their name, the bid amount, a statement confirming whether the bidder is including in its bid work to be performed by certified minority-owned businesses, female-owned businesses, and businesses owned by a person with a disability.

If you are certified as a minority-owned, female-owned, or person with a disability-owned business, please indicate that information as part of your proposal.

Bidder Affidavit



INVITATION TO BID

HEALTH INSURANCE THIRD PARTY
ADMINISTRATIVE/NETWORK SERVICES/SPECIFIC &
AGGREGATE STOP-LOSS COVERAGE

The undersigned certifies that he/she is an agent of the company shown and as such agent is authorized to submit this bid on its behalf.

Federal Tax ID # _____

Company Name _____

Address _____

City/State/Zip _____

Phone _____

Contact Email _____

Authorized Signature _____

Name/Title _____

Date _____

Available Resources

In order to assist with the Request for Proposal requirements, Parkland College will provide the following resources in an electronic format. Please email Melanie Lewis, Manager, Benefits & Employee Services at mnlewis@parkland.edu to request these resources.

- Parkland College Group Health Plan Summary Plan Description for current plan year with amendments.
- Current Membership Census as of 2/1/25
- Claims Disruption Report for the period of 7/1/24 through 1/31/25
- Rx Claims Analysis Report for the period of 7/1/24 through 1/31/25
- Large Claimant Information including diagnosis and prognosis
- Link to in-network provider list.

Plan Design Options Requested

Current Plan Design

HSA Qualified High Deductible Health Plan

In-Network Deductibles/OOP Maximums:

Single - \$4,500; Family - \$6,500

Out of Network Deductibles/OOP Maximums:

Single - \$6,500; Family - \$9,500

Potential Modifications

HSA Qualified High Deductible Health Plan with Increased In-Network Deductibles and Out-of-Pocket Maximums (Out of Network Deductibles and OOP Maximums would increase accordingly).

Option A: Single - \$5,000; Family - \$7,000

Option B: Single - \$5,500; Family - \$7,500

Option C: Single - \$6,000; Family - \$8,300

Modification to an HSA Qualified High Deductible Health Plan (HDHP) with an Embedded Family Deductible (Out of Network Deductibles and OOP Maximums would increase accordingly).

Option A: Single - \$5,000; Family - \$7,000

Option B: Single - \$5,500; Family - \$7,500

Option C: Single - \$6,000; Family - \$8,300

Option D: Single - \$5,000; Family - \$10,000