

PAPER 01 / 08

Case Study Series

GOVCON + WORKFORCE EMPLOYERS

Fiduciary Governance | Funds Flow | Vendor Oversight | Workforce Economics

TrustFirst™ Architecture in Action

How Archer Jordan Health uses delegated fiduciary governance, trust-controlled funds flow, vendor discipline, and contemporaneous documentation to reduce labor cost without increasing compliance exposure.

IN THIS PAPER

This case study paper shows how TrustFirst™ Architecture operates in practice: engage the employer, evaluate the workforce and plan structure, assign fiduciary authority where appropriate, govern vendor economics, control plan funds flow, preserve the record, and produce measurable outcomes.

RELEVANT FOR

Government contractors · SCA employers · prevailing wage employers · hourly workforce companies · multi-state field services · CFOs · CEOs · HR leaders · owners · boards

14%

reduction in total labor cost

11%

reduction in effective labor cost

\$3.2M

annual labor cost reduction

Trust is not a feeling. Trust is the condition produced by systems leaders can understand, employees can rely on, and auditors can test.

EXECUTIVE SUMMARY

Functioning is not the same as governed.

Most employer health plans function. Claims get paid, employees receive ID cards, vendors produce reports, and renewals are negotiated. But function is not the same as governance. A plan can operate every day and still be unable to prove who held authority, why vendors were paid, how fees were approved, how money moved, or whether plan decisions were documented before scrutiny arrived.

Archer Jordan Health built TrustFirst™ Architecture for that gap. TrustFirst is not software alone, not a broker renewal process, and not a loose advisory model. It is an operating architecture that combines delegated fiduciary authority where authorized, vendor governance, trust-controlled funds flow for self-funded plans, software-supported recordkeeping, and year-round oversight. The system is designed so that by renewal, the plan is already understood; by audit, the record already exists.

The case studies in this paper demonstrate how that architecture performs across three environments: a federal services contractor operating under Service Contract Act pressures, a multi-state field services employer managing regulated job classes, and a large hourly workforce employer with more than 1,200 employees. The outcomes were different in scale, but the operating pattern was the same: evaluate the structure, identify leakage, govern the economics, document the decisions, and implement a plan that could withstand review.

THE TRUSTFIRST OPERATING MODEL

TrustFirst governs the system, not just the renewal.

Traditional advisory models usually sit beside the plan. A broker places coverage. A carrier or TPA administers claims. A PBM manages pharmacy mechanics. Payroll executes deductions. Finance sees invoices. HR answers employee questions. Each function may be competent, but none of those functions automatically governs the plan as an integrated financial and fiduciary system.

TrustFirst changes the control point. Where authorized by the plan sponsor and documented in the governing agreements, Archer Jordan Health accepts delegated fiduciary governance responsibility for defined areas of the plan: plan design, vendor management, plan economics, day-to-day governance, documentation, and oversight of the operating architecture. The plan sponsor retains corporate authority, but the burden of informal, undocumented plan governance is moved into a defined system.

The governing rule is simple: if a decision, document, approval, fee, assumption, exception, or funds-flow event is not recorded inside the TrustFirst architecture, it does not exist for governance purposes. That does not mean every action is complex. It means every material action is attributable, explainable, and preserved.

In self-funded plans, the trust is the financial control point.

In self-funded TrustFirst structures, the plan's money does not disappear into vendor-controlled economics. Plan sponsor contributions, employee deductions where applicable, claims funding, vendor fees, pharmacy arrangements, stop-loss-related payments, credits, rebates, and recoveries must move through documented financial rails. The bank trust, trust documents, administrative services agreement, plan documents, and summary plan description define how money is held, who has authority, what may be paid, and how disbursements are reconciled.

That distinction matters. Plan dollars are plan assets and sponsor-funded value, not a vendor revenue pool. Vendors do not decide what they extract from the plan. Fees must be disclosed, approved, documented, and paid only according to the agreed structure. PBM economics, TPA fees, stop-loss costs, administrative charges, and other vendor payments must be visible and reconcilable. No side arrangement should be able to outrun the governing record.

TrustFirst software supports that architecture by preserving plan documents, trust documents, administrative agreements, approvals, vendor files, fee schedules, claims-funding records, disbursement records, alerts, exceptions, and governance decisions. The software matters because memory is not a control system. But TrustFirst is larger than the software. The software records the architecture; the architecture governs the plan.

OPERATING SEQUENCE

How Archer Jordan Health engages, evaluates, and governs.

Stage	TrustFirst discipline
Engage	Identify the employer's workforce, contract, wage, funding, vendor, and administrative pressures.
Evaluate	Map eligibility, contribution strategy, benefit design, fringe exposure, claims funding, vendor compensation, and documentation gaps.
Design	Create the governed structure: plan design, fiduciary authority, vendor roles, fee controls, funds-flow rules, and implementation plan.
Onboard	Align plan documents, administrative services agreement, trust documents where applicable, payroll feeds, vendor files, and employee communications.
Govern	Monitor performance, funding, fees, exceptions, documentation, employee impact, and compliance readiness through a defined cadence.

YEAR-ROUND GOVERNANCE CADENCE

By renewal, the plan should already be understood.

TrustFirst™ is not an annual renewal event. It is a year-round fiduciary governance system. After implementation, Archer Jordan Health continues to monitor the plan while it is operating: claims activity, pharmacy trends, stop-loss exposure, vendor performance, funding status, trust activity where applicable, eligibility exceptions, payroll and contribution issues, documentation updates, and compliance readiness.

Monthly review keeps the operating signals visible. Quarterly governance meetings create a formal record of vendor performance, fee reasonableness, PBM economics, stop-loss positioning, funding assumptions, plan performance, and decisions requiring sponsor approval. Annual strategy then becomes the summary of an already-governed year: benchmarking, contribution strategy, renewal discipline, document alignment, employee communication, and fiduciary file certification.

Event-driven reviews occur when audit, DOL or DCAA inquiry, contract transition, acquisition, private equity diligence, vendor change, stop-loss shock, major claim event, or workforce restructuring tests the plan. The point is to keep the boat straight while it is moving, not to reconstruct the route after pressure arrives.

CASE STUDY 1

Federal Services Contractor: SCA workforce.

A federal services contractor operating under Service Contract Act requirements faced rising wage-equivalent labor costs tied to its benefit and compensation structure. The employer needed to satisfy its fringe obligations, remain competitive on contract economics, and preserve a record that could withstand Department of Labor scrutiny.

Archer Jordan Health evaluated the relationship among wage obligations, fringe treatment, benefit funding, eligibility, vendor structure, and documentation. The issue was not whether the employer had benefits. The issue was whether the benefit structure was economically efficient, fiduciary-governed, and defensible if questioned.

TrustFirst restructured the benefit framework under a fiduciary governance model. The redesigned architecture reduced unnecessary wage-equivalent cost while preserving compliance discipline and making the decision trail visible. The result was a 14% reduction in total labor cost, and the employer later passed a Department of Labor audit with zero findings.

CASE STUDY 2

Multi-state field services employer: regulated job classes.

A multi-state field services employer had employees working across regulated job classes and multiple wage environments. The company needed to reduce effective labor cost without creating state wage compliance exposure or adding administrative confusion.

Archer Jordan Health reviewed the employer's eligibility rules, contribution structure, funding model, job-class treatment, and benefit administration. The review showed that the employer was carrying cost leakage created by legacy assumptions and inconsistent application across workforce populations.

TrustFirst reengineered the benefits eligibility and funding structure so that the employer's labor dollars were better aligned with actual workforce and regulatory conditions. The company achieved an 11% reduction in effective labor cost while maintaining compliance across state wage requirements. The savings came from structure, not shortcuts.

CASE STUDY 3

Large hourly workforce employer: 1,200+ employees.

A large hourly workforce employer with more than 1,200 employees was carrying an inefficient compensation load. The employer needed a better health and welfare structure, but leadership did not want a reckless cost-cutting plan, a disruptive employee experience, or new administrative risk.

Archer Jordan Health evaluated the employer's benefit design, contribution strategy, eligibility logic, administrative process, vendor roles, and cost drivers at scale. With a workforce of that size, small errors in structure can become multimillion-dollar annual leakage. The TrustFirst approach was to redesign the architecture so the employer could remove waste while preserving governance.

The implemented structure replaced inefficient compensation load with a compliant benefits architecture. The company achieved a \$3.2 million annual labor cost reduction with no increase in compliance or administrative risk. The outcome demonstrated a core TrustFirst principle: reducing cost is valuable only when the system remains governable after implementation.

WHY THE OUTCOMES WERE REPEATABLE

The results came from architecture, not isolated tactics.

These case studies were not created by shopping carriers more aggressively or shifting cost into the workforce. They were created by changing the operating architecture around the plan. Archer Jordan Health connected labor cost, fiduciary authority, benefit design, vendor economics, funding discipline, documentation, and implementation into one governed system.

The system works because it forces the right questions before pressure arrives. Who has authority? What does the plan document say? What does the administrative services agreement permit? Where do plan dollars flow? Who approves vendor fees? How are claims funded? What records prove the decision? What happens when headcount changes, renewals move, or auditors ask for the file?

TrustFirst does not assume that a functioning plan is a defensible plan. It builds the record while the plan operates. That is the institutional difference. The evidence is not reconstructed after a problem. It is created as part of the operating system.

THE TRUSTFIRST TEST

A governed plan should be able to answer these questions.

- Who has authority to govern plan design, vendor management, economics, and day-to-day plan operations?
- Where are the plan document, summary plan description, administrative services agreement, trust documents, vendor contracts, and fee schedules archived?
- Can finance trace plan sponsor money into the plan, through the trust where applicable, and out to claims and approved vendors?
- Can the employer prove that vendor compensation was disclosed, agreed upon, reasonable, and paid only through the approved structure?

- Can leadership explain the plan without relying on vendor memory, scattered emails, or after-the-fact reconstruction?

If the answer is yes, the plan is not merely functioning. It is governed. That is the purpose of TrustFirst Architecture, and that is the reason these outcomes can be presented as evidence rather than marketing claims.

CLOSING STANDARD

TrustFirst turns plan operation into institutional proof.

Archer Jordan Health was built for employers operating in regulated, distributed, labor-intensive environments where precision matters. Since 2009, the firm has focused on designing, implementing, and administering health and welfare strategies for employers whose benefit systems must survive growth, scrutiny, transition, and time.

The lesson from these case studies is direct: labor cost reduction and fiduciary governance are not opposing goals. When the system is built correctly, governance creates the visibility required to reduce waste. Documentation creates the discipline required to defend decisions. Funds-flow control protects plan dollars from vendor-controlled economics. Software preserves the record. The architecture holds the pieces together.

TrustFirst is the standard Archer Jordan Health uses to make that system real: authority must be clear, money must be traceable, vendors must be supervised, documents must match operations, and every material decision must be preserved before scrutiny arrives.