

EXHIBIT B

(LOCKTON'S PROPOSAL DATED AUGUST 30, 2018)



Request for Health Care Advisory Consultant

City of Stamford | RFP #748

August 30, 2018





PROJECT SUMMARY & VENDOR OVERVIEW

We are pleased and honored that the City of Stamford (hereby referred to as "Stamford") has provided Lockton Companies the opportunity to present our response to your request for information (RFP). We will work with you to understand your immediate and long-term needs, collective bargaining environment, legislative and regulatory environment, and the ongoing services that are required to help Stamford maintain the most cost-effective health benefit programs within your contractual obligations.

OUR PARTNERSHIP APPROACH – STAMFORD'S TRUSTED ADVISOR

We will be your strategic partner and trusted advisor and function as an extension of your human resources and financial management team. We understand the public sector insurance marketplace, the collective bargaining process and the public sector budgetary and legislative environments. We will take into consideration not only your labor situation and strategy, but also current trends and purchasing options, as well as economic, demographic, labor and legislative developments including ongoing healthcare reform developments. Our counsel includes innovative and progressive recommendations to help you provide the most competitive benefit programs within your management, labor and budgetary objectives.

In addition to working intelligently and diligently, our team operates professionally and with the highest integrity. Be assured that the counsel and services we provide are always in your best interest. Our primary goal and responsibility is to meet your goals to attract and retain talented, motivated employees within the constraints of your collective bargaining agreements and budget process.

OUR COMPANY – STAMFORD'S ADVOCATE

Lockton Companies is the largest privately owned and operated brokerage/consulting firm in the United States. We have 80 offices and over 6,000 Associates globally including over 100 Associates in our Northeast practice. The firm was founded in 1966 and we have been servicing public, nonprofit and private entities for more than 50 years. Lockton provides a full range of consulting services including employee benefits, actuarial support, property and casualty, workers' compensation, and retirement planning. Lockton Companies offers advanced resources, national and local capabilities and a client-focused culture. We proactively service the needs of our clients and always keep their best interests at hand.

OUR RESOURCES – STAMFORD'S RESOURCES

Lockton has the resources to assist you in significantly impacting long-term healthcare costs through the strategic use of disease management and wellness programs, as well as a proactive approach to addressing the challenges presented by national healthcare reform.

Stamford needs a consulting partner who can provide valuable information and resources efficiently and cost effectively. This information includes benchmarking of plan/cost data,

benchmarking of collective bargaining provisions during negotiations, actuarial data for active employee and retiree medical programs, employee education and communication materials, and compliance updates.

At Lockton, we are extremely fortunate to have on-staff resources, eliminating the need for subcontractors. Lockton clients have access to our in-house compliance attorneys, medical directors, wellness coordinators, HRIS experts, actuaries, and communication specialists — all in addition to the day-to-day service team — at no additional cost.

OUR SERVICE - STAMFORD'S ADDITIONAL BUSINESS SUPPORT

The corporate structure, philosophy and culture of Lockton Companies are focused on client service. Our mission is to be the worldwide value and service leader in insurance consulting and risk management services. Our motto is WE LIVE SERVICE!® and our guiding principle is to grow through performance, deliver superior value, utilize technology, empower associates and live service. We are a results-oriented organization committed to the highest standards of customer service. Lockton enjoys the highest client retention and fastest organic growth of any brokerage firm in the industry.

Our public sector clients enthusiastically refer us to new opportunities, which we consider to be the highest compliment to our services.

OUR PUBLIC SECTOR EXPERIENCE - STAMFORD'S INDUSTRY SOURCE

Lockton Companies maintains our leading-edge approach by actively participating in health insurance industry and benefit consulting events and professional organizations both nationally and locally.

Participation in these professional development and industry activities and organizations is paramount for Lockton consultants to maintain the ability to provide proactive counsel for our clients. Personal and professional development activities are incorporated into each consultant's annual performance and professional development objectives.

OUR COLLECTIVE BARGAINING SUPPORT - STAMFORD'S LABOR ADVANTAGE

Your Lockton team will serve in an advisory capacity before, during, and after all negotiations with your collective bargaining units. Working hand-in-hand with your negotiating team and labor counsel, we will analyze benefit proposals, provide benchmarking information, provide plan design modeling and valuation, provide counsel to negotiators and participate in negotiation sessions as needed. Once plan changes or carrier changes take place, your Lockton team will coordinate implementation activities and ensure that changes take place as agreed. We will provide expert advice and/or testimony in situations that may arise between Stamford and its labor unions. We will ensure that all negotiated arrangements pertaining to the employee benefit program are strictly adhered to for your benefit.

OUR COMPLIANCE AND ADVISEMENT – STAMFORD’S WELL BEING

Lockton Companies maintains a team of legal experts, including three full-time compliance officers/benefit attorneys. Lockton uses these resources to provide compliance analysis and recommendations to ensure that all plans are in full compliance with the requirements of state and federal agencies, regulations, statutes, mandates and laws. We proactively inform you of changing legislation and legal decisions affecting the management of employee benefits. We provide counsel and support with regard to the legislative and tax implications of implementing wellness programs and/or negotiation incentives into collective bargaining agreements. We also advise and discuss methods for complying with these changes.

Lockton conducts seminars and webcasts on current topics, including regular, **ongoing healthcare reform legislation updates** to help our clients understand how new legislation impacts their programs. Specific questions can be directed to Lockton benefit attorneys at any time, saving you the costs associated with using outside counsel.

Our Health Reform Advisory Practice is working diligently to keep our clients informed and will help you understand what the new legislation requires, the timeline for implementation of the law's provisions, your options, and what course of action makes the most sense for your organization and employees. We have the resources available to provide Stamford with an extensive amount of support to properly manage the new Health Reform law including timelines, financial impact modeling and considerations, strategic decision tools, sample employee communications, disclosure support and Q&A assistance.

COMMUNICATING TO ALL STAMFORD CONSTITUENCIES

The key factor to the success of any plan we implement with clients is employee education and communication. We will work with you to understand what forms of communication and technology have been successful in the past, with an eye toward a format and style that is consistent with your culture.

For some clients, we develop a variety of communication vehicles depending on the message and constituencies.

Whether our audience is comprised of employees, human resources or finance staff, board of aldermen members, board of education members, or other elected officials, our objective is to fully educate everyone on the impact of the benefit changes taking place. Concise, repetitive and “high touch” communications have worked with our clients in the Northeast and around the country.

CONCLUSION

When you work with Lockton, you will work with a team that has unrivaled experience and the resources of a national brokerage and consulting firm to provide the financial, regulatory and legislative resources necessary to assist you with the day-to-day issues that arise in the management of a public sector employee benefits plan. At Lockton, we truly see ourselves as an extension of your management team with a strong desire to help you achieve success for you and your employees.

We feel confident that we will add value with respect to overall program management, collective bargaining strategy and support, insurance carrier negotiations, healthcare reform guidance, retiree medical liability analysis and counsel, legislative updates and education, health risk management initiatives and day-to-day servicing of all programs as outlined in the RFP. Our response will demonstrate our effectiveness and the many advantages of (1) using an established local team of senior consultants/actuaries who possess significant public sector experience and; (2) using Lockton's national purchasing power, technology, medical and legal resources, and wide array of specialty services.

Our capabilities, resources, expertise, and commitment to the scope of services outlined in the RFP are discussed in detail throughout the proposal. Our resources and services will continue to provide Stamford with exceptional support to meet and exceed your Employee Benefits Consulting expectations.

Working in collaboration with Stamford, Lockton will define critical objectives required to accomplish the goals of each major project or initiative we support as your advisor. These objectives will be assigned to a member of the Stamford/Lockton team who will be responsible for delivering on the needs of that objective in a timely and comprehensive manner. For the purpose of tracking and managing progress, time lines and open items, lists are developed and we are then able to determine if any components require additional resources and we re-direct resources to help us stay on-track with our objectives.

We have thoroughly reviewed the requirements and expectations delineated in the RFP and we are 100% confident that Lockton Companies possesses the background, experience, resources and skills to meet the goals and objectives of Stamford.

Market all insurances to include, but not be limited to, preparation of bid specifications, evaluation of proposals received, and recommendations on contracts to be signed for with effective date to be determined by the City. ✓

Coordinate and review necessary demographic data for marketing. ✓

Should the City elect to change carriers following the marketing process, manage and review the SPD development ensuring that the selected vendor provides benefits that are equivalent to or better than those currently in effect. ✓

Provide a disruption analysis relative to the provider, pharmacy, hospital and appropriate other vendor networks. Attend various employee, committee and board/commission meetings as necessary. ✓

Review all contracts and booklets. ✓

Review current plans' experiences, claims, and market trends, and negotiate renewal premiums with all insurance providers on an annual basis. ✓

Periodically review the health insurance plans' claims and fees and provide a reasonability analysis in comparison with industry norms. ✓

Ensure accurate follow through on all negotiated contractual arrangements made between the City of Stamford and its health insurance carrier(s). ✓

Ensure that any self-funding arrangements with third party administrators are appropriately managed. ✓

Monitor the third party administrator's actuarial assumptions under self-insured programs, if applicable. ✓

Intervene and resolve with providers, problems that may arise regarding claims, proper coverage, routine administration and day-to-day account service. ✓

Cause the City to be provided with accurate management reports/ utilization, review and comment on information from all carriers on a continuing basis. ✓

Provide the City with information on new health insurance programs, more cost-effective products and funding options, and future trends in employee benefits. ✓

Procure and manage audits of Plans. ✓

Advise the City of Stamford on updating/improving management systems for the plans. ✓

Analyze annual renewals for all self-insured and insured plans and periodically solicit coverage proposals from alternative providers. ✓

Develop strategies for presentation and implementation of any new benefit program to employee unions and other interested parties. ✓

Serve in an advisory capacity during negotiations with collective bargaining units. This includes analyzing benefit proposals, providing counsel to negotiators, and testifying at negotiation, mediation, and arbitration sessions as needed. ✓

Coordinate employee communications and conduct employee informational meetings as new programs are implemented or as regulations require. ✓

Provide expert advice and/or testimony in disputes that may arise between the City and their labor unions, as they pertain to the health insurance benefit plans. ✓

Inform the City and Administration of changing legislation and legal decisions affecting employee benefits. Recommend and discuss methods to comply with these changes. ✓

Work with the City to develop budget rates, COBRA rates and base rates used in the cost share determination. ✓

Act in an advisory capacity with the City in the development of its short and long term Health Care strategies. ✓

Provide analysis and guidance with regard to the City's administrative practices. ✓

Provide an on-site health care professional one (1) day per week. ✓

Transition Plan

We utilize Best Practice Service Delivery Plans for implementation and ongoing service that delineate responsibilities between Lockton and the client. Plans are developed for specific projects such as insurance carrier marketing and implementation. All implementation, ongoing service and project delivery plans are customized and developed collaboratively with the client.

The following sample Service Delivery Plan will be customized to meet Stamford's needs after our initial meeting.

Phase 1 – Transition Plan	Responsibility
Appoint Lockton as consultant	Stamford
Send Lockton signed agreement & carrier contact information	Stamford
Establish teams for Lockton/Client and assign functions (by phase/project)	Stamford/Lockton
Identify transition activities and initial projects	Stamford/Lockton
Identify meeting schedules (ongoing, periodic, special projects)	Stamford/Lockton
Discuss and finalize initial implementation plan	Stamford/Lockton
Phase 2 – Current Program Analysis	Responsibility
Initial data collection/introductory meeting	Stamford/Lockton
Conduct review of business provisions in vendor contracts	Lockton
Evaluate current plan designs, funding arrangements and collective bargaining language	Lockton
Identify customized reporting needs	Stamford/Lockton
Compliance evaluation/discussion	Stamford/Lockton
Recommend changes for plan design, funding arrangements	Lockton
Carrier communications and data requests	Lockton
Review of employee communication materials	Lockton
Analysis of Cadillac Tax implications	Lockton
Phase 3 – Strategic Planning Analysis	Responsibility
Discuss goals, objectives, long-term philosophy and collective bargaining strategy	Stamford/Lockton
Review current carrier performance (service/financial)	Lockton
Evaluate plan design options	Lockton
Evaluate funding options	Stamford/Lockton
Explore trends and recent developments (e.g., new carrier offerings; CDHP; HSAs)	Lockton
Identify cost containment strategies with collective bargaining arrangements	Lockton
Explore viability of cost containment options	Lockton

Phase 4 – Public Sector Action Plan	Responsibility
Renewal Negotiations <ul style="list-style-type: none"> • Prepare timeline for renewal actions that considers budgetary process and negotiation constraints • Incorporate expense updates and collective bargaining needs • Request renewal form carriers • Deliver initial renewal projection • Based on strategic plan, plan marketing and review of expenses and collective bargaining needs, identify potential plan modifications • Negotiate carrier renewal positions • Deliver negotiated results • Perform plan design modeling (including actuarial certification) 	Lockton
Employer/Employee Contribution Strategies <ul style="list-style-type: none"> • Develop contribution strategy model • Analyze existing or potential opt-out programs 	Lockton
Marketing Activities <ul style="list-style-type: none"> • Prepare and manage RFPs for employee benefits • Evaluate potential carrier options • Network analysis • Evaluate and assist with effective benefit offerings 	Lockton
Phase 5 – Collective Bargaining Strategy/Support	Responsibility
Analyze collective bargaining agreements and other relevant documents	Lockton
Identify constraints in current collective bargaining agreements and recommend contract language improvements	Lockton
Provide benchmarking data	Lockton
Recommend plan design changes	Lockton
Participate in collective bargaining negotiation meetings/sessions	Lockton
Support collective bargaining mediation/arbitration process	Lockton
Develop strategy for labor/management communication and education activities	Lockton
Identify stakeholder communication needs	Lockton
Phase 6 – Ongoing Service & Support	Responsibility
Day-to-Day Support <ul style="list-style-type: none"> • Intervene and resolve claim issues • Vendor relationship management • Issue resolution (i.e., billing, claim and collective bargaining issues) 	Lockton
Financial Reporting <ul style="list-style-type: none"> • Quarterly claim, utilization and premium reporting • Funding/budget variance reporting • Update forecasts periodically • Large claim loss reporting and management • Ad hoc reporting for budget, renewal, collective bargaining, etc. • Quarterly reporting for town, school district, etc. 	Lockton
Budget Support <ul style="list-style-type: none"> • Cost estimates for upcoming fiscal year • Lockton cost projection (independent of carrier calculations) • Development of allocation rates (if applicable) • OPEB funding support/review • Plan modeling and other changes • IBNR reserve review and actuarial certification (if applicable) 	Lockton
Compliance Support <ul style="list-style-type: none"> • Lockton benefit news – provides information relating to recent developments in legislation and trends, benefit surveys, and compliance updates • Employer guides providing in-depth review of legislative and regulatory topics of interest • Lockton Health Reform Advisory Practice updates and education 	Lockton

VENDOR OVERVIEW

LOCKTON COMPANIES

Company Name	Lockton Companies
Headquarters	444 West 47th Street, Suite 900, Kansas City, MO 64112
Servicing Office Address	76 Batterson Park Road, Floor 3, Farmington, CT 06032
Telephone Number	860.678.4000 (tel) 860.269.9800 (fax)
Web Address	www.lockton.com

Lockton Overview

The 7,000+ professionals of Lockton Companies serve more than 50,000+ clients around the world with risk management, insurance, employee benefits consulting, and surety services. Lockton is the world's largest privately owned, independent insurance broker, with 2017 revenues of \$1.57 billion and 90+ offices on six continents.

Lockton is recognized for its leadership and innovation in client service. Clients value our expertise and our passion for our work. Lockton's motto, "WE LIVE SERVICE!," sums up our entrepreneurial culture—a culture that helps us retain 96 percent of our U.S. clients annually, the best record in the business.

	Lockton All Operations	US Benefits
 Associates	7,000+	1,000+
 Clients	52,000+	3,900+
 Client retention	96% (industry standard is 85%)	
 Offices	90+ offices Service to 125+ countries	
 Revenue	\$1.57 billion	\$408 million
 Broker rank	10th-largest	
 Organic growth	9.9%	

Lockton Companies U.S. Office Locations



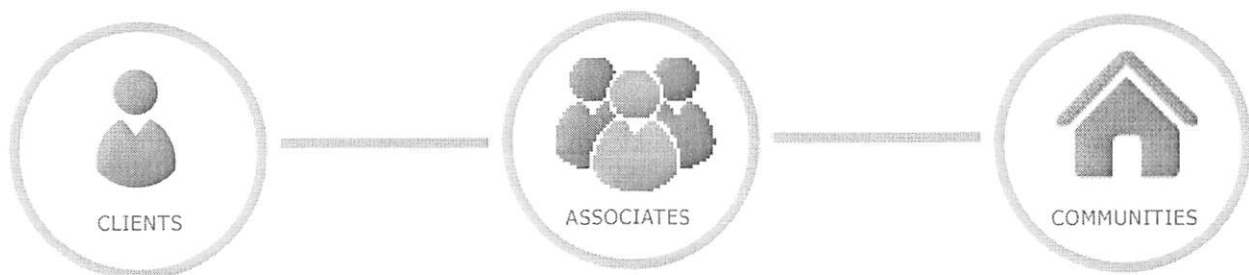
Lockton's Privately Held Structure & Service Philosophy

One of Lockton's most distinguishing characteristics is being the largest private, independent insurance broker in the world. We are not distracted by quarterly earnings reports, stock price, investors, or analysts. Our Associates are focused on our clients. As a client you will see the impact of higher-level service and broader resources.

Our service philosophy starts with taking a long-term view of our client relationships. We want to be a business partner you can count on for decades, not just for the coming year. Key tenets of our service philosophy:

- Give back to the local communities in which we serve through social and civic responsibility.
- Commit to excellence in all that we do.
- Operate with integrity in every moment.
- Know that our Associates are our most valuable assets.
- Make a recognizable difference in our clients' businesses through innovative, strategic solutions.

FIERCELY INDEPENDENT



We have three stakeholders: our Clients, our Associates, and our Communities.
We embrace the freedom to make the right decisions for all of them.

Lockton's History

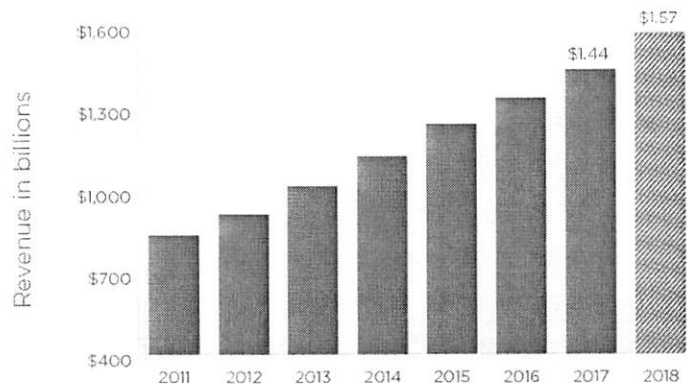
Lockton Companies, LLC began in Kansas City, Mo., in 1966 when Jack Lockton joined his parents' insurance agency with a passion and a vision for building an unparalleled service provider. His commitment to attracting and retaining superior talent, combined with providing exceptional service and results, has resulted in Lockton becoming the world's largest privately held insurance broker. Lockton's growth over the past 50+ years has been predominantly organic.

LOCKTON BENEFITS TIMELINE



Financial Stability All operations

As is shown by the chart to the right, Lockton has been steadily growing since our inception in 1966. For our fiscal year ended April 30, 2018, revenues were \$1.57 billion, and profit and equity retention are at levels our ownership finds satisfying. Our financial statements are audited and we have never received any less than a "clean" unqualified audit opinion.



Employee Benefits Practice

Lockton's Benefit Group (LBG) formed in the mid-1980's to address the needs of customers in the area of employee health/benefit insurance. This entity provides professional consultative and brokerage services to 3,000 U.S. clients. Mirroring the success of our property/casualty operation, this division is one of the most successful and fastest-growing benefit groups in the country with a strong presence in the marketplace. The Lockton Northeast Practice is well respected in the marketplace.

In the U.S. 1,000+ Benefit Associates in 30 Offices service over 5,000,000 members on behalf of the 3,900 U.S. clients.

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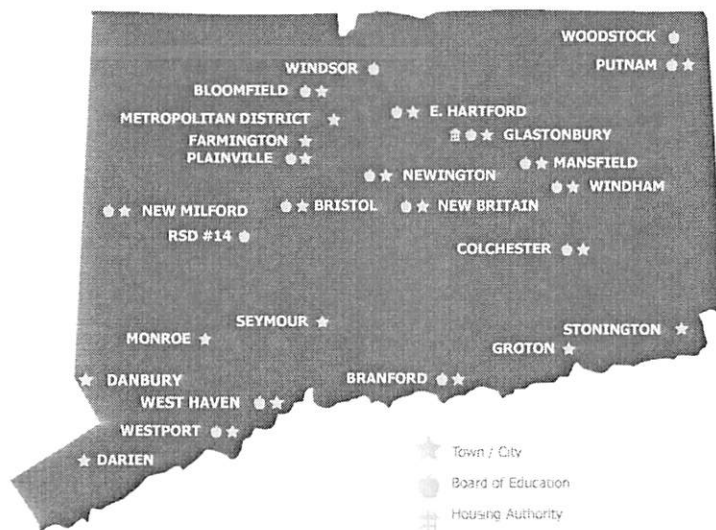
CLIENT BASE & REFERENCES

Lockton provides ongoing employee benefit consulting services for all of our clients with no official beginning or end dates (other than as determined by local purchasing requirements). As you can see, we have long standing relationships with many of our clients. We truly have become an extension of their human resource and finance teams. We use the history we have accumulated with each client to develop solutions that work for their own unique needs.

Organization/Contact Person	Dates services encompass	Services being provided
Town and BOE of Branford Jim Finch, Finance Director 1019 Main Street, Branford CT 06405 203.488.8394 x163 jfinch@branford-ct.gov	7/1/2008 - present	All lines - Medical, Rx, Dental, Life
City and BOE of Bristol Diane Waldron, Comptroller 111 North Main Street, Bristol, CT 06010 860.584.6127 dianewaldron@bristolct.gov	2018 - present	All lines - Medical, Rx, Dental, Life
Town and BOE of Bloomfield Jim Wren, Director of Finance, Town of Bloomfield 800 Bloomfield Avenue, Bloomfield, CT 06002 860.769.3533 jwren@bloomfieldct.org	5/1/2012 - present	All lines - Medical, Rx, Dental, Life
Town and BOE of Colchester Maggie Cosgrove, Finance Director 127 Norwich Avenue, Suite 203, Colchester, CT 06415 860.537.7229 mcosgrove@colchesterct.gov	7/1/2012 - present	All lines - Medical, Rx, Dental, Life
Town of Darien Kathleen Clarke Buch, Town Manager 2 Renshaw Road, Darien, CT 06820 203.656.7334 kclarke@ci.darien.ct.us	2/16/2006 - present	All lines - Medical, Rx, Dental, Life
Town and BOE of East Hartford Mike Walsh, Finance Director 740 Main Street 1st Floor, East Hartford, CT 06108 860.291.7246 mwash@easthartfordct.gov	7/1/2006 - present	All lines - Medical, Rx, Dental, Life
Town and BOE of Glastonbury Sherri Tanguay, Human Resources Director Town Hall, 2nd Floor, 2155 Main Street, Glastonbury, CT 06033 (860) 652-7503 sheri.tanguay@glastonbury-ct.gov	7/1/2009 - present	All lines - Medical, Rx, Dental, Life
City of Groton Ron Yuhas, Director of Finance, City of Groton 295 Meridian Street, Groton, CT 860.446.4114 yuhasr@cityofgroton-ct.gov	2012 - present	All lines - Medical, Rx, Dental, Life
Town and BOE of Mansfield Derrik Kennedy, Town Manager, Town of Simsbury 4 South Eagleville Rd Mansfield, CT 06268 derrik.kennedy@mansfieldct.org	4/1/2016 - present	Medical, Rx, Dental
Town of Monroe Catherine Lombardi, Director of HR 7 Fan Hill Road, Monroe, Connecticut 06468 203.452.2808 clombardi@monroect.org	10/17/2007 - present	All lines - Medical, Rx, Dental, Life
City and BOE of New Britain Mary Pokorski, City of New Britain 27 West Main Street, New Britain, CT 06051	7/1/2017 - present	All lines - Medical, Rx, Dental, Life

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Organization/Contact Person	Dates services encompass	Services being provided
Town and BOE of New Milford Greg Bollaro, HR Director, Town of New Milford 10 Main Street, New Milford, CT 06776 gbollaro@newmilford.org	10/1/2016 - present	All lines - Medical, Rx, Dental, Life
Town and BOE of Newington Charlene Drzata, Human Resources Director 131 Cedar Street, Newington, CT 06111 860.665.8524 cdrzata@newingtonct.gov	2006 - present	All lines - Medical, Rx, Dental, Life
Town and BOE of Plainville Rob Buden, Director of Finance, Town of Plainville 11 Central Square, Plainville CT 06062-1955 860.793.0221 ext 233 rbuden@plainville-ct.gov	3/1/16 - present	All lines - Medical, Rx, Dental, Life
Town and BOE of Seymour Kurt Miller, First Selectman 1 First Street, Seymour, CT 06483 203.888.2511 kmiller@seymourct.org	2006 - present	All lines - Medical, Rx, Dental, Life
Town of Stonington Vincent Pacileo, Town Administrator 152 Elm Street, Stonington, CT 06378 860.572.0506 x101	10/10/2005 - present	All lines - Medical, Rx, Dental, Life
City and BOE of West Haven Linda Savitsky, Director of Finance 355 Main Street, 3rd Floor, West Haven, CT 06516 203.937.3620 lsavitsky@westhaven-ct.gov	March 2016 - present	All lines - Medical, Rx, Dental, Life
Town and BOE of Westport Gary Conrad, Finance Director 203.650.7661 gconrad@westportct.gov 110 Myrtle Avenue, Westport CT 06880	4/1/14 - present	All lines - Medical, Rx, Dental, Life
Town and BOE of Windham Neida Rosado, Executive Administrator nrosado@windhamct.com 979 Main St., Willimantic, CT 06226	11/9/2006 - present	All lines - Medical, Rx, Dental, Life
Windsor Public Schools Danielle Batchelder, Director of Business Services 601 Matianuck Ave., Windsor CT 06095 860.687.2000, x 259 DBatchelder@windsorct.org	2006 - present	All lines - Medical, Rx, Dental, Life



Lockton has not had any previous contracts or purchase orders with any agency of the City of Stamford.



YOUR LOCKTON TEAM

Lead Personnel

Lockton Companies has assigned a local team, consisting of our Public Sector Practice Leader (Deb Testa), our Employee Benefits Practice Leader (Jeff Pichnarcik), and a Unit Leader (Dave McCluskey), and a team of Communication Consultants.

This team is supported by additional Lockton professionals and resources (e.g., compliance/benefit attorneys, wellness coordinators, medical director and consulting analysts) both locally and nationally on an as-needed basis. This results in an experienced, knowledgeable, well-rounded and well-connected team to support the many unique needs of Stamford. All team members provide the necessary background and experience to meet the service needs required in the public sector marketplace and those specifically outlined in Stamford's RFP.



Debra Testa

Public Sector Practice Leader
860.678.4025
dtesta@lockton.com

Deb Testa, member of the board of directors for the Connecticut Public Pension Forum (CPPF) and one of Risk & Insurance's 2013 Public Sector Power Brokers of the Year, worked in Anthem Blue Cross & Blue Shield's public sector practice for eight years before joining Lockton. In addition, all of our senior consultants have worked as underwriters with major carriers, such as CIGNA, United Healthcare and Aetna, and thoroughly understand their products, rating methodologies and service structure and, more importantly, how these best fit within the public sector management/labor structure and budgetary environment. All of our consultants possess strong working relationships with senior executives, underwriters and actuaries at all of the health insurance markets, which will be beneficial in obtaining the most competitive rates on behalf of Stamford.

We are also fortunate to have the expertise of Shannon Demaree, ASA, MAAA.

In addition, Lockton Connecticut consultants work closely with other Lockton consultants throughout the United States. This benefits our clients by keeping the Lockton/Stamford team abreast of national trends as they develop.

Client Advocate



Debra Testa
Public Sector Practice Leader
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dtesta@lockton.com

Benefits



Jeffrey Pichnarcik
Employee Benefits Practice
Leader
860.678.4063
jpichnarcik@lockton.com



David McCluskey
Unit Leader
860.678.4027
mailto:dmccluskey@lockton.com

Compliance



Mark Holloway, J.D., CEBS
Director of Compliance Services
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mholloway@lockton.com

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Director of Marketing &
Communications
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Health Risk Solutions



Karen Amato
Director of Health Risk Solutions
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Actuarial/Pharmacy
Analytics



Kelly Chillingworth
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Pharmacy Analytics
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Data Analytics



Tammy Quinn
Director of Data Analytics
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Benchmarking



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Benchmark Reporting
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Clinical



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Chief Medical Officer
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rleopold@lockton.com

Actuarial Services



Shannon Demaree
Actuarial Services
816.960.9963
sdemarre@lockton.com

HRIS Consulting



**Brad Mandacina, CEBS,
Fellow ISCEBS**
Director of Technology and
Outsourcing
816.751.2374
bmandacina@lockton.com

Please see bios in Appendix A



SERVICES PROVIDED BY LOCKTON

Many factors make Lockton different, but the most important is the passion Lockton Associates have for client service. We focus every day on earning our clients' trust and helping them make their employee benefits programs as effective and efficient as possible by deliver results. Our client retention rate of 96 percent is evidence that we are delivering on that promise.

Perhaps even more important than what we do is how we do it. We have intense focus on client service. It is at the heart of what we do. We have passion for our work. Lockton's energy is hard to describe, but you feel it when you work with us. You benefit from a performance culture that is focused on delivering results. It all adds up to the phrase that's been part of Lockton for decades:

WE LIVE SERVICE!®

The following pages outline the specialty resources who are available every day to assist Stamford in all facets of managing the employee benefit programs. From compliance attorneys, to wellness coordinators, and from actuaries to employee communication specialists, Lockton will be at the ready to provide solutions to every challenge.

LEGAL COUNSEL/COMPLIANCE

Compliance

Lockton maintains in-house compliance attorneys and resources to provide compliance support, analysis and recommendations to ensure all plans are in full compliance with state and federal regulations, statutes, mandates and laws. This includes compliance assistance with areas such as DOL benefit audits, COBRA administration, HIPAA privacy and security requirements, Form 5500s including new mandatory electronic filing requirements (EFAST2), and recent health reform legislation.



Mark Holloway
Director of Compliance Services
816.960.9567
mholloway@lockton.com

Lockton will keep you informed of trends, recent insurance/benefits developments, labor, public sector and legislative changes through newsletters, bulletins, and other venues provided through our internal Compliance Department.

The benefits attorney who supports Lockton Northeast who works directly with Stamford is Mark Holloway. Mark possesses more than 25 years of experience as an attorney, 20 of them as employee benefit specialist. He has extensive experience in dealing with the complex regulatory and other compliance issues that arise under federal and statutory legislation for health and welfare benefit plans.

For a specific compliance issue, we discuss the compliance situation with our client and then notify and discuss it with Mark if we (Lockton):

1. Can exclusively help solve the problem (local core team with specialty attorneys),
2. Can work in conjunction with outside labor/benefit attorney, or
3. Determine it is best for Stamford to work with their outside counsel.

Many times Lockton compliance attorneys can be involved, which helps minimize costs of using outside counsel. In-house compliance services are a value-added service performed for our clients at no additional costs.

The Compliance Services division has access to multiple web-based legal research and analysis

databases in addition to a wide variety of other legal resource materials, and it provides the following support:

- Analysis and advice concerning the full range of employee benefit issues for non-ERISA clients, the tax code, COBRA, HIPAA and—to the extent they implicate employee benefit programs—federal employment discrimination laws (Title VII, FMLA, Americans with Disabilities Act, Pregnancy Discrimination Act, Age Discrimination in Employment Act, etc.), and regulations issued there under.
- Plan document review, drafting, amendment and restatement (health, cafeteria, wrap, and other fringe benefits).
- Review of service agreements with plan administrators, TPAs, 401(k) vendors, etc.
- Plan and procedure audit support for compliance with the Internal Revenue Code, fiduciary duties, and HIPAA Privacy and Security Compliance Services.
- Plan administration form packages and procedures protocols.
- Ad hoc special studies and analyses.
- Provide health plan notice matrix and compliance calendar.

As outlined above, our compliance alerts and benefits/compliance website proactively inform our clients of changing legislation and legal decisions affecting employee benefits.

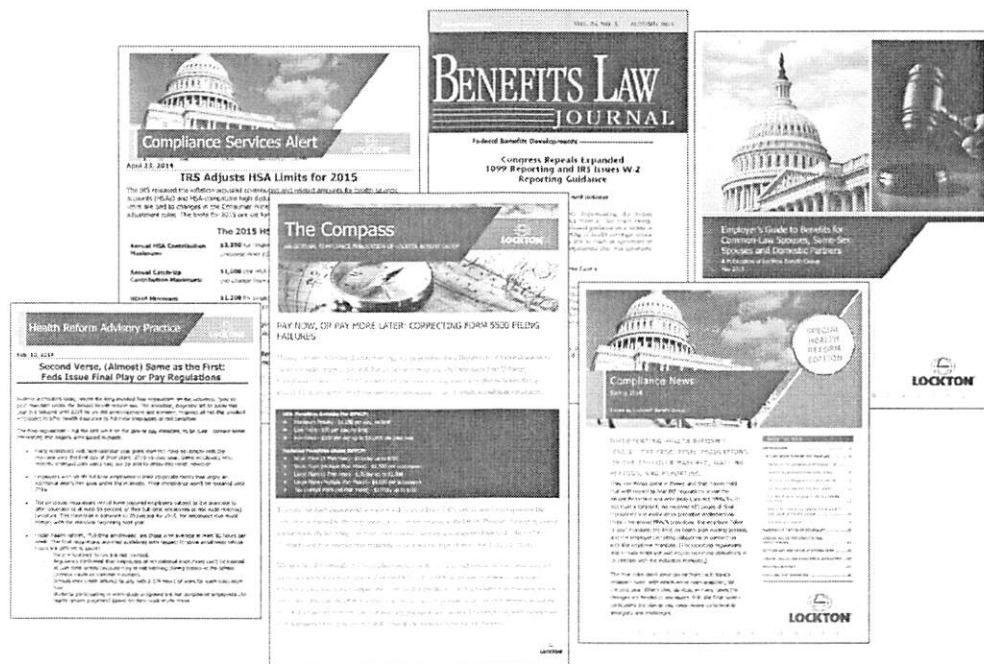
Compliance Education

Lockton continues to make significant investments in resources and intellectual capital to guide our clients through the increasingly complex compliance maze. Lockton tracks and monitors timely information regarding developments in the industry through our membership in several professional and lobbying groups, including the American Benefits Council and the Council of Insurance Agents and Brokers. These groups, multiple subscription services and a wide variety of daily and weekly electronic magazine and web-based list-serve memberships (including, for example, membership on CMS, IRS and DOL email lists) keep our compliance team keenly aware of developments in the state and federal courts, legislatures and regulatory bureaus.

Lockton's Compliance Services supplies clients and the Lockton Associates who serve them with a broad range of compliance-related support for employee benefit issues arising under HIPAA,

COBRA, the Internal Revenue Code, and other select federal and state statutes and regulations. Lockton's attorneys, paralegals, and other professionals will continue to offer Stamford recommendations by way of:

- **Health reform updates:** Comprehensive coverage presented in a variety of electronic formats that provides information, advice, and assistance with analysis and implementation of health reform legislation requirements.
- **WebEx presentations:** Online programs presented by our top experts on topics such as HIPAA privacy training, wellness programs, domestic partner benefits, and health reform, among others.
- **Compliance alerts and e-blasts:** Timely legislative alerts by Lockton experts addressing compliance issues and changing regulations.
- **Compliance newsletters:** Online newsletters that go into greater detail about compliance-related developments and information.
- **Employer guides:** Employer handbooks that cover such diverse topics as wellness, benefits for same-sex spouses and domestic partners, and Medicare benefits.
- **Compliance Calendars and notice matrices:** Tools to pinpoint the many and varied notices and reporting obligations your plan must meet, including deadlines, summary of the notice or report, who receives it, and how they receive it.



HEALTH REFORM ADVISORY PRACTICE

Lockton's Health Reform Advisory Practice helps clients deal with the uncertainties, track critical issues, and prepare their businesses and employees for what comes next. Lockton's integrated consulting on health reform helps you understand the potential impact of health reform on your benefit programs and proactively prepare for change.



Mark Holloway

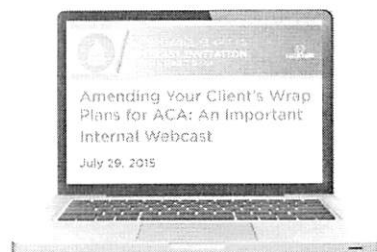
Director of Compliance Services
816.960.9567
mholloway@lockton.com

Our Health Reform Advisory Practice objectives are clear:

- Provide practical information, advice, and assistance with analysis and implementation of health reform requirements.
- Advise Stamford on the integration of health reform requirements with your overall compensation and benefits strategies.
- Provide financial-impact analyses.
- Deliver options and recommendations tailored to Stamford's unique circumstances.
- Offer Stamford comprehensive, integrated solutions by drawing upon expertise from key practice elements.



The full array of market trend and legislative development information we provide to our clients comes in the way of (1) Ad-hoc, periodic and strategic planning meetings; (2) Electronically through white papers, alerts by speciality practice, and employer plan guides; (3) Seminars, webinars and webcasts; and (4) Roundtable sessions, at no extra charge. Many of the webinars and webcast qualify for HR professional credit.



As outlined earlier, one of our most appreciated educational series is our Lockton Client Webinars. A listing of our previous webinars in 2018 are provided below.

March 1, 2018	March 8, 2018	April 12, 2018
Prospecting with the IDEAL Profile	If it sounds too good...FICA tax avoidance schemes you're sure to be pitched	HIPAA privacy and security: It's that time of year again
May 10, 2018	June 13, 2018	July 12, 2018
EMACs, price controls and state-imposed coverage mandates: Health reform shifts back to the states	Association health plans: The final regulations	Everything old is new again: Wellness program compliance in light of AARP v. EEOC

BENCHMARKING

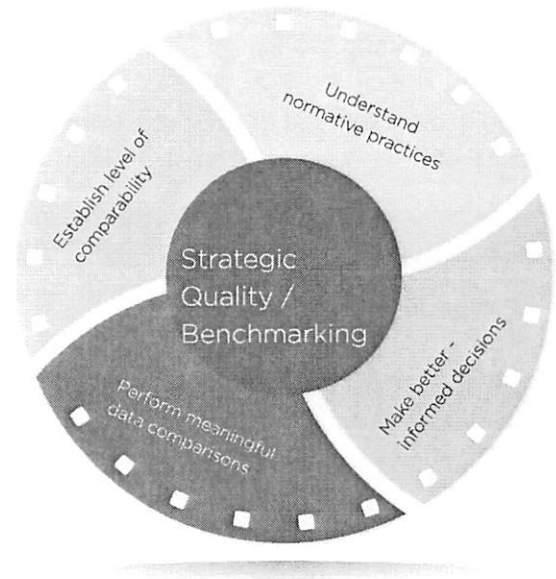
Strategic Quality/Benchmarking



Tellye Hedrick, HIA
Benchmark Reporting
816.960.9742
thedrick@lockton.com

Lockton analyzes benchmarks and market trends from generous samples of public sector employers such as yours to identify opportunities to improve your existing program. We start by reviewing Stamford's key issues while asking thorough questions to understand your needs. Then we design custom reports to accomplish the following:

- Establish level of comparability
 - Costs
 - Plan design features
 - Initiatives (CDHP, marketing, etc.)
 - By region
 - By size
 - By industry
- Understand normative practices
- Make better-informed decisions
 - ▲ Make meaningful comparisons of Stamford's data to Lockton's book of business information



Lockton's book of business reporting offers a variety of benchmarking reports. We compare your plans in real terms, using data analyzed from similar peers in the following areas:

- Medical HMO and PPO plan designs and contributions
- Consumer-driven health plans:
 - HSAs versus HRAs
 - Percent of employers contributing to HSAs
 - Annual employer contribution to HSAs and HRAs
- Medical cost sharing:
 - Employee contributions
 - Employee cost through plan design
 - Employer cost
- Medical HMO and PPO PEPY and PMPY plan costs
- Medical plans fixed costs
- Medical plans by funding type
- Types of medical plans

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- Medical HMO and PPO PEPY and PMPY plan costs
- Medical plans' fixed costs
- Medical plans by funding type
- Types of medical plans

EMPLOYEE COMMUNICATION SERVICES

Lockton understands that timely, easy-to-understand communication pieces enhance the value of the benefit programs. We also understand that the benefit strategies we develop with the Stamford team will only be effective if the employees understand them. Thais Moore, Marketing & Communications Practice Leader, understands the value of proactive and thoughtful communication to ensure employee (and dependent) understanding and appreciation of the Stamford benefit program.

Our communication support begins with a thorough review of your current communication process. Based on our findings and input from Stamford, we will provide a gap analysis to ensure that your employees are receiving all communications necessary to understanding the value of their benefit program.

Next, Lockton will work with Stamford to develop an annual service delivery plan that is effectively integrated with the overall plan strategy. Our typical services include open enrollment materials, ongoing materials for recruitment and new hire orientation, and online communications counsel as required. We can also incorporate wellness related communications into the service delivery plan.



Thais Moore
Mkt. and Comms. Consultant
tmoore@lockton.com



For examples of employee benefit communications, please see [Appendix C](#)

ADDITIONAL COMMUNICATION

Mobile Health

Lockton has developed its own mobile app, Lockton BenefitLink, which delivers real-time information about an employer's benefits, keeping information simple, accessible, and up-to-date

- Comprehensive listings of employer benefit providers
- Coverage categories (Medical, Pharmacy, etc.) are identified and included to-date, with flexibility to add more
- Ability to capture and centralize benefits information like ID cards, group numbers and/or doctor names, etc.



Mobile Text Messaging

Text message or SMS (Short Messaging Service) is an incredibly powerful communication tool that is extremely effective when used properly by marketers. The numbers behind text messaging are staggering:

- Text messaging is still the largest mobile marketing channel by revenue (2011).
- 95-98% of text messages are read within minutes of receipt.
- 86% of consumers send or receive a text message every week.
- 30% of consumers interact with a brand via text message.





On Demand Videos

Simplifies Complex Topics:

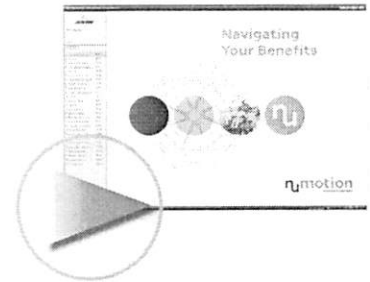
Delivers effective and powerful communications through the power of video.

Measurable ROI:

Stamford can quantify the return of their efforts through built-in feedback mechanisms and data analytics.

Anywhere, Anytime:

Mobile technology enables engagement with employees in many demographics.



Your HSA



SAVE



SPEND



INVEST



HSA Debit Card



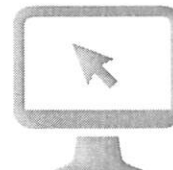
75%

of the world's employees will be millennials by 2020

SMS

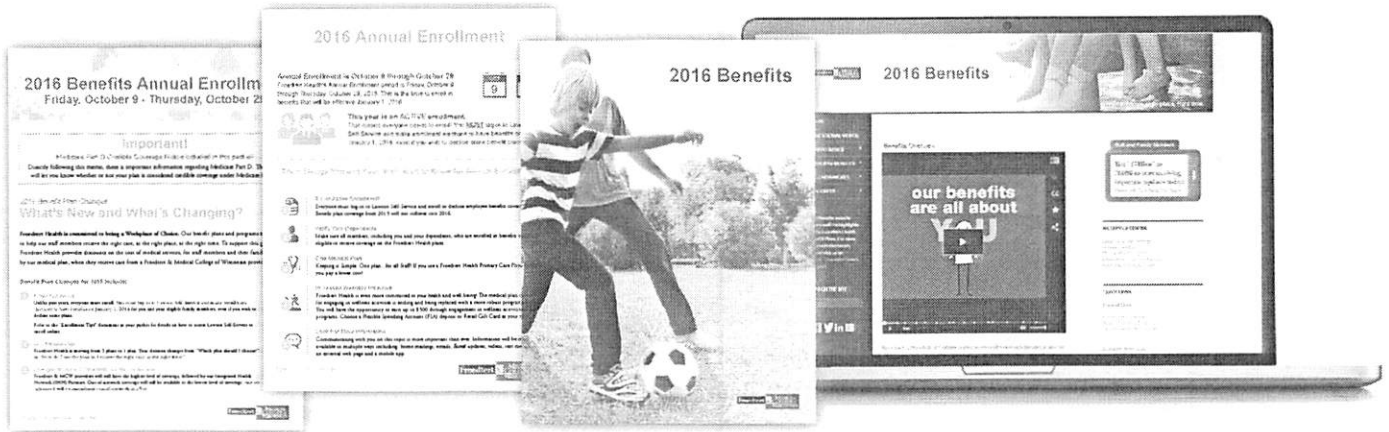
181

the average number of texts per day sent by millennials



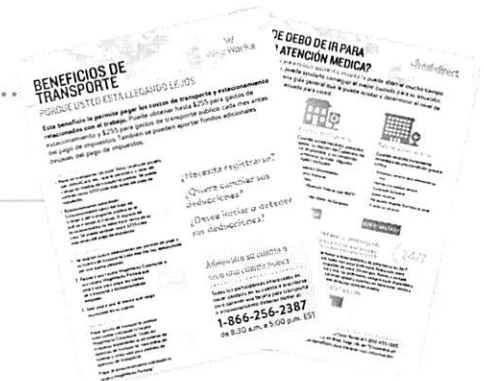
72%

of companies use online HR communications to save the paper



Translation Services

Employees and their dependents understanding Stamford communications is critical for employee engagement. Therefore, Lockton utilizes translation services for our clients. This allows our clients to clearly articulate their message to their entire member population.



HEALTH RISK SOLUTIONS

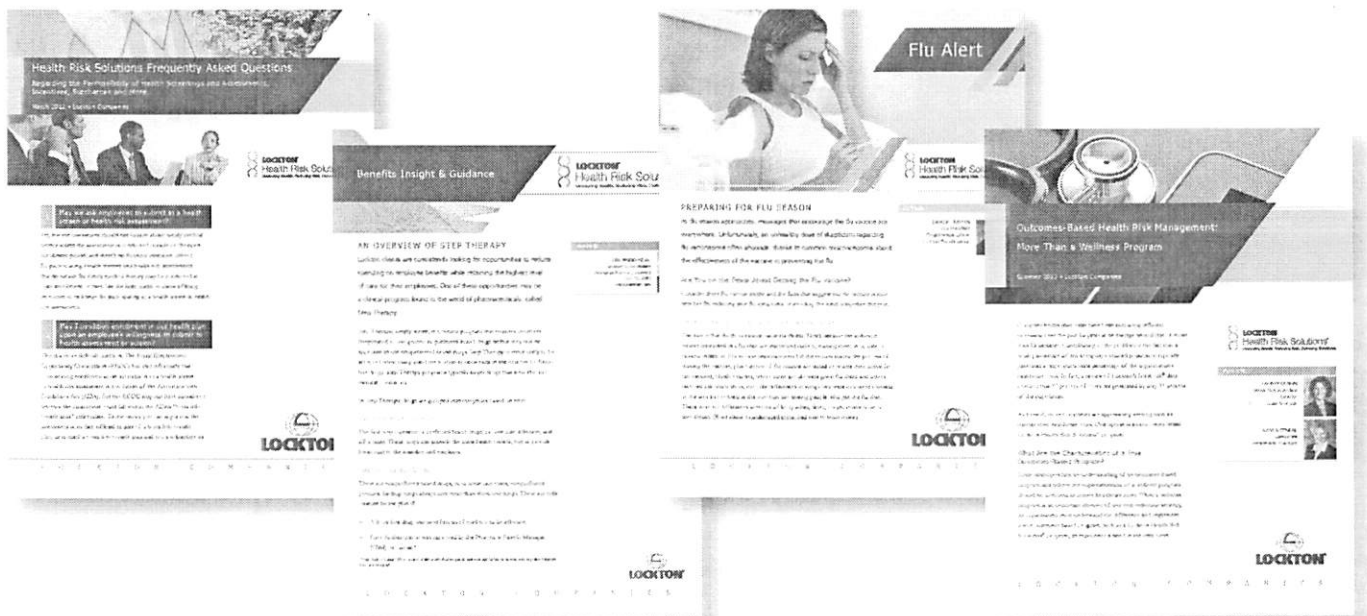
Lockton has a dedicated Director of Health Risk Solutions to oversee our client's wellness programs. Our consultants have developed hundreds of wellness programs involving ongoing evaluation and refinement for clients, some for more than five years.



Karen Amato
Director of Health Risk Solutions
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We use our Lockton Best Practices, national expertise, specialty resources (clinical reporting and data analytics professionals) and tools/reports to monitor health plan performance from a variety of perspectives. This multi-disciplinary team applies years of experience in actuarial services, employee benefits, and clinical settings along with a passion for data analytics and technology to build data exhibits that provide meaningful measurement. These experts work closely with the entire HRS team to help interpret data and predict potential outcomes, and this service is provided at no additional cost.

Lockton's approach to health and wellness involves designing multi-year strategies that build on experience, results and evolving health/cost trends. We design our strategies using a



comprehensive set of data sources, such as reports on health plan cost and utilization, Lockton's InfoLock, workers' comp and disability, and an organization's culture, industry, and overall corporate goals. Once the organization's high-impact targets are selected, metrics that best monitor the targets are chosen. The performance metrics will then be monitored and compared to baseline, wellness program goals and benchmarks. For example, if reducing emergency room (ER) utilization is selected as a strategy, measures might include ER visits per 1000, urgent care visits per 1000, number of potentially avoidable visits, number of members using the ER two or more times a year, number of weekend visits, and/or number of health plan outreach discussions with members who are high utilizers. Measures can be based on performance, outcomes, quality, participation, or education.

valued-based plan design alternatives.



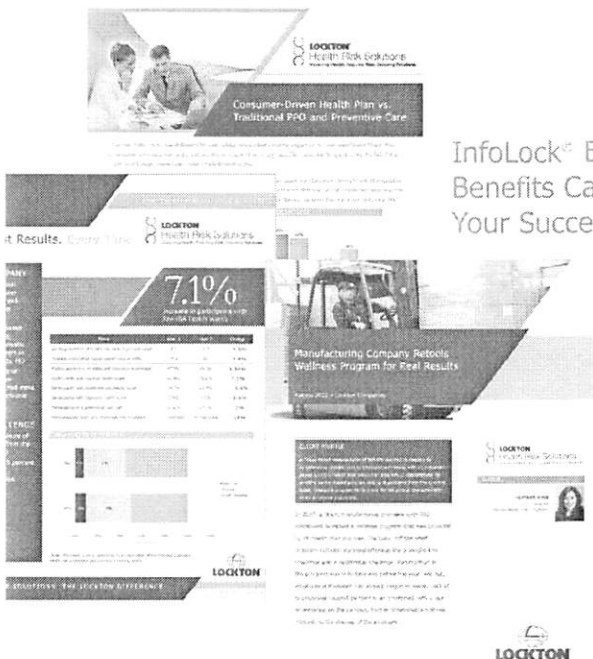
DATA ANALYTICS

InfoLock® Employee Benefits is Lockton's proprietary claims-analysis system, developed with our partner SCIO. Lockton's data-analysis team and medical directors use this unique program to help you visualize trends. Our analysts import data (medical, pharmacy, eligibility, and health risk assessment information) from more than 60 carriers, apply a Q&A process to check for validity and consistency, and then apply clinical risk models to help identify potential participants and Lockton Health Risk Solutions® systems.



Tammy Quinn
Director of Data Analytics
InfoLock®
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tquinn@lockton.com

The goal of this enterprise solution is to identify possible trends in chronic disease, high-cost claims, and utilization patterns. Armed with this information, Lockton can recommend strategic, focused wellness- and disease-management initiatives while optimizing benefit-plan design with an eye toward saving Stamford's dollars spent on healthcare.



Lockton has access to many national employee benefit surveys and benchmarking tools both from internal and external resources. BenefitPoint, Lockton's benchmarking tool, contains our entire book of business, which includes more than 3,000 employee medical plans. "Real Time" benchmarks can be reported by plan type, group size, industry, and client location, or any combination thereof. Our database is the most up-to-date in the industry and is updated quarterly. Our benchmarking is industry specific – we can develop a national service provider report.

We provide benchmarks on individual plan design attributes such as deductibles, copays, coinsurance, and HSA/HRA design. BenefitPoint is unique in that Lockton's actuarial team has combined all individual plan design attributes to develop benchmarks based on total benefit value.

We benchmark many types of fees and costs — employee contributions, employer contributions, employee share of premium, and fixed costs, including administrative fees for self-funded plans. A unique feature of our tool is our ability to benchmark the portion of total plan cost the employee pays through plan design. This measure can be invaluable in evaluating current plan designs and in understanding the employee's true out-of-pocket cost.

In addition to BenefitPoint, we readily access and provide benchmarking information to our clients from a variety of other sources. Access to a variety of sources provides our clients the broadest possible spectrum of benchmarking information to support their decision making and gives them a thorough understanding of the positioning of their own plan against industry peers, regional norms, and U.S. employers.

Our proprietary claims analytic tool, InfoLock®, provides additional benchmarking and normative data with respect to utilization trends for six million member lives associated with large, experience-rated and self-funded employers around the United States. These benchmarks include chronic condition prevalence, average cost data for 30 chronic conditions, utilization statistics and associated member monthly claim costs. Categories of low compliance can then be shared with the disease management vendor to ensure steps are taken to improve compliance and ultimately reduce frequency and/or degree of high-cost claimants.

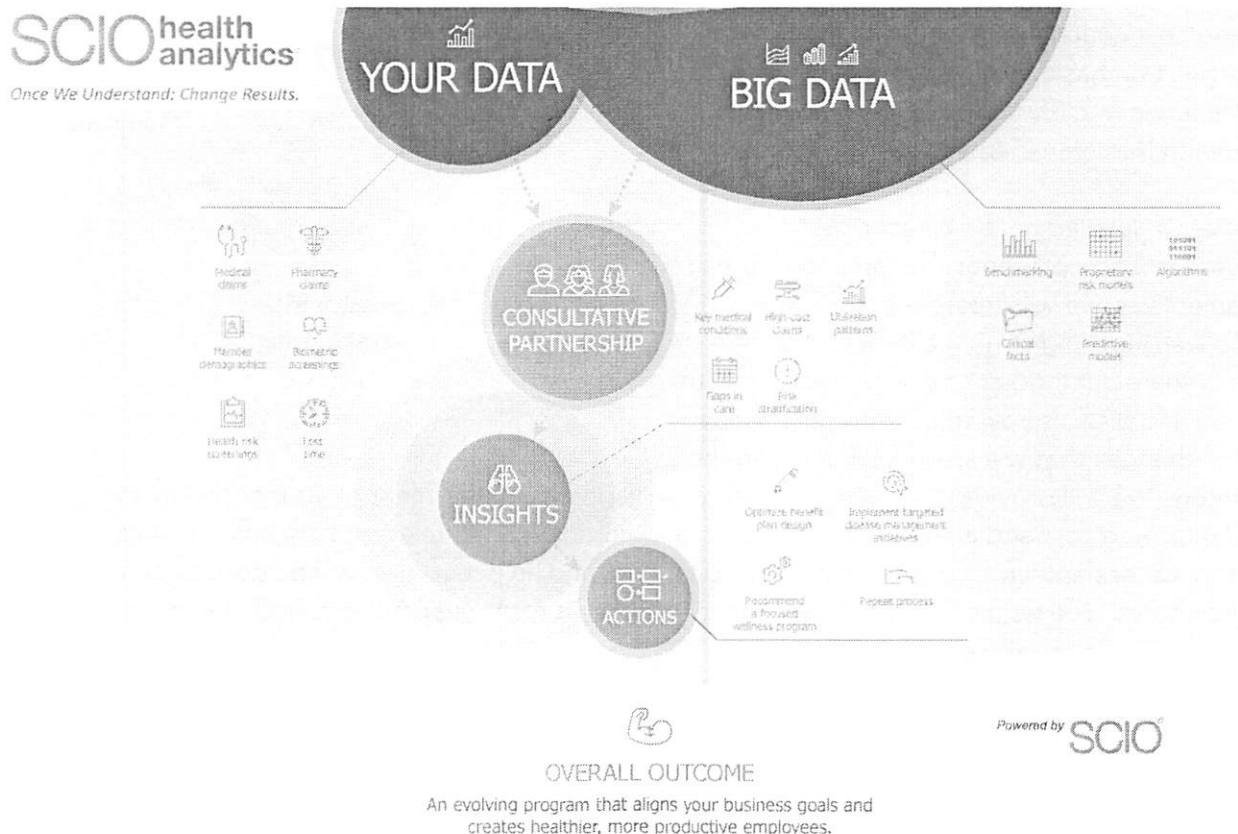
InfoLock Data Warehouse

Lockton listens to our clients' needs and then builds a platform to support them. Much has changed in the past decade as technology and data are driving business decisions more than ever. Lockton has made a considerable investment in technology and data driven solutions, the largest among our competitors. Our company structure and entrepreneurial culture allow us to be more agile and flexible in executing cutting-edge and forward-thinking solutions.

This need for data driven solutions was the impetus for InfoLock.

Our proprietary claims analytic tool, InfoLock®, provides additional benchmarking and normative data with respect to utilization trends for six million member lives associated with large, experience-rated and self-funded employers around the country. These benchmarks include chronic condition prevalence, average cost data for 30 chronic conditions, utilization statistics and associated member monthly claim costs. Categories of low compliance can then be shared with the disease management vendor to ensure steps are taken to improve compliance and ultimately reduce frequency and/or degree of high-cost claimants.

Lockton has access to a variety of external sources (including well known healthcare surveys) to provide our clients the broadest possible spectrum of benchmarking information to support their decision making and provide a thorough understanding of the positioning of their own plan against industry peers, regional norms, and U.S. employers.



Creative Consulting Solutions

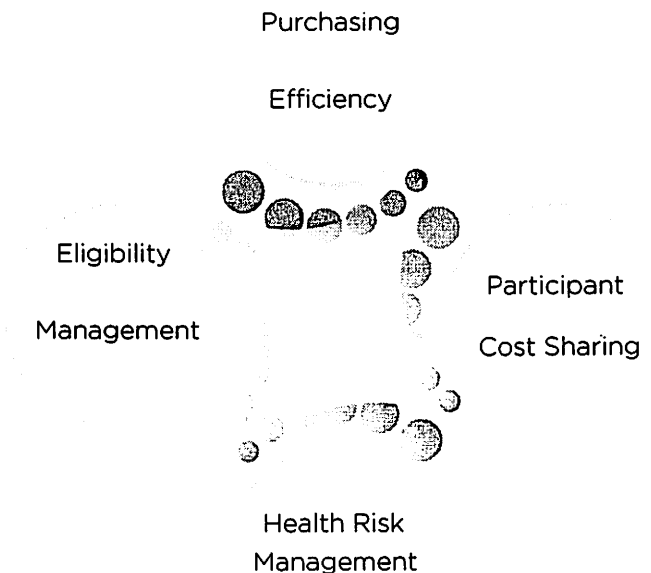
Employers everywhere are struggling to develop programs that will mitigate increases in healthcare costs, yet enable them to attract and retain valuable talent. The ACA legislative requirements have added significant exposures to Employer Health Plan costs, as well as, compliance and administrative burdens.

Lockton consultants work with our clients to develop strategies that provide greater financial control and improved administrative efficiencies for their programs. We look at all opportunities for efficiency including marketing the plans, bundling/unbundling lines of business such as stop loss or pharmacy, collective bargaining language and strategies, and funding methodologies.

Traditional responses to plan management involve benchmarking and cost-shifting - reducing plan benefits, increasing employee contributions, or a combination of the two.

Lockton's comprehensive strategies for benefit program development and cost containment arise from four areas: Purchasing Efficiency, Eligibility Management, Participant Cost Sharing, and Health Risk Management.

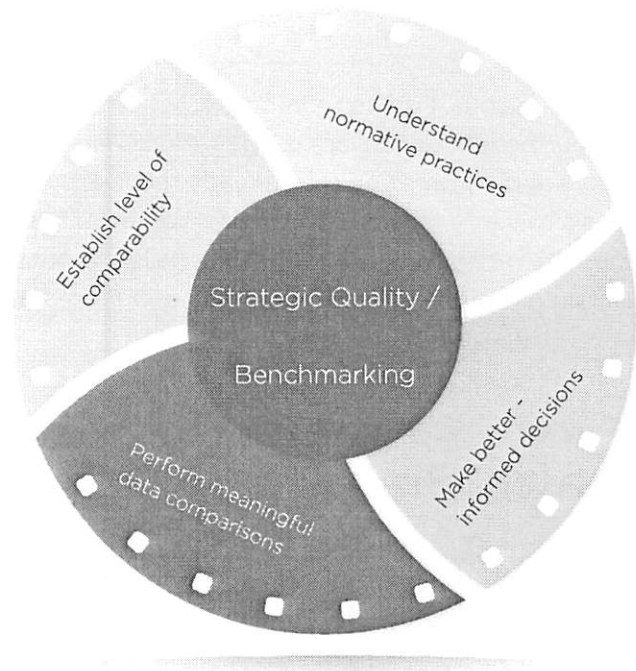
After a detailed review of your past performance, present situation and future objectives, we will create a 3- to 5-year forward-looking strategic benefit plan. We will share our industry trend projections with you and discuss how to best prepare today for changes that will affect your plans in the future. We will provide a situation analysis and diagnostic assessment of your program, including a thorough cost and plan design evaluation and comparison to relevant benchmarks. Alternative approaches and emerging trends will be identified, and an action plan will be developed and monitored. The goal of this phase will be to establish a multi-year strategy and objectives for both the current year as well as future years.



Strategic Quality/Benchmarking

Lockton analyzes benchmarks and market trends from generous samples of public sector employers such as yours to identify opportunities to improve your existing program. We start by reviewing Stamford's key issues while asking thorough questions to understand your needs. Then we design custom reports to accomplish the following:

- Establish level of comparability
 - Costs
 - Plan design features
 - Initiatives (CDHP, marketing, etc.)
 - By region
 - By size
 - By industry
- Understand normative practices
- Make better-informed decisions
 - ▲ Make meaningful comparisons of Stamford's data to Lockton's book of business information



Lockton's book of business reporting offers a variety of benchmarking reports. We compare your plans in real terms, using data analyzed from similar peers in the following areas:

- Medical HMO and PPO plan designs and contributions
 - Employee cost through plan design
 - Employer cost
- Consumer-driven health plans:
 - HSAs versus HRAs
 - Percent of employers contributing to HSAs
 - Annual employer contribution to HSAs and HRAs
- Medical cost sharing:
 - Employee contributions
- Medical HMO and PPO PEPY and PMPY plan costs
- Medical plans fixed costs
- Medical plans by funding type
- Types of medical plans

ACTUARIAL/UNDERWRITING

Keeping an eye on your bottom line is crucial as costs rise and plan auditing becomes tighter and more scrupulous. Lockton's in-house Actuarial Services provides Stamford additional confidence that your benefit dollars are used productively. In addition to any accountability reporting from vendors and carriers you may already receive, our Actuarial Services team provides independent analysis to verify results and identify opportunities to reduce costs. Lockton's experts are ready to partner with you to address each challenge presented by health reform so your company can maintain a healthy benefits bottom line. Our on-staff actuaries continually suggest money-saving strategies in the ever-changing market.

Health Plans

For Stamford's health plan, our actuarial experts will assist with rate setting and reserving, funding estimates and forecasting, and other budget support; plan design and contribution modeling; network discount and access analysis; detailed claim analytics, utilization analysis, and cost drivers; pharmacy analytics, funding strategy and risk management; evaluation of stop loss levels and terms; health reform financial modeling; and financial analysis of private exchange alternatives for active employees and retirees.

Lockton has developed a wealth of actuarial best practices to help make your business better.



UNDERWRITING

Maximizing Insurance Underwriting Results

One of Lockton's strongest attributes is our ability and expertise to negotiate with insurance carriers to obtain maximum value for our client's benefit. Lockton not only has access to the most competitive markets, but we also enjoy an unmatched reputation for honesty and professionalism. We always work on behalf of our clients' best interests. We do not favor any one insurance carrier, nor do we have special arrangements with insurance carriers that jeopardize our objective counsel and ability to provide the most competitive rates for our clients.

The formula to ensure employers receive the most competitively priced Health & Welfare insurance programs (including lowest possible administrative fees and stop loss insurance premiums) is comprised of many factors.

- National and regional purchasing power
 - Strong carrier and TPA relationships (sales underwriting, actuarial underwriting, broker and carrier executives)
 - Market competition through prudent and professional RFP process that represents Stamford well in the market
 - Savvy and effective brokerage team negotiation
 - Real time benchmark information on carriers and stop loss contracts
 - Extensive underwriting and actuarial expertise
 - Stellar consulting reputation in the marketplace
 - Detailed large-claim analysis with clinical counsel (with medical directors)
 - Stop loss purchasing pools including multiyear rate caps
 - Stop loss simulation modeling to select optimal stop loss levels
 - Specialty Stop loss practice and documented stop loss best practices
 - Overall claim analytics and disease management stratification to assess Risk Morbidity Index
 - Incorporating Health Risk Management strategies (including Morbidity Risk Index) into rate negotiations
- For any renewal and placement, the major factor or technique instrumental in obtaining final rate relief from the insurance underwriter could be any one of the factors outlined above. It is paramount that the consultant who represents Stamford excels in each component identified above and uses a team approach.

Lockton will work with Stamford to determine the nature and frequency of claim analysis most appropriate for your size (i.e. credibility) and funding mechanism. Based on this discussion, we will develop customized reporting specific to your content and timing needs, and we will gather the necessary data from your insurers and administrators to populate this report. In addition to providing data, Lockton will provide meaningful analysis of this information on a monthly, quarterly or semi-annual basis to help you better understand the cost drivers in your programs.

In addition to what was outlined earlier, for underwriting and funding analysis, we develop tools specific to each of our clients to measure the efficiency of the funding program based on plan designs and funding methodology. Lockton has expansive experience with many different types of plan funding as well as evaluating the financial impact of various funding programs including insured, retention accounting, minimum premium, and self-funded plans. In addition, Lockton's actuarial resources team is familiar with funding types and will make recommendations to Stamford regarding funding and stop loss levels.

Lockton Companies provides actuarial consulting support as part of our standard services. Incorporating Group Health Actuaries as part of the consulting/brokerage team benefits our clients in the areas of carrier rate negotiations, plan design modeling; employee contribution and participation scenarios; cost analysis and trend development, budgeting and cost projections, financial support for strategic analysis and long term planning, management presentations, risk management and funding analysis, modeling stop loss scenarios, cost saving analysis, and many other evolving needs.

Lockton's actuarial resources, support tools and proprietary software are provided at no additional cost. This may save significant fees in lieu of engaging an outside consulting actuary, but more importantly missing out on cost savings attributed to carrier rate negotiation support, shifting of risks/liability, large claim management activities, alternative funding analysis including stop loss modeling, prescription drug analytics, network evaluation, and many other plan management and design opportunities.

Funding strategies and alternatives are evaluated regularly to be sure that our clients are taking advantage of the latest in available funding vehicles including creative partially funded strategies. We are committed to providing the financial information and support required to help our clients make the most informed decisions, which includes attendance and presentation at management meetings to educate our clients on the risk reward potential for funding alternatives.

Lockton's actuarial & underwriting expertise is used to support the needs of our clients in many ways including:

- Funding Strategy and Risk Management
- Medical Cost and Trend Analysis
- Rate Development and Projections (incl. COBRA Certification)
- Funding Estimates, Forecasting and Other Budget Support
- Actuarial Valuation of Benefit Plan Changes
- Traditional, CDHP/HRA/HSA, and detailed changes to a specific benefit
 - Including estimates for behavior/utilization and participation changes
- Employee Contribution Modeling
- Additional Renewal/Marketing Support
 - Rating methodology and assumption review/discussions
 - Experience and creditability analysis/negotiations
 - High claimant analysis/mitigation strategies
 - Internal pooling analysis
 - Demographic and eligibility analysis
 - Health Reform cost adjustments analysis
 - Health Reform cost impact valuation
 - ▲ Employer contribution
 - ▲ Employee contribution
- IBNR Reserve Calculation/Certification
- COBRA Rate Analysis and Actuarial Relativity.
- Stop Loss Analysis and Counsel (for self-funding)
 - Estimating the difference in risk between various stop loss levels
 - Perform stop loss simulation modeling to select optimal individual stop loss level
 - Providing the expected number and dollar of claims above the specific
 - Providing the probability that aggregate claims will exceed various levels
- Network Evaluation
 - Network Discount Comparison
 - Network Disruption Analysis
 - Measure Quality of Hospitals
- Prescription Drug Best Practices, Claim Analysis and Plan Design Valuations
 - Lockton "Optimal" Contract Provisions
 - Detailed claim analytics
 - Drug mix analysis
 - Specialty Pharmaceuticals
 - Plan management metrics
 - Pricing Terms (discounts, rebates, dispensing fees, generic dispensing rates, audit provisions)
 - Drug interaction protocols

- Saving opportunities/value based decisions
- PBM procurement specialists
- Detailed Analysis of Claims Data
 - Using the client's data to uncover problem areas and solutions, to measure the impact of plan changes on employees, to estimate potential selection, etc.
- Multi-option Modeling
 - Budget projections/contribution strategies that account for the relative value between plans, enrollment and selection by plan
- Health Risk Management Support
- Medicare Part D actuarial attestation and claims submission
- Retiree Medical Counsel
- Executive Presentations

COST PROJECTIONS

Lockton's in-house actuaries incorporate a combination of industry normative assumptions and actual client experience when calculating funding rates and projecting budgets. As a part of our on-boarding process, Lockton conducts an in-depth meeting with the benefits and finance departments to gain a complete understanding of the budget process, allocation, and other financial concerns related to your benefit programs. Lockton then develops cost projections for budgeting purposes and continues to work on an ongoing basis with the benefits and finance departments in tracking cost projections compared to budget.

STOP LOSS MODELING

Given the complexities of the stop loss markets, increased scrutiny around high-cost claims, and resource demands due to healthcare reform, Lockton has added stop loss specialty resources. We incorporate best practices around renewal marketing and implementation and post-placement services for our clients, and we are leaders in the industry by adding stop loss clinical staff to manage high-cost claims and identify claim savings opportunities.

Our stop loss analysis and counsel for self-funding incorporates Monte Carlo simulation software that estimates the difference in risk between various stop loss levels; helps select optimal individual stop loss levels; provides expected number and dollar amount of claims above the ISL level; and provides the probability that aggregate claims will exceed various levels.

Time period of projection: 1/1/2011 - 12/31/2011
 Number of Employees: 500
 Number of members (estimated): 1250

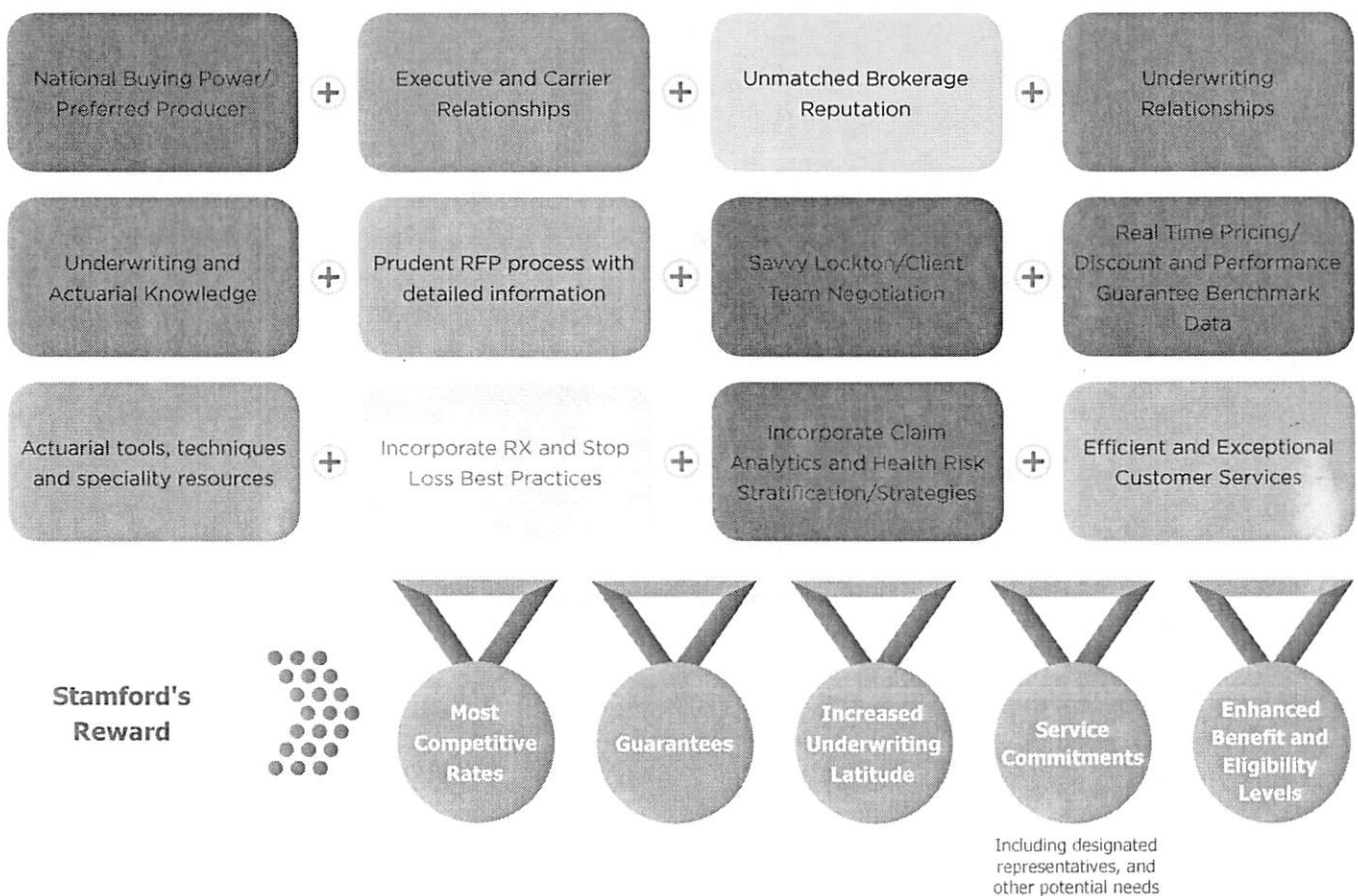
Comparison of Quotes			
	Without Stop Loss	\$100,000	\$125,000
What is the plan's expected cost under the various options?			
Expected Claims (Paid by Plan after specific and aggregate)	\$4,493,467	\$4,001,979	\$4,091,982
Specific Premium		\$652,962	\$625,536
Aggregate Premium		\$0	\$0
Total Expected Cost (Expected Claims + Stop Loss Premium)	\$4,493,467	\$4,654,940	\$4,617,519
% of simulations this option "wins"		22%	6%
Premium savings		\$0	-\$127,426
Additional Expected Claims		\$0	\$99,005

Specific Expected Claims		
	\$100,000	\$125,000
How many claims can the plan expect to exceed the specific deductible?		
Number of Claims Exceeding Specific Deductible		
Average	4.4	3.2
Minimum	0.0	0.0
25th Percentile	2.0	1.0
75th Percentile	6.0	4.0
Maximum in 1,000 trials	10.0	16.0
How many dollars do we expect to be reimbursed by the stop loss carrier?		
Total Dollar Amount of Claims Exceeding Specific Deductible		
Average	\$489,722	\$394,152
Minimum	\$0	\$0
25th Percentile	\$127,000	\$67,375
75th Percentile	\$657,500	\$526,500
Maximum in 1,000 trials	\$9,152,000	\$8,927,000

Methodology
 Lockton used a Monte Carlo simulation model to project 10000 scenarios of paid claims both in aggregate as well as specific. The average of those 10000 trials and the min/max and percentiles are shown above. This methodology allows us to see the variance around the mean in analyzing the quotes. The simulation starts with a claim probability distribution annual claims for over 1 million members.

Lockton Negotiation Effectiveness

The following graphic details Lockton's Marketing/Negotiation Advantage and why we believe our position and leverage in the market leads to optimal results:



Health Insurance Markets

Lockton places a great deal of business with all of the major carriers across the country. Our most recent annual premium placements are as follows:

Medical Carriers		
Aetna	Anthem/WellPoint	Blue Cross and Blue Shield
\$563,468,091	\$518,879,850	\$3,332,976,707
Cigna	United Healthcare	ConnectiCare
\$871,066,409	\$1,699,286,145	\$9,892,820
Life/Disability Carriers		
Aetna	CIGNA	Sun Life
Met Life	United Healthcare	Anthem Life
Fort Dearborn	Reliance Standard	Standard
Lincoln Financial	Mutual of Omaha	UNUM
Hartford	Prudential	Transamerica
Principal	PacifiCare	Boston Mutual
Guardian	ING	
Dental Insurance Carriers		
Aetna	Ameritas	United Healthcare
United Concordia	CIGNA	Delta
Excellus BCBS	Anthem	Metropolitan
Guardian	Standard	Sun Life
Principal		
TPA's		
Zenith	Meritain	POMCO
CoreSource	Diversified	UMR
FiServ	Capital Administrators	AmeriBen Solutions
Great West Healthcare		

PHARMACY ANALYTICS

Pharmacy Analytics



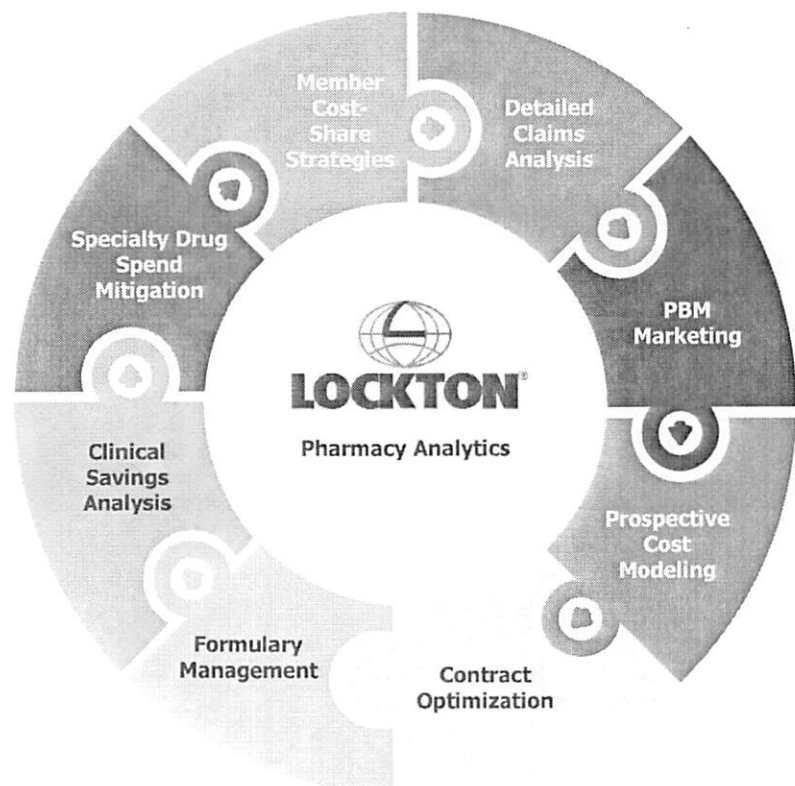
Kelly Chillingworth
Senior Pharmacy Consultant
816.751.2520
kchillingworth@lockton.com

In light of ever-increasing pharmaceutical costs and the growing use of specialty medications, understanding prescription-drug trends is in every company's best interest. The prescription-benefits industry is in a state of flux. Lockton can assist Stamford in driving waste from your pharmacy program through pharmacy diagnostics.

A Lockton pharmacy diagnostic provides a 360-degree review of your pharmacy benefit. We analyze all components of your pharmacy program:

- Pricing
- Contract
- Plan design
- Clinical

Our deep analysis is based on your actual claims data—each and every drug. We uncover areas of hidden risk and show you opportunities for savings. Armed with the results of the pharmacy diagnostic, Lockton will then work with you to develop a strategic plan.





ADDITIONAL WORK

Lockton recommends no additional work beyond the original scope of services contained in the RFP.



EVIDENCE OF INSURANCE

If selected, Lockton will provide evidence of insurance coverage per the requirements in the RFP.



SUITS FILED

There have not been any suits filed, judgements entered or claims made against Lockton during the last five years. Lockton has not been suspended from bidding or entering into any government contract.



UTILIZATION REPORT FORMAT

Please refer to Appendix 2 for a Sample Utilization Report.

Please note that Lockton customizes reporting to meet the needs of each individual client.



CONFIDENTIALITY POLICY

Lockton's employee benefits brokerage practice maintains a privacy and security policy pursuant to which Lockton employs reasonable prophylactic measures to ensure the confidentiality, integrity and accessibility of all confidential information related to our clients and their employees, whether the information be financial, medical or otherwise personal.

Lockton maintains comprehensive guidelines for the protection of confidential information, and provides initial and annual refresher training for employees who may have access to HIPAA-protected information, concerning the obligation to maintain the confidentiality of the information, and reasonable strategies employees should utilize to secure the information. The policy embraces the receipt, use, transmission, storage and disposal of PHI, in hardcopy and electronic form.

In addition, Lockton's Information Technology Department works closely with Lockton's internal compliance and operations departments to ensure that all reasonable and appropriate measures are employed to protect the confidentiality of electronic confidential information. For example, Lockton employs effective firewall technology to protect its internal network, laptop encryption technology, secure internet portals to facilitate the electronic exchange of electronic PHI, and is currently working to implement protocols for the encryption of even routine email traffic between Lockton Associates and their clients.

Lockton has included in its privacy and security policy, and its workplace training, guidelines issued by the Centers for Medicare and Medicaid Services, related to use of portable media devices to transport sensitive information. Thus, workforce members have been trained on the need to avoid use of such devices except where absolutely necessary, and where use of such devices is necessary, to exercise extreme caution to safeguard the devices.

APPENDIX

FEE PROPOSAL

Our pricing is based on our experience with similarly sized public sector clients. Our goal is always to find a mutually acceptable level of compensation.

While Lockton has provided a lump sum fee, we are also willing to discuss alternative fee arrangements including, but not limited to, pricing that separates the marketing fee from the lump sum fee, or hourly pricing for attendance at collective bargaining sessions. Again, our goal is to provide world-class service at a mutually agreeable level of compensation.

My proposal to provide Health Care Advisory Consultant is as follows:

Cost/Year One:	<u>\$125,000</u>
Cost/Year Two (Option):	<u>\$125,000</u>
Cost/Year Three (Option):	<u>TBD</u>
Total Cost:	<u>\$250,000</u>

If Lockton is chosen as Stamford's Health Care Advisory consultant, we would like to engage in a dialogue around the on-site health care professional in order to better understand the scope of service needed by the City. We would work with the City to determine a mutually agreed on amount for any potential additional fee.



ABC Company

Plan Equivalents Evaluation (Budget) Report

Cost Inflows**Budgeted Plan Premium Equivalents and Employee Contributions**

Four-Tier Rate Structure	Equivalents	EE Cost
Employee Only	\$297.00	\$40.04
Employee + Spouse	\$653.41	\$180.17
Employee + Child(ren)	\$534.61	\$145.59
Employee + Family	\$891.03	\$220.21

Fixed Cost Outflows**Administration Fees**

ASO Fees

\$35.97 PEPM

PPO Plan Total: \$35.97 PEPM**Stop Loss Premiums (Specific and Aggregate Stop Loss)****Specific Stop Loss: \$150,000**

Rate \$44.79 PEPM

Aggregate Corridor: 125%

Rate \$2.52 PEPM

Month	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family	Enrolled Employees	Premium Equivalents	Cumulative Premium Equivalents	Admin Cost	Stop Loss Premium	Total Net Claims (1)	Total Plan Costs	Cumulative Total Plan Costs	Monthly Funded Loss Ratio	Cumulative Funded Loss Ratio
Jan-11	860	134	131	252	1,377	\$637,550	\$637,550	\$49,531	\$65,146	\$489,743	\$604,419	\$604,419	94.8 %	94.8 %
Feb-11	872	138	135	259	1,404	\$652,104	\$1,289,654	\$50,502	\$66,423	\$557,937	\$674,862	\$1,279,281	103.5 %	99.2 %
Mar-11	855	141	133	258	1,387	\$647,055	\$1,936,709	\$49,890	\$65,619	\$467,360	\$582,869	\$1,862,150	90.1 %	96.2 %
Apr-11	866	138	134	260	1,398	\$650,678	\$2,587,387	\$50,286	\$66,139	\$473,835	\$590,260	\$2,452,410	90.7 %	94.8 %
May-11	874	135	136	260	1,405	\$652,163	\$3,239,550	\$50,538	\$66,471	\$514,703	\$631,711	\$3,084,122	96.9 %	95.2 %
Jun-11	888	136	133	267	1,424	\$661,608	\$3,901,158	\$51,221	\$67,369	\$492,688	\$611,279	\$3,695,400	92.4 %	94.7 %
Jul-11	888	134	134	271	1,427	\$664,400	\$4,565,558	\$51,329	\$67,511	\$463,238	\$582,078	\$4,277,479	87.6 %	93.7 %
Aug-11	898	139	135	276	1,448	\$675,627	\$5,241,184	\$52,085	\$68,505	\$564,900	\$685,490	\$4,962,968	101.5 %	94.7 %
Sep-11	903	142	137	276	1,458	\$680,141	\$5,921,325	\$52,444	\$68,978	\$507,898	\$629,320	\$5,592,288	92.5 %	94.4 %
Oct-11	903	139	133	280	1,455	\$679,607	\$6,600,932	\$52,336	\$68,836	\$498,475	\$619,647	\$6,211,935	91.2 %	94.1 %
Nov-11	912	139	137	281	1,469	\$685,309	\$7,286,241	\$52,840	\$69,498	\$642,459	\$764,798	\$6,976,733	111.6 %	95.8 %
Dec-11	940	142	138	290	1,510	\$704,139	\$7,990,380	\$54,315	\$71,438	\$741,512	\$867,265	\$7,843,998	123.2 %	98.2 %
YTD	10,659	1,657	1,616	3,230	17,162	\$7,990,380		\$617,317	\$811,934	\$6,414,747	\$7,843,998		98.2 %	

How do budgeted plan equivalent rates compare to actual plan costs? **1.8% Overfunded**

(1) Reflects the sum of all medical and Rx claims minus stop loss reimbursements.

SAMPLE UTILIZATION REPORT



ABC Company Plan Trend Analysis

Enrollment Month (1)	Enrolled Employees (1)	Rolling 12 Enrolled Employees (1)	Paid Claims Month	Gross Medical Paid Claims	Claims Over Stop Loss (2)	Rx Paid Claims	Total Net Claims (3)	Rolling 12 Total Net Claims	Annual Claim Cost Per Enrolled Employee (4)
Nov-09	1,303	15,624	Jan-10	\$348,330	\$0	\$97,844	\$446,174	\$5,927,900	\$4,553
Dec-09	1,284	15,666	Feb-10	\$297,854	\$0	\$76,571	\$374,425	\$5,631,432	\$4,314
Jan-10	1,304	15,642	Mar-10	\$390,395	\$0	\$86,894	\$477,290	\$5,711,027	\$4,381
Feb-10	1,321	15,634	Apr-10	\$382,257	\$0	\$73,324	\$455,581	\$5,749,749	\$4,413
Mar-10	1,325	15,646	May-10	\$407,025	\$0	\$83,324	\$490,349	\$5,816,133	\$4,461
Apr-10	1,334	15,690	Jun-10	\$323,625	\$0	\$67,348	\$390,972	\$5,762,597	\$4,407
May-10	1,329	15,739	Jul-10	\$460,023	\$0	\$108,402	\$568,424	\$5,827,801	\$4,443
Jun-10	1,347	15,806	Aug-10	\$441,330	\$0	\$83,803	\$525,133	\$5,931,559	\$4,503
Jul-10	1,357	15,867	Sep-10	\$420,180	\$0	\$72,408	\$492,588	\$5,842,441	\$4,419
Aug-10	1,358	15,911	Oct-10	\$376,221	\$0	\$101,156	\$477,377	\$5,758,455	\$4,343
Sep-10	1,366	15,933	Nov-10	\$395,640	\$15,242	\$65,065	\$445,463	\$5,623,022	\$4,235
Oct-10	1,357	15,985	Dec-10	\$369,831	\$17,105	\$105,579	\$458,304	\$5,602,081	\$4,206
Nov-10	1,352	16,034	Jan-11	\$408,484	\$0	\$81,258	\$489,743	\$5,645,650	\$4,225
Dec-10	1,360	16,110	Feb-11	\$480,411	\$0	\$77,525	\$557,937	\$5,829,162	\$4,342
Jan-11	1,377	16,183	Mar-11	\$366,527	\$0	\$100,832	\$467,360	\$5,819,232	\$4,315
Feb-11	1,404	16,266	Apr-11	\$373,300	\$0	\$100,535	\$473,835	\$5,837,485	\$4,307
Mar-11	1,387	16,328	May-11	\$418,935	\$0	\$95,768	\$514,703	\$5,861,839	\$4,308
Apr-11	1,398	16,392	Jun-11	\$382,585	\$0	\$110,103	\$492,688	\$5,963,555	\$4,366
May-11	1,405	16,468	Jul-11	\$371,987	\$0	\$91,250	\$463,238	\$5,858,368	\$4,269
Jun-11	1,424	16,545	Aug-11	\$468,385	\$0	\$96,515	\$564,900	\$5,898,135	\$4,278
Jul-11	1,427	16,615	Sep-11	\$400,479	\$0	\$107,419	\$507,898	\$5,913,445	\$4,271
Aug-11	1,448	16,705	Oct-11	\$390,743	\$0	\$107,732	\$498,475	\$5,934,543	\$4,263
Sep-11	1,458	16,797	Nov-11	\$505,690	\$0	\$136,769	\$642,459	\$6,131,539	\$4,380
Oct-11	1,455	16,895	Dec-11	\$616,236	\$20,714	\$145,991	\$741,512	\$6,414,747	\$4,556
Nov-11	1,469	17,012							
Dec-11	1,510	17,162							

(1) Enrollment is set back 2 months to reflect average claim lag.

(2) Claims eligible for stop loss reimbursement for specific and/or aggregate, if applicable.

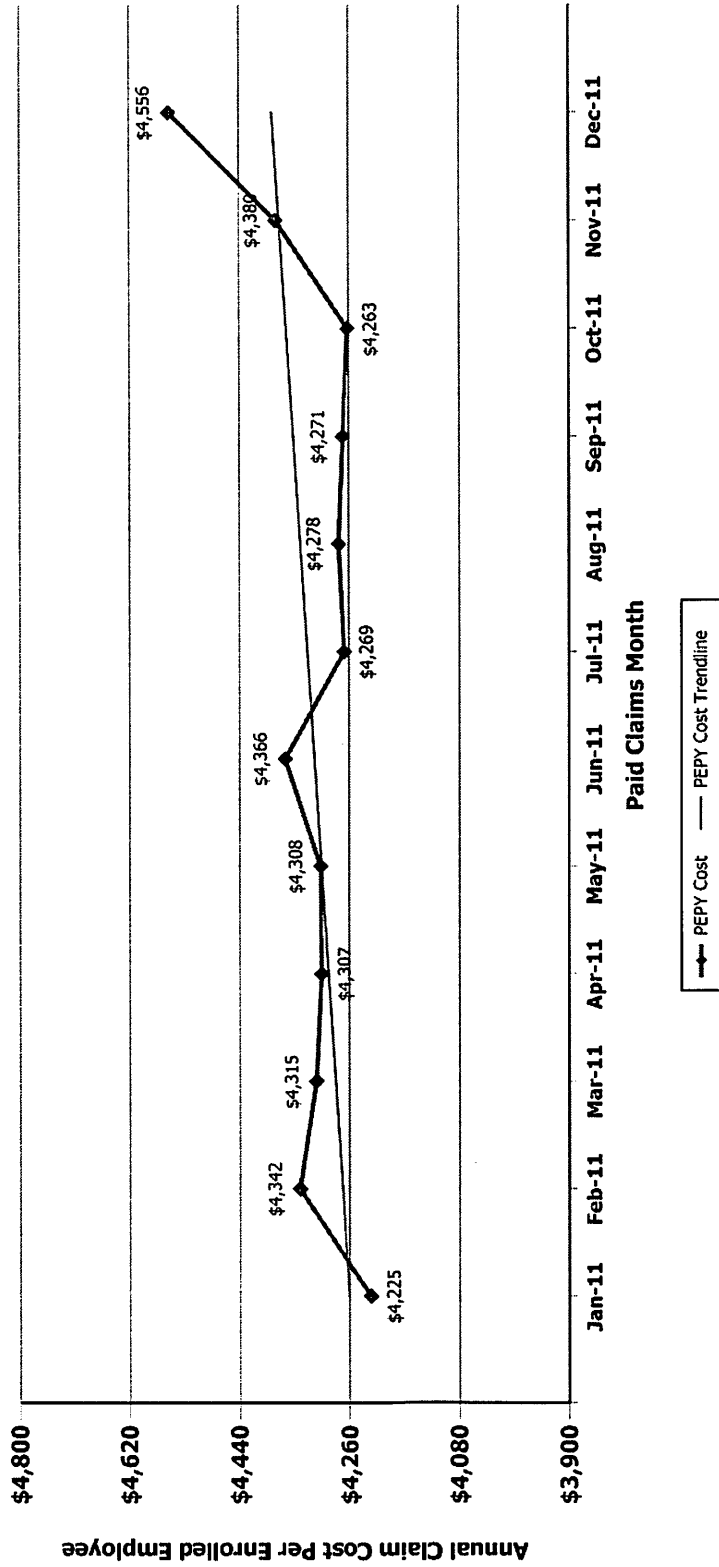
(3) Reflects the sum of all medical and Rx claims minus stop loss reimbursement.

(4) Annual claim cost is based upon a rolling twelve (12) month basis.



ABC Company Plan Trend Analysis

EXHIBIT I: Twelve (12) Month Trendline

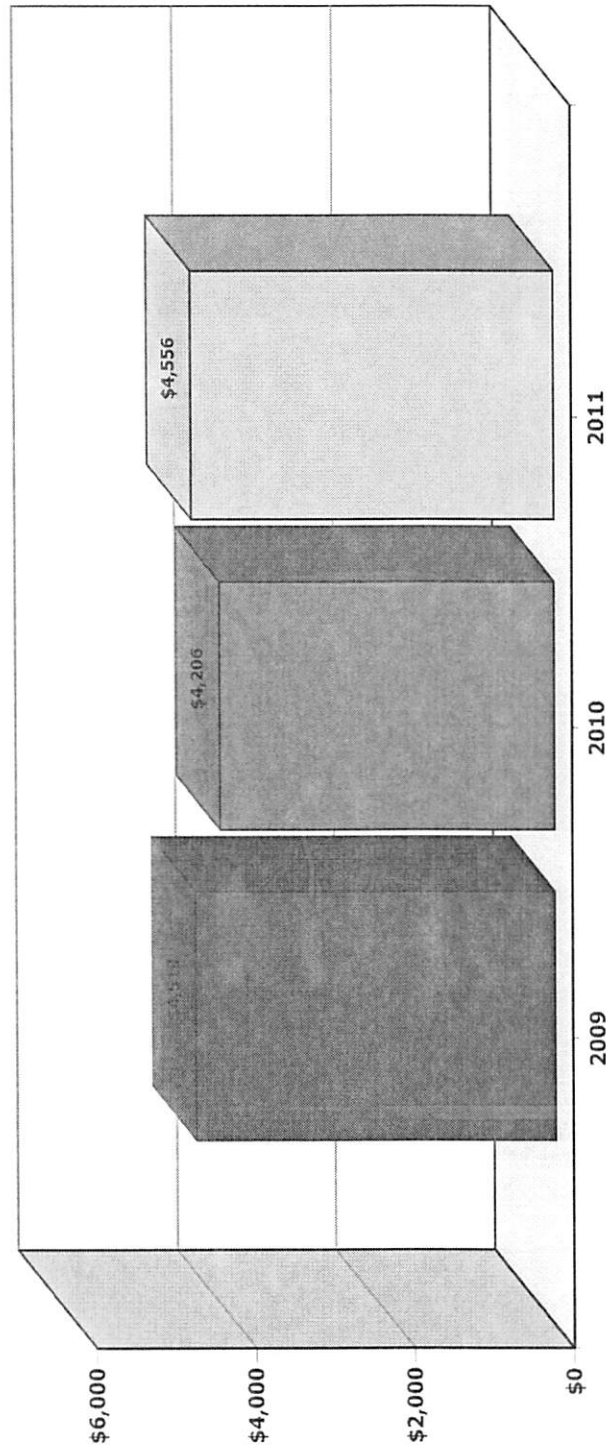


(1) Annual claim cost is based upon a rolling twelve (12) month basis.



ABC Company Plan Trend Analysis

EXHIBIT II: Medical Plan Year Claims Comparison



Plan Year	Avg. Monthly Employees	Annual Per Head Cost (By Enrollment)
2009	1,300	\$4,519
2010	1,332	\$4,206
2011	1,408	\$4,556

(1) Enrollment is set back 2 months to reflect average claim lag.
(2) Annual claim cost is based upon a rolling twelve (12) month basis.



ABC Company Plan Aggregate Report

Aggregate Factor: \$653.22
Aggregate Corridor: 125 %

Paid Claims Period: January 2011 to December 2011

Month	Enrolled Employees	Monthly Attachment Limit	Cumulative Attachment Limit	Monthly Expected Claims	Cumulative Expected Claims	Monthly Net Claims	Cumulative Net Claims
Jan-11	1,377	\$899,484	\$899,484	\$719,587	\$719,587	\$489,743	\$489,743
Feb-11	1,404	\$917,121	\$1,816,605	\$733,697	\$1,453,284	\$557,937	\$1,047,679
Mar-11	1,387	\$906,016	\$2,722,621	\$724,813	\$2,178,097	\$467,360	\$1,515,039
Apr-11	1,398	\$913,202	\$3,635,823	\$730,561	\$2,908,658	\$473,835	\$1,988,874
May-11	1,405	\$917,774	\$4,553,597	\$734,219	\$3,642,877	\$514,703	\$2,503,577
Jun-11	1,424	\$930,185	\$5,483,782	\$744,148	\$4,387,026	\$492,688	\$2,996,265
Jul-11	1,427	\$932,145	\$6,415,927	\$745,716	\$5,132,741	\$463,238	\$3,459,502
Aug-11	1,448	\$945,863	\$7,361,789	\$756,690	\$5,889,432	\$564,900	\$4,024,403
Sep-11	1,458	\$952,395	\$8,314,184	\$761,916	\$6,651,347	\$507,898	\$4,532,301
Oct-11	1,455	\$950,435	\$9,264,619	\$760,348	\$7,411,695	\$498,475	\$5,030,775
Nov-11	1,469	\$959,580	\$10,224,199	\$767,664	\$8,179,360	\$642,459	\$5,673,234
Dec-11	1,510	\$986,362	\$11,210,562	\$789,090	\$8,968,449	\$741,512	\$6,414,747

How does our plan's claims experience compare to the underwriter's expectations?

$$\begin{aligned} \text{Paid Loss Ratio} &= \frac{\text{Cumulative Net Claims}}{\text{Cumulative Expected Claims}} \\ &= \frac{\$6,414,747}{\$8,968,449} \\ &= 71.5 \% \end{aligned}$$

How does our plan's claims experience compare to the underwriter's expectations?

$$\begin{aligned} \text{Aggregate Loss Ratio} &= \frac{\text{Cumulative Net Claims}}{\text{Cumulative Attachment Limit}} \\ &= \frac{\$6,414,747}{\$11,210,562} \\ &= 57.2 \% \end{aligned}$$

- (1) Monthly and Cumulative Net Claims do not include specific stop loss reimbursements.
(2) Aggregate stop loss provides annual cash flow protection against claims exceeding the attachment limit. Reimbursements will be made on an annual basis.
(3) Aggregate stop loss covers Medical and Rx benefits.



ABC Company

Paid Medical Claims Over Specific Limit

Paid Claims Period: January 2011 thru December 2011

Individual Specific Level: \$150,000

Claimant	Plan	Patient/ Relationship	Diagnosis	YTD Claims (As of December 2011)	Increase in the Most Recent Month	Amount over Specific
1	PPO Plan	Spouse	Cervical incompetence; delivered, w/ or w/o antepartum condition	\$170,714	\$170,714	\$20,714
2	PPO Plan	Spouse	Systolic heart failure; chronic	\$99,517	\$5,559	\$0
3	PPO Plan	Employee	Malignant neoplasm; main bronchus, Carina, Hilus of lung	\$91,770	\$1,942	\$0
4	PPO Plan	Employee	Coronary atherosclerosis; of native coronary artery	\$90,705	\$290	\$0
5	PPO Plan	Employee	Malignant neoplasm of retroperitoneum and peritoneum	\$87,968	\$1,289	\$0
6	PPO Plan	Spouse	Tear of lateral cartilage or meniscus of knee	\$86,290	\$2,070	\$0
7	PPO Plan	Employee	Unspecified chronic sinusitis	\$85,056	\$6,248	\$0
8	PPO Plan	Spouse	Spontaneous bacterial peritonitis	\$78,243	\$35,554	\$0
9	PPO Plan	Spouse	Benign neoplasm; rectum and anal canal	\$77,112	\$22,750	\$0
10	PPO Plan	Employee	Repair of cystocele with graft or prosthesis	\$65,249	\$635	\$0
11	PPO Plan	Employee	Poor fetal growth; delivered, w/ or w/o antepartum condition	\$52,375	\$673	\$0
Total:				\$984,999	\$247,724	\$20,714

City of Stamford | RFP #748 Health Care Advisory Consultant

TEAM BIOGRAPHIES



DEBRA TESTA

CIC
Vice President
Public Sector Practice Leader
dtesta@lockton.com

Employee Benefits

Public Sector Practice

Professional Profile

As vice president and Public Sector Practice leader in Lockton's Hartford office, Deb supports the needs of public sector clients, ensuring that all Employee Benefit team members are fully aware of the unique issues encountered by public sector entities.

In addition to her experience in the public sector, Deb also has a long history of assisting clients with their collective bargaining needs as they pertain to employee health benefits. She actively participates in union negotiations, mediations and arbitration sessions on behalf of her clients.

Deb was named a Public Sector Power Broker of the Year by Risk & Insurance in 2013.

During her tenure at Anthem Blue Cross & Blue Shield, Deb handled more than 30 municipal accounts ranging in size from 50 employees to more than 5,000 employees. She has experience with all forms of funding arrangements.

Deb works closely with the finance directors, personnel directors, and chief executives for towns, boards of education, and public sector agencies to establish priorities and to develop strategic plans for achieving those goals.

Deb joined Lockton in 2004 and is responsible for executive leadership/strategic oversight for our public sector clients.

Current and Previous Positions

- ❖ Lockton Companies
 - Vice President, Public Sector Practice Leader
 - Anthem Blue Cross & Blue Shield
 - Senior Account Executive

Education

- ❖ BS in healthcare management; Quinnipiac University (Hamden, Conn.)

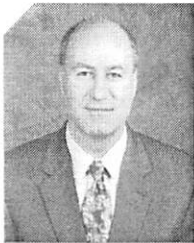
Professional Designation and Affiliations

- ❖ Certified Insurance Counselor (CIC)
- ❖ Connecticut Public Pension Forum, board member
- ❖ Member, Government Finance Officers Association (Conn. & National Chapters)
- ❖ Member, Connecticut Conference of Small Towns
- ❖ Member, Public Employer Labor Relations Association (Conn. & National Chapters)
- ❖ Member, Connecticut Association of School Business Officers

Civic Affiliations

- ❖ Goodwill Industries International, board member
- ❖ Goodwill of Southern New England, board member
- ❖ Clifford Beers Guidance Clinic, past board member
- ❖ YMCA of Wallingford, past board member





JEFFREY PICHNARCIK

Senior Vice President,
Employee Benefit Practice Leader,
Northeast Series
jpichnarcik@lockton.com

Employee Benefits

Northeast Consulting Practice

Professional Profile

Jeff is senior vice president, with responsibility for leading the Northeast Employee Benefits Practice in the company's Boston, Hartford, New York City, Philadelphia, Northern Virginia and Washington, DC, offices. Within this region Lockton delivers best-of-market program strategy, risk management solutions, and value-added business development and consulting.

Jeff is a seasoned consultant with more than 25 years of experience working with clients in all aspects of group health and welfare benefits, including financing, design, communication, and program management. His expertise is in the analysis of group benefit programs to assist clients in managing cost and implementing long-range strategies with regard to benefit structure and design.

Jeff joined Lockton in 2005.

Current and Previous Positions

- ❖ Lockton Companies
 - Senior Vice President, Employee Benefit Practice Leader, Northeast Series
- ❖ Mercer Health & Benefits
 - Principal and Unit Leader
- ❖ Marsh USA
 - Senior Vice President and Consultant
- ❖ United HealthCare
 - Senior Underwriter
- ❖ The Travelers
 - Senior Rating Analyst

Education

- ❖ BS in management and human resource development; University of Connecticut School of Business





DAVE MCCLUSKEY

Senior Vice President
Senior Account Executive
dmcccluskey@lockton.com

Employee Benefits

Northeast Consulting Practice

Professional Profile

Dave is senior vice president and senior account executive, and senior consultant in the Health and Welfare Benefit Practice in Lockton Northeast's Hartford office. As an Employee Benefits team leader, subject matter expert, and client account manager, he helps provide life, health, disability and dental insurance solutions to organizations of every size.

With more than 25 years of experience in group health and welfare benefits, Dave is a seasoned consultant with experience in all aspects of group benefit financing, design, communication, and program management. His expertise is in the analysis of group benefit programs to assist clients in managing cost and implementing long-range strategies for benefit structure and design.

Dave regularly supports clients with due diligence activities, union negotiation planning, communication programs, funding and cost analysis, employee contribution setting, and day-to-day program management.

Dave joined Lockton in 2005 and works with the City of Groton, The Town & BOE of Seymour, Regional School District #14, and the Town & BOE of Newington.

Current and Previous Positions

- ❖ Lockton Companies
 - Senior Vice President, Senior Account Executive, Senior Consultant
- ❖ Mercer Consulting
 - Principal and Team Leader
- ❖ Marsh USA
 - Vice President and Team Leader
- ❖ United Healthcare
 - Senior Underwriter and Account Manager
 - ❖ National Accounts
 - ❖ Taft-Hartley Union Department
- ❖ Travelers/United Healthcare
 - Senior Underwriter and Account Manager
 - ❖ Middle-market Accounts

Education

- ❖ BA in political science; Trinity College (Hartford, Conn.)
- ❖ Graduate of Travelers Employee Benefits Group School





MARK HOLLOWAY, J.D.

CEBS
Senior Vice President
Co-Director of Compliance
mholloway@lockton.com

Compliance Services

Employee Benefits

Professional Profile

Mark Holloway has more than 25 years of experience in health and welfare employee benefits. He provides technical advice related to health and welfare benefit plans to Lockton Benefit Group professionals and their clients throughout the country. His expertise is in a variety of compliance-related issues, including health reform, HIPAA, COBRA, Section 125, discrimination testing, FMLA, state insurance laws, and legislative and regulatory issues at the state and federal levels.

Prior to joining Lockton, Mark was a senior vice president in Aon Consulting's Health & Benefits division and served as a senior vice president in Aon's Research & Technical Services division.

Mark is a well-known and frequent speaker on many employee benefit topics. He was a keynote speaker at the Health and Welfare Plan Management Conference for Mid-Sized Employers.

Mark has written a number of articles and is a member of the editorial board of advisors for the *Benefits Law Journal*. From 2005 to 2013, he served as the co-author for the Federal Benefits Developments column for the *Benefits Law Journal*. His most recent article is "IRS Describes Employment Tax Refund Process for Same-Sex Spouse Health Coverage," which appears in the winter 2013 edition. Mark also served as the co-author and editor of *The Coordination of Benefits Handbook*, which is published by the Thompson Publishing Group.

Mark received his undergraduate degree, summa cum laude, from Hartwick College; his J.D. from Wake Forest University; and his L.L.M. in taxation from Villanova University Law School. He has completed the Certified Employee Benefits Specialist (CEBS) program, sponsored by the International Foundation of Employee Benefit Plans.

Current and Previous Positions

- ❖ Lockton Companies
 - Senior Vice President, Co-Director of Compliance
- ❖ Aon Consulting
 - Senior Vice President

Education

- ❖ B.A. in history; Hartwick College
- ❖ J.D.; Wake Forest University
- ❖ L.L.M. in taxation; Villanova University Law School

Professional Designation

- ❖ Certified Employee Benefits Specialist (CEBS)





THAIS G. MOORE

Vice President
Director of Marketing &
Communications
tmoore@lockton.com

Employee Benefits

Professional Profile

Thais is Vice President and Director of Marketing and Communications for Lockton's Northeast series. Thais has worked in the consulting field since 1999 focusing on marketing, technology and employee communication solutions for mid-size employers.

Thais' consulting support includes the strategy development and design of communications for employee benefit programs. Her expertise includes but is not limited to the development of letters, plan guides, announcements, presentation's, benefit statements, health risk solutions and worker's compensation. Thais has helped many employers with lunch & learns, healthcare strategy sessions, employee surveys and has provided open enrollment and orientation support employers throughout the country.

Thais currently serves as Co-Chair of Lockton's Employee Benefit Communication Task Force and sits on the Corporate Branding Committee.

Current and Previous Positions

- ❖ Lockton Companies
 - Vice President and
Director of Marketing and Communications
- ❖ USI Consulting Group (USICG)
 - Marketing Communications Coordinator
- ❖ Pitney Bowes
 - Sales Consultant

Education

- ❖ B.A., Communication Sciences: University of Connecticut





KAREN A. AMATO

RN, GCM, CPDM
Director, Health Risk Solutions
kamato@lockton.com

Health Risk Solutions

Employee Benefits

Professional Profile

Karen works directly with Lockton Associates and clients on the development and implementation of health promotion, wellness, and risk strategies to achieve measurable results. She assists with health promotion effectiveness through employee health literacy, personal health accountability, and company culture.

As a registered nurse, Karen has expertise in population health, wellness, and integrated disability management. Her experience spans more than 25 years in hospitals and corporate settings (both private and federal contracting), including loss control programs to manage the impact of workers' compensation and disability claims. She developed and led the comprehensive SRA Wellwithin® population health and wellness department for 15 years.

Karen has experience leading corporate responsibility programs by creating work environments that address all aspects of individual well-being and productivity, including community well-being to transcend an employee's ability to improve his or her lifestyle.

Karen joined Lockton in 2014.

Current and Previous Positions

- ❖ Lockton Companies
 - Director, Health Risk Solutions
- ❖ SRA International, Inc.
 - Director of Wellwithin® Integrated Health, Wellness and Disability Management Program
 - Director, Corporate Responsibility Programs
- ❖ Corvel
 - Supervisor, Case Management: Workers' Compensation, Disability, and Large Medical Claims
- ❖ Mt. Vernon Hospital
 - Director, Cardiac Rehabilitation

Education

- ❖ B.S. in nursing; University of Nevada, Las Vegas

Professional Designations

- ❖ Registered Nurse (RN)
- ❖ Certified Case Manager (CCM)
- ❖ Certified Professional of Disability Management (CPDM)

Professional Affiliations

- ❖ Disability Management Employer Coalition (DMEC)
- ❖ Case Management Society of America (CMSA)
- ❖ Society for Human Resources Management (SHRM)





KELLY CHILLINGWORTH

RPh, MHA/Ed, CGP
Senior Pharmacy Consultant
kchillingworth@lockton.com

Pharmacy Analytics

Employee Benefits

Professional Profile

Kelly came to Lockton from DaVita Rx, where she worked as a director for clinical services and PBM operations. She earned a B.S. degree in pharmacy at Duquesne University. She also earned her master's degree in healthcare administration/education at the University of Phoenix.

Kelly is responsible for supporting Lockton Producers and Associates and their employer-clients in matters relating to pharmacy benefits. She contributes relevant clinical knowledge to the Lockton Benefit Group Pharmacy Analytics practice and stays abreast of current industry standards, effective benefit management trends, and known best practices. Her specialties include medical and pharmacy alignment, formulary management, accreditation work, managed care, contracting, networks, and pharmacy operations. She adds a wide breadth of knowledge and is a key player in helping employers save on their pharmacy spend.

Honors and Awards

- ❖ DaVita Rx Core Value award winner January 2013
- ❖ Selected as Quality Student speaker March 2009
- ❖ MedImpact 2008 Peer Awards for Sales Excellence, Teamwork, and Flawless Fundamentals
- ❖ MedImpact Amazing Race Winner, July 2007, Auto Qualifier upon meeting at least 125% of revenue plan; actual revenue achieved exceeded 140%
- ❖ MedImpact 2006 Peer Award for Teamwork
- ❖ 2005-2006 Empire Who's Who of Executives and Professionals
- ❖ Miller-Heiman Certified for Blue, Green, and Gold sheet sales techniques (2006)

Current and Previous Positions

- ❖ Lockton Benefit Group
 - Senior Pharmacy Consultant
- ❖ DaVita Rx
 - Director, Clinical Services, including PBM Services, Bundle and EPO-Depot Operations
- ❖ MedImpact Healthcare Systems
 - Regional Manager, Clinical Services
- ❖ HealthNow New York
 - Corporate Director, Pharmacy Benefits

Education

- ❖ Masters in healthcare administration and education; University of Phoenix, Phoenix, Arizona
- ❖ B.S. in pharmacy; Duquesne University, Pittsburgh, Pennsylvania

Professional Designations

- ❖ RPh—1994
- ❖ Certified Geriatric Pharmacist (CGP)—2009
- ❖ MHA/Ed—2011

Publications

- ❖ **Targeted Medication Therapy Management (MTM) Improves Outcomes for Dialysis Patients and the Healthcare System.** Joshua K. Howland, May Hoang, Maricela Lara Nevarez, Kelly K. Chillingworth, Tracy Furguele. DaVita Rx, Coppell, TX. Presented at Kidney Week 2013 at the American Society of Nephrologists November 2013.





TAMMY QUINN

Senior Vice President
Director, Data Analytics
tquinn@lockton.com

Data Analytics

Employee Benefits

Professional Profile

As Lockton's Director, Data Analytics, Tammy leads our InfoLock® data analytics and pharmacy analytics teams. The InfoLock® team comprehensively reviews an employer's healthcare data and provides extensive reporting to help each employer understand the health risks, utilization patterns, and costs drivers of its healthcare program. The pharmacy analytics team also reviews an employer's data to help the employer understand utilization patterns and the cost drivers of its pharmacy benefits program.

With more than 21 years of experience with group health benefits, Tammy has extensive expertise in the following areas:

- ❖ Pharmacy Analytics—works with account teams to aid clients in reducing or maintaining their pharmacy spend. Identifies contractual opportunities and risk points, while helping structure best-in-class pharmacy agreements
- ❖ Reporting—develops clinical and financial reporting that provides employers an in-depth look at their medical cost drivers, clinical disease prevalence, cost and utilization patterns, and health improvement opportunities
- ❖ Benchmarking—aggregates comprehensive normative data benchmarks, allowing employers to evaluate their health plans' performance against a number of key indicators

- ❖ Clinical—evaluates cost drivers and gaps in care for individuals and measures effectiveness of health risk solutions programs by analyzing population health changes

As a member of Lockton's Health Risk Solutions leadership team, Tammy works to help clients implement focused health improvement and disease management initiatives while optimizing benefit plan designs to encourage behavior changes needed to improve health and reduce healthcare costs

Current and Previous Positions

- ❖ Lockton Benefit Group
 - Senior Vice President, Director, Data Analytics
- ❖ Wachovia Insurance Services/Palmer & Cay/DeFraim Mayer
 - Assistant Vice President, Health and Welfare Benefits Consultant
- ❖ First Health
 - Account Manager

Education

- ❖ Bachelor's in liberal arts; University of Kansas, Lawrence, Kansas



TELLYE HEDRICK

HIA
Senior Vice President
Director, Business Process
theadrick@lockton.com



Business Process

Employee Benefits

Professional Profile
Tellye is the Director of Lockton Benefit Group's Business Process team. Tellye has 18 years of experience in the Employee Benefits industry, including 15 years with Lockton. Tellye's current responsibilities include managing the Employee Benefits Business Process team. The Business Process team works in close collaboration with account teams to help streamline workload and improve the efficiency of our Associates' work product.

Prior to joining Lockton, Tellye worked in the human resources department of a local Kansas City company.

- Professional Designations and Affiliations**
- ◆ Life and Health Insurance License, Kansas
 - ◆ Health Insurance Associate (HIA)
 - ◆ Employee Benefit Professionals Association
 - ◆ (RHRM): Member
 - ◆ Employment Practice Network (EPN): Member

- Education**
- ◆ B.S. in psychology, University of Kansas, Lawrence, Kansas
- Current and Previous Positions**
- ◆ Lockton Benefit Group
 - > Senior Vice President, Director, Business Process, September 2004-present
 - > Assistant Vice President, Account Manager, October 1999-September 2004
 - ◆ Golden Sky Systems, Inc.
 - > Benefits Coordinator, Human Resources, May 1996-October 1999



RONALD LEOPOLD

MD, MBA, MPH
Chief Medical Officer
rleopold@lockton.com

Clinical Services

Employee Benefits

Professional Profile

As a credentialed and experienced professional, Dr. Leopold brings credibility and a breadth of knowledge as a consultant, partner, and marketplace spokesperson. He is an industry thought leader in employee benefits and health and productivity. He works with Lockton account teams and employers with InfoLock® data to help identify trends and understand the correlation between health and productivity.

Dr. Leopold has expertise on a variety of benefits-related topics, including the strategic value of employee benefits, the four generations in the workplace, the value of financial wellness, and the implications of health reform for the benefits community.

His recent book on the future of employee benefits entitled *The Benefits Edge: Honing the Competitive Value of Employee Benefits* has been described as a blueprint for benefits in the decade of healthcare reform. He is also the author of *A Year in the Life of a Million American Workers*, an almanac of absence data, in addition to numerous by-lined articles in the benefits media.

Current and Previous Positions

- ❖ Lockton Benefit Group
 - Chief Medical Officer
- ❖ Willis Towers Watson
 - National Practice Leader, Health Outcomes
- ❖ Wells Fargo Insurance Services
 - Senior Vice President, National Practice Leader: Health & Productivity
- ❖ MetLife
 - Vice President, National Medical Director
- ❖ ManagedComp
 - Medical Director
- ❖ Tufts Health Plan-ManagedComp
 - Medical Director

Education

- ❖ M.P.H. in population health; Boston University
- ❖ M.B.A. in health care; University of Pennsylvania – The Wharton School
- ❖ M.D.; Jefferson Medical College of Thomas Jefferson University
- ❖ B.S. in biology and French; Emory University

Professional Affiliations

- ❖ National Speakers Association
- ❖ National Business Group on Health





SHANNON DEMAREE

ASA, MAAA
Senior Vice President
Director of Actuarial Services
sdemaree@lockton.com

Actuarial Services

Employee Benefits

Professional Profile

Shannon has more than 18 years of experience as a healthcare actuary pricing group health benefits. In her role at Lockton, Shannon provides actuarial expertise in the following areas:

- ❖ Health Reform Financial Modeling
- ❖ IBNR reserve certifications
- ❖ COBRA rate certifications
- ❖ Actuarial value of plan design changes (including CDHP)
- ❖ Analysis of stop-loss risk
- ❖ Comparison of network pricing
- ❖ Medicare Part D actuarial attestations
- ❖ Analysis of funding options (fully insured vs. self-insured)
- ❖ Detailed analysis of claims data
- ❖ Budgeting in a multioption environment, accounting for selection

Prior to joining Lockton, Shannon was Vice President, Director of Actuarial Services for Wachovia Insurance Services (formerly Palmer & Cay), a national employee benefits consulting and brokerage firm. Prior to that, Shannon was the stop-loss actuary with Employers Reinsurance Corporation.

Shannon received a bachelor's degree in mathematics from the University of Mississippi and a master's degree in mathematics from the University of Missouri, Kansas City. She is an Associate in the Society of Actuaries and a member of the American Academy of Actuaries.

Current and Previous Positions

- ❖ Lockton Companies
 - Senior Vice President, Director of Actuarial Services
- ❖ Wachovia Insurance Services
 - Vice President, Director of Actuarial Services
- ❖ Employers Reinsurance Corporation
 - Stop-Loss Actuary

Education

- ❖ Bachelors in mathematics; University of Mississippi
- ❖ Masters in mathematics; University of Missouri, Kansas City

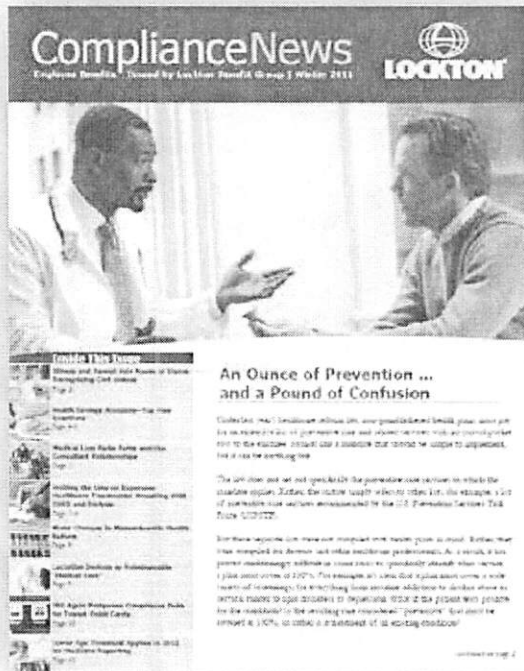
Professional Affiliations

- ❖ Associate, Society of Actuaries
- ❖ Member, American Academy of Actuaries



SAMPLE COMMUNICATIONS

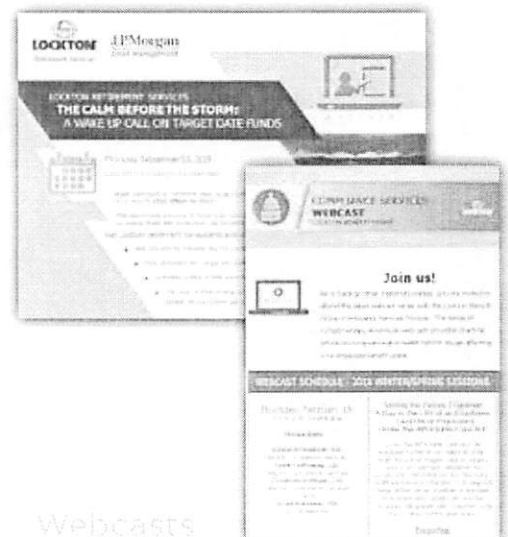
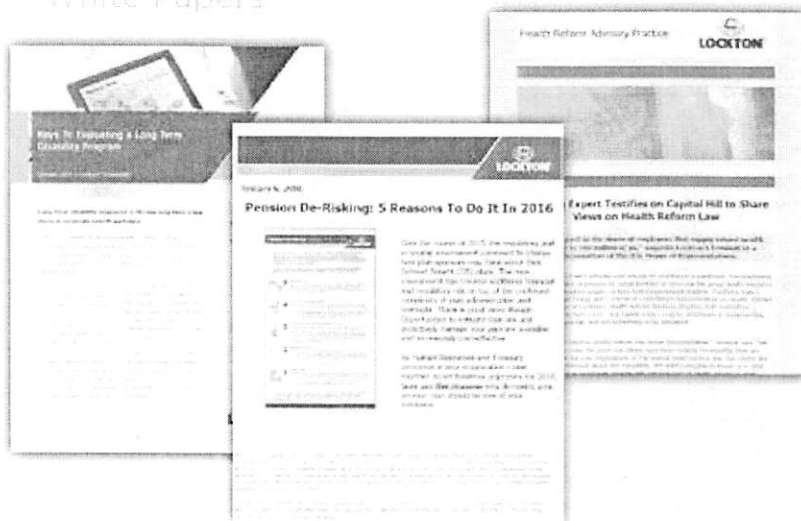
Compliance Communication



Health Reform Alerts

Webinars & Roundtables

White Papers

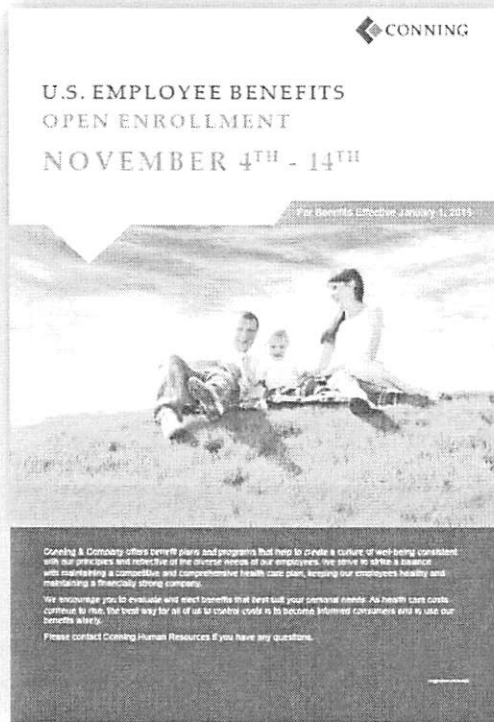


Alerts by Specialty Practice

Webcasts

Employee Communication

Posters



CONNING

**U.S. EMPLOYEE BENEFITS
OPEN ENROLLMENT
NOVEMBER 4TH - 14TH**

For benefits effective January 1, 2016

Conning & Company offers benefit plans and programs that help to create a culture of well-being consistent with our principles and reflective of the diverse needs of our employees. We strive to define a benefit with meaningful and comprehensive health care plans, ensuring that employees' health and maintaining a financially strong company.

We encourage you to evaluate and select benefits that best suit your personal needs. As health care costs continue to rise, the best way for all of us to control costs is to become informed consumers and to use our benefits wisely.

Please contact Conning Human Resources if you have any questions.

Mailers & Postcards



2016 Annual Enrollment

Don't Forget to Enroll

Have you completed your annual enrollment yet?

Remember the best day to enroll for 2016 changes is November 14, 2015!

Enroll by visiting: go2yourmiller.com

• **Open Enrollment**
• **Review of 2015 Year Coverage**
• **Cancel Coverage**
• **Add or Change Dependents**

Medical | Dental | Vision | Flexible Spending Account | Health Savings Account | Dependent Care | Health Insurance | Life Insurance | Disability (Short Term & Long Term) | Long Term Disability | Voluntary Life Insurance | Employee Assistance Program | Wellness Programs | Retirement Options | Voluntary Rollover | Health Advocacy

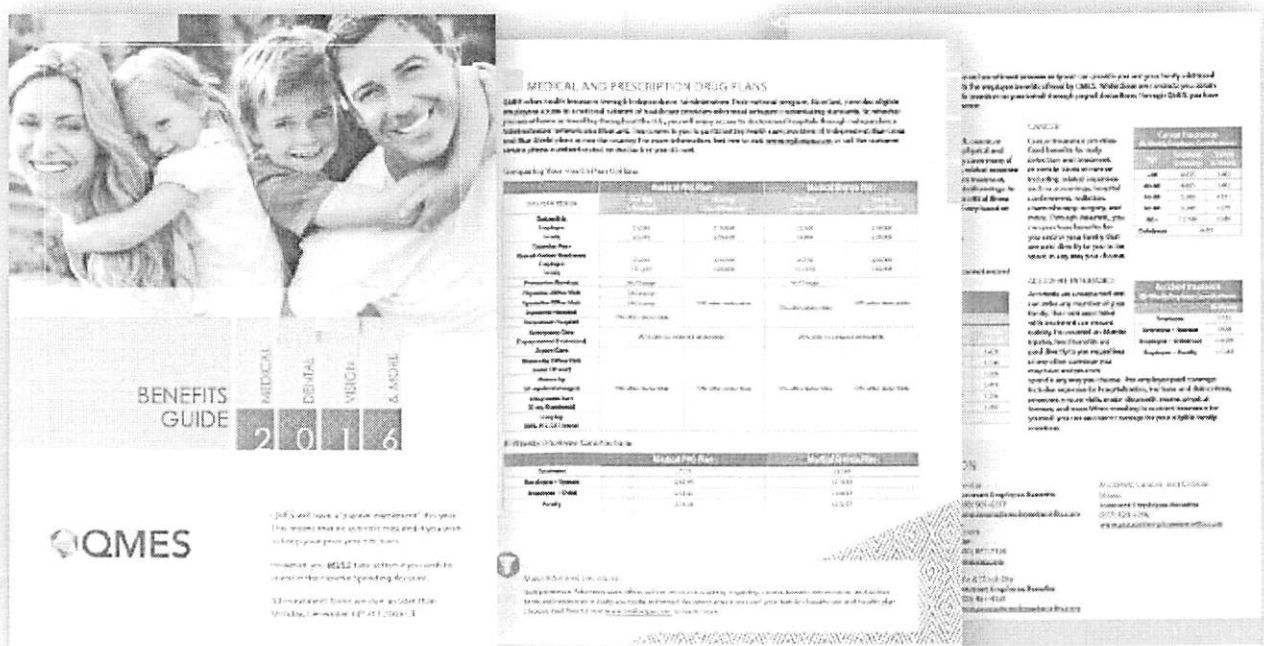
Don't Forget to Enroll

Have you completed your annual enrollment yet?

Remember the best day to enroll for 2016 changes is November 14, 2015!

Enroll by visiting: go2yourmiller.com

Employee Benefit Guides



BENEFITS GUIDE 2016

MEDICAL AND PRESCRIPTION DRUG PLANS

Employees have the option to enroll in one of two plans: the **Medical Plan** or the **Prescription Drug Plan**. Both plans are self-insured and are subject to the terms and conditions of the plan documents. The **Medical Plan** covers medical expenses, including hospitalization, surgery, and other medical services. The **Prescription Drug Plan** covers the cost of prescription drugs. Employees may also enroll in the **Dental Plan** and the **Vision Plan**.

Plan	Medical Plan	Prescription Drug Plan
Individual	\$1,000	\$1,000
Family	\$2,000	\$2,000
Child	\$500	\$500
Spouse	\$500	\$500
Dependent	\$500	\$500

QMES

QMES is a leading provider of employee benefit services. We offer a wide range of services, including enrollment, claims processing, and customer support. Our experienced professionals are dedicated to providing the highest quality service to our clients.

For more information, please contact us at www.qmes.com or call 1-800-451-1234.

RISK MANAGEMENT • EMPLOYEE BENEFITS • RETIREMENT SERVICES

Our Mission | To be the worldwide value and service leader in insurance brokerage, risk management, employee benefits and retirement services

Our Goal | To be the best place to do business and to work

