



June 10, 2011

City of Hoboken
c/o Law Department
94 Washington Street
Hoboken, New Jersey 07030

Re: Request for Qualifications: Insurance Brokerage Services

Dear Sir or Madam:

Thank you for the opportunity to bid on the above referenced RFQ. One (1) original proposal, three (3) hard copies, and one (1) electronic copy are enclosed for your review and consideration.

The completed Qualifications Statement is located under the tab marked "Proposals". Please note that there are two separate Qualifications Statements; the first pertains to Health Insurance / Employee Benefits, and the second pertains to Property & Casualty / Risk Management.

All other required and illustrative information is located under the following tabs:

- Tab #1: Public Sector Clientele Listing and Recommendation Letters
- Tab #2: Onsite Wellness Information (Wellness Coaches USA)
- Tab #3: Online Human Resource and Benefits Library Information (HR Genius)
- Tab #4: Secure Benefit Issue Tracking System Information
- Tab #5: 24/7 Employee Hotline Information (Health Advocate)
- Tab #6: Sample Employee Benefit Reference Guide
- Tab #7: Employee Benefits Website Information
- Tab #8: Staff Resumes and licenses
- Tab #9: Required Documentation:
 - Insurance Certificate
 - Indemnification Statement and Certificate of Errors
 - Affirmative Action Certification
 - Americans with Disabilities Act of 1990 Form
 - Stockholder Disclosure Form
 - New Jersey Business Registration Certificate

25 Fairview Avenue • P.O. Box 324 • Verona, New Jersey 07044
Tel: 973.857.0870 • Toll Free: 800.372.2558 • Fax: 973.857.9645
1930 E. Marlton Pike, Suite C-16 • Cherry Hill, New Jersey 08003
Tel: 856.424.8515 • Toll Free: 800.452.5376 • Fax: 856.424.7933

www.fairviewinsurance.com





- New Jersey Work and Community Right to Know Act Statement
- Prevailing Wage Act Statement
- Davis Bacon Act Statement
- Public Works Vendor Registration Act
- Non Collusion Affidavit
- Pay to Play Statement
- Nuclear Free Hoboken Ordinance Form

If you have any questions regarding this proposal, please do not hesitate to contact me. I can be reached at 973-857-0870, extension 116, or via email at rgraham@fairviewinsurance.com

Sincerely,

Ryan Graham
Director of Business Development, Employee Benefits Division



June 10, 2010

City of Hoboken
c/o Law Department
94 Washington Street
Hoboken, New Jersey 07030

Re: Request for Qualifications: Insurance Brokerage Services

Dear Sir or Madam:

The attached Proposal Form is submitted by:

Fairview Insurance Agency Associates, Inc.
25 Fairview Avenue
Verona, New Jersey 07044

Phone: (973) 857-0870
Toll Free: (800) 372-2558
Fax: (973) 857-9645
Website: www.fairviewinsurance.com

Contact Person: Ryan Graham, Director of Business Development
Email: rgraham@fairviewinsurance.com

Legal Name of Corporation: Fairview Insurance Agency Associates, Inc.

State of Incorporation: New Jersey

Signed by: 

Name: John F.X. Graham

Title: Chief Executive Officer

Dated: June 10, 2011

25 Fairview Avenue • P.O. Box 324 • Verona, New Jersey 07044
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www.fairviewinsurance.com



FIRM QUALIFICATIONS

(Attach additional sheets if necessary)

COMPANY NAME Fairview Insurance Agency Inc.

COMPANY LOCATIONS (if more than one, list principal location first)

See attached

COMPANY OVERVIEW, PRINCIPAL ACTIVITIES, ETC.

See attached

NUMBER OF EMPLOYEES See attached

JOB CLASSIFICATION(S) OF EMPLOYEES (Include resumes of Managers and Supervisors as well as those who will be assigned to provide services)

See attached

YEAR COMPANY WAS ESTABLISHED See attached

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COST PROPOSAL / PRICING

- Insurance carriers recognize that the most effective way for their products to enter into the marketplace is through the insurance broker/consultant community. Therefore, insurance carriers automatically impute commissions into their rates. Horizon Blue Cross and Blue Shield pays “standard commissions” based upon premium size. The standard commissions for the medical and prescription on this case would range between 3% to 3.5%, depending on the premium. The dental, vision, life, and disability, if applicable, would be based on the carrier’s standard sliding commission scale.

Fairview Insurance Agency Associates, Inc. recognizes that it is the intent of the City of Hoboken to pay an annual flat fee of \$360,000 for 12 months. This means that the City is looking for a “net of commission” contract with the carrier(s). Typically, carriers do not agree to reduce rates on a “net of commission” basis until the policy expiration date. If the carrier(s) do (es) not agree to reduce the rates until the renewal, our firm would waive the City’s fee until the carrier (s) agree (s) to remove the imputed commission, at which time Fairview would then accept the fee from the City. It is not the intent of our firm to impose any additional costs to the City of Hoboken.

QUALIFICATIONS

- **Provide a general description of the firm's financial condition and identify any conditions (e.g., bankruptcy, pending litigation, planned office closures, impending merger) that may impede Vendor's ability to complete the project. The firm shall provide proof of a minimum of three consecutive years of demonstrated profitability as reference by audited financial statements by an independent, certified public accounting firm, the latest of which is dated not earlier than the previous twelve months from the date of submission of this RFQ.**

Fairview Insurance Agency Associate, Inc. has been a privately held firm for over 41 years. Our firm has never filed for bankruptcy, has no pending litigations, nor planned office closures or impending mergers that would impede our ability to compete for this project. Fairview Insurance Agency Associates, Inc. is not a public company. Therefore, we are not required to provide audited financial statements.

- **Provide whether the firm of its principals are now or have ever been included in any bankruptcy, or re-organization proceedings, or have operated under a different name. If so, explain.**

Fairview Insurance Agency Associates, Inc. has never been included in bankruptcy, re-organization proceedings, or operated under a different name.

- **Provide a minimum of five (5) references from clients for whom similar projects have been completed. Include the following information for each project:**
 - **Name of contracting company or government agency**
 - ◆ Bloomfield Board of Education
 - ◆ City of Passaic Board of Education
 - ◆ Township of Parsippany – Troy Hills
 - ◆ Township of Bloomfield
 - ◆ North Jersey District Water Supply Commission
 - **Contact person's name, position, and current telephone number**
 - ◆ Bloomfield Board of Education:
Michael Derderian, Business Administrator – 973.680.8515

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- ◆ City of Passaic Board of Education:
Henry Lee, School Business Administrator – 973.470.5241
 - ◆ Township of Parsippany – Troy Hills:
Jasmine Lim, Business Administrator – 973.263.4276
 - ◆ Township of Bloomfield
Yoshi Manale, Township Administrator – 973.680.4004
 - ◆ North Jersey District Water Supply Commission
Colleen DeStefano, Deputy Executive Director – 973.831.6286
- **Scope of services performed**
- Assistance with the development of long-range insurance strategies
 - Management of the insurance program
 - Review of both insurance policies and contracts to ensure adequate coverage
 - Recommendations and assistance in the procurement of all insurance coverage, including preparation of any required RFP's
 - Analysis of proposals in connection with insurance procurement, including, but not limited to, establishing selection criteria, recommending marketplaces, evaluation of proposals and involvement in the selection process
 - Identification and analysis of risks arising out of current and future operations
 - Preparation of specifications for quotations upon the expiration of each policy
 - Continuous review and analysis of loss information including contact health insurer, call center, etc., from current and prior insurance companies, and presentation of findings
 - Continuous review and analysis of loss information from current and prior insurance companies and presentation of findings to the entity
 - Review of contracts for insurance compliance
 - Acting as liaison between the entity and all insurance carriers, brokers, providers, or claimants
 - Monitoring, review and presentation of data to help manage claims on all current and future policies
 - Review and analysis of rating classifications on various insurance contracts to determine the most beneficial ones to utilize
 - Continuous review and analysis of insurance coverage and policies to keep up with industry changes, continuing operations and growth
 - Research and analysis of alternatives to current funding mechanisms to meet the changing needs of the entity

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- Notification of entity staff as to local, state and federal regulations and recommendations for compliance as required
 - Participation in on-going meetings with staff to review losses, recommendations, government regulations, insurance requirements, etc.
 - Review of audits of current and previous policies for accuracy and potential premium savings
 - Performance of self-insurance feasibility studies where applicable and recommendations to entity staff
 - Assistance in the development of alternative strategies to reduce claims and premium
 - Consultation as to the probable impact of strategies elected by the entity
 - Provision of monitoring feedback via loss runs and associated analysis to verify the adequacy of the controls selected as well as check for negative trends which may require corrective action
 - Assist with scheduling, coordinating, and conducting with insurance carrier, annual on-site employee open enrollment meetings and health and wellness program meetings
 - Advice and consultation as to the financial and other effects of contractual provisions with employees and possible benefit, contributions, and co-payment changes
 - Assist the entity as a resource during collective bargaining sessions
 - Complete insurance communications as necessary and when requested
- **Commencement and termination of dates of services**
- ◆ Bloomfield Board of Education: July 1, 2008 to present
 - ◆ City of Passaic Board of Education: January 1, 2007 to present
 - ◆ Township of Parsippany – Troy Hills: January 1, 2007 to present
 - ◆ Township of Bloomfield: January 1, 2006 to present
 - ◆ North Jersey District Water Supply Commission: December 1, 2005 to present

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- **Approximate rates / fees earned from the contracting company**
 - ◆ Bloomfield Board of Education:
 - Medical and Prescription - 3.5%
 - Dental - 10% of the first \$5,000, 4% of the next \$95,000, 3% of the remainder
 - ◆ City of Passaic Board of Education:
 - Prescription - 2.5%
 - Dental - 0%
 - Disability - 0%
 - Vision - 0%
 - ◆ Township of Parsippany:
 - Medical - 2.5%
 - Prescription - 2%
 - Vision - First \$5,000- 10%, next \$5,000- 5%, next \$10,000- 3.56%, next \$10,000- 3%, next \$20,000- 2.31%, next \$200,000- 1.44%, next \$250,000- .73%, exceeding \$500,000-.35%
 - Dental - 0%
 - Life - 15% of the first \$2,000, 10% of the next \$8,000, 6% of the next \$15,000, 4% of the next \$25,000, 2% of the next \$50,000, 1% of the next \$100,000, .5% on the amount over \$250,000
 - ◆ Township of Bloomfield:
 - Medical - 5%
 - Prescription - 5%
 - ◆ North Jersey District Water Supply Commission
 - Medical - 2.5%
 - Prescription - 4%
 - Dental - 10% of the first \$5,000, 4% of the next \$95,000, 3% of the remainder
 - Basic Life and AD&D - 15% of the first \$5,000, 10% of the next \$5,000, 5% of the next \$20,000, 3.5% of the next \$10,000, 3% of the next \$10,000, 2% of the next \$10,000, 1.75% of the next \$190,000, 1% of the next \$250,000, .50% of the next \$500,000
 - Enhanced Optional Life - 15%

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o **Status and comments**

◆ Bloomfield Board of Education: Incumbent.

Fairview Insurance Agency saved the school district nearly \$100,000 after only three weeks of being named as Broker of Record. We accomplished this savings by reviewing the current plans, costs, and usage and negotiated with the incumbent carriers to reduce the renewal actions that were already in place. The entity realized an immediate savings without any employee disruption.

Furthermore, upon the next renewal, we were able to save \$470,000 on the medical and prescription drug renewals by effectively negotiating with CIGNA. The employees received medical plans that are better than the previous health plan, experienced little or no network disruption, and are now provided with greater wellness tools and initiatives. In addition, we effectively negotiated a rate pass with Delta Dental for their dental renewal.

◆ City of Passaic Board of Education. Incumbent.

Our firm moved the prescription drug coverage out of the NJ SHBP and into Benecard on a direct basis for an effective date of January 1, 2007, saving the Board of Education over \$100,000. We have also worked with the administration to find additional savings through performing a free eligibility audit (approximately an additional \$70,000+ savings). Fairview also successfully assisted the District in a grievance vs. the local Teachers Union.

Furthermore, since upon being named as the Broker of Record for the school district's group dental, life and disability, we were able to negotiate a reduction of premium that resulted in over a \$400,000 savings. The dental carrier was not changed, and we were able to consolidate their numerous disability plans with just two carriers and keep a consistent policy renewal date. Previously, they were operating with several disability carriers, all with different policy dates.

Most recently, we were able to secure a 28-month rate guarantee with minimal rate increase for the district's dental program renewal. In addition, we secured a reduction in vision premium of nearly \$225,000 and a 48-month rate guarantee by changing vision carriers. Moreover, we have provided a savings of nearly \$100,000 and a 36-month rate guarantee if by packaging all five disability policies with one of the district's incumbent carriers. The most recent prescription drug renewal has also resulted in a significant savings, equating to

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less than a 1% renewal over the previous program and almost 4% less than the NJ SEHBP.

Lastly, we have presented a cost containment measure that can be implemented for the prescription drug plan that will more closely follow the newly implemented procedure of the NJ SEHBP/SHBP and will aid in the reduction of claims and cost to the district upon renewal.

◆ Township of Parsippany-Troy Hills. Incumbent.

In 2007 Fairview Insurance Agency moved the Township out of the NJ SHBP and into Horizon BCBSNJ on a direct basis, saving over \$600,000.

Since 2007, our firm has effectively negotiated renewals with minimal rate impact. In addition, we changed the prescription drug coverage that was in place through a self-funded arrangement with one vendor to a fully insured arrangement with another vendor. By doing so, the Township saved roughly \$80,000 and has experienced trend increases since.

Furthermore, upon being named as the Broker of Record on the Delta Dental program, we were able to negotiate a significant savings in the administration fee of the self-insured plan and have not experienced an increase in admin fee to date.

◆ Township of Bloomfield. Incumbent.

In 2006, Fairview Insurance Agency moved the Township out of the NJ SHBP and into Horizon BCBSNJ on a direct basis, resulting in a savings of over \$600,000. Employees received enhanced medical benefits without any disruption.

Since 2006, we have effectively negotiated renewals with minimal rate impact. We have successfully obtained creative methods to resolve Township cash flow issues, such as premium deferrals with 0% interest on repayment. Furthermore, we have been involved in employee negotiations for active and retiree benefits that have resulted in plan changes and premium decreases.

Moreover, for no additional charge, we have coordinated and assisted in the procedure for the Retiree Drug Subsidy, which has resulted in a significant reimbursement to the Township.

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- ◆ North Jersey District Water Supply Commission. Incumbent.

In 2005 Fairview Insurance Agency moved the entity out of the NJ SHBP and into Horizon BCBSNJ on a direct basis, resulting in a savings of over \$250,000.

Since 2005, we have effectively negotiated renewals with minimal rate impact. We have successfully obtained creative methods to resolve cash flow issues, such as a callback provision. We have also effectively monitored their prescription drug plan, which has historically had high utilization, and through research have uncovered fraud within the plan. By moving the prescription to another vendor and increasing the level of monitoring with that vendor, we have seen an immediate reduction in claims by 60%.

Furthermore, we have been the broker of record on the Delta Dental program since 1998 and have been successful in negotiating very low renewals, many times 0%. In addition, we have been named as the Broker of Record for the Life and AD&D coverage and have successfully obtained rates that are 38% below the previous policy, with a two-year rate guarantee, by moving to MetLife.

Please see Tab #1 for a complete listing of public sector clientele and recommendation letters.

- **Comprehensive list of firm's active relationships with insurance carriers and related products**

Fairview Insurance Agency Associates, Inc. has an outstanding working relationship with all the leading carriers in this industry. Our firm routinely works with the carriers and vendors noted below and has placed a significant amount of business with each over the years, which enables us to negotiate the best rates with these carriers. Our firm has strong relationships with the representatives from all the carriers and possesses the necessary contacts for any type of issue that may arise.

- Horizon Blue Cross and Blue Shield of New Jersey – Medical, Prescription, Dental
- CIGNA – Medical, Prescription, Dental, Disability
- Oxford Health Plans / United HealthCare – Medical, Prescription, Dental, Vision
- Aetna – Medical, Prescription, Dental
- Amerihealth – Medical, Prescription
- Insurance Design Administrators – Third Party Administrator
- Benecard Services, Inc. – Prescription
- Bollinger Inc. – Prescription, Dental
- Express Scripts Inc. – Prescription

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- Medco - Prescription
- Garden State Pharmacy Owners Corporation - Prescription
- IdealScripts - Prescription
- Delta Dental of New Jersey - Dental
- Guardian - Dental, Life, Disability
- HealthPlex - Dental
- National Vision Administrators - Vision
- VSP - Vision
- Avesis - Vision
- MetLife - Dental, Life, Disability
- Sunlife - Dental, Disability, Life
- Prudential - Life, Disability
- The Standard - Life, Disability
- UNUM - Life, Disability
- The Hartford - Life, Disability
- National Insurance Administrators - Life, Disability
- Assurant - Life, Disability

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Insurance Brokerage Services

FIRM QUALIFICATIONS

COMPANY NAME:

Fairview Insurance Agency Associates, Inc.

Main Office:
25 Fairview Avenue
Verona, New Jersey 07044

Branch Office:
1930 E. Marlton Pike, Suite C-16
Cherry Hill, New Jersey 08003

Phone: (973)857-0870
Toll Free: (800)372-2558
Fax: (973)857.9645

COMPANY OVERVIEW, PRINCIPAL ACTIVITIES, ETC.:

Fairview Insurance is an independent, full-service insurance agency based in Verona and Cherry Hill, New Jersey. Working on behalf of individuals, companies and public entities, we provide customized insurance plans, employee benefits, investment services and financial planning services. Our longevity and depth of experience have fostered a solid reputation for friendly, personal service that forms the core of our success.

Founded in 1970 by CEO John Graham, Fairview has been family-owned and operated from the very beginning, providing the services of a national-caliber company with the personality of a Main Street business. Even today, many Graham family members return to work at Fairview. This approach has driven our climb as one of the Mid-Atlantic region's premier insurance agencies, with annual premiums totaling more than \$60 million.

Our firm specializes in public sector benefits and we pride ourselves on our extensive knowledge of the public sector marketplace. Our experience dates back more than twenty years when we moved the City of Hoboken out of the New Jersey State Health Benefits Program (NJ SHBP) in the 1980s. Since then, we have aided numerous public entities with their employee benefits needs and saved them hundreds of thousands of dollars in insurance premium while keeping the integrity of their benefits plans intact. Our focus is employee education making employees part of the process rather than adversaries. Because of this method, we have accomplished the goals of our public sector clients, whether it be moving their benefits program to another carrier or making plan design changes.

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A few of our notable achievements are listed below. More detailed information on our firm's experience and success is documented throughout this submission.

- ◆ Saved the Bloomfield BOE nearly \$100,000 within three weeks of being named the Broker of Record. We achieved this savings by reviewing the current plans, costs, and usage and negotiated with the incumbent carriers to reduce the renewal actions that were already in place. The client realized an immediate savings without any employee disruption.

- ◆ Saved the City of Passaic BOE nearly \$400,000 within two months of being named the Broker of Record. By creating a competitive bid scenario, we were able to negotiate with the current dental carrier and disability carriers, significantly reducing the renewal actions.

- ◆ Saved the City of Passaic BOE \$70,000 by performing an eligibility audit on the prescription drug program. We were successful in eliminating duplicate coverage where it was not applicable. In addition, we testified on behalf of the BOE in an arbitration hearing that resulted from the eligibility audit; an action that was decided in the school district's favor.

At Fairview Insurance, we pride ourselves on our client care and support. Our goal is to make all transitions as seamless as possible to you and your employees. We also strive to ease the administrative burden to the client by taking on much of it ourselves. In fact, we instruct all clients and their membership to make us the first point of contact, not the carriers. Many of our competitors are only available for assistance once the carrier has been contacted and the result was dissatisfying. Our service, support, knowledge and experience are unparalleled.

Our agency recognizes that governmental insurance is a unique specialty. It is our job to balance the financial needs of the entity while satisfying the needs of the employees. Below is a brief description of the services provided to the administrative staff and the employees.

EMPLOYER SUPPORT SERVICES

Onsite Wellness. Fairview Insurance recognizes that insurance costs are rising faster than the rate of inflation. These increases create an immense financial burden for employers. With the recent proposals by Governor Chris Christie, municipalities must find ways to lower costs or be faced with dramatic layoffs, furloughs and other departmental cuts. It is imperative that, as your insurance broker, we present out-of-the-box solutions to lower these skyrocketing costs. That is why Fairview Insurance Agency Associates, Inc. is sponsoring an onsite wellness program, through Wellness Coaches USA, at no additional cost to the city. Wellness Coaches USA is the largest, most developed, and experienced national provider of onsite wellness coaching. Their expertise lies in the creation and distribution of workplace wellness models planned and structured to specifically and exclusively accommodate the reality of onsite wellness coaching. The strengths of the program are as follows:

- ✓ Customized to meet the needs of the employer
- ✓ A crafted program to achieve the highest levels of employee engagement (a proven success rate of 60% to 80% of all eligible employees)
- ✓ Identifying health risk factors and improving status and outcomes
- ✓ Creative onsite delivery
- ✓ A professional team of over 100 years of collective experience that continues to grow and develop

We feel this service is the key to controlling costs, both as an immediate and long-term approach. Please refer to Tab #2 for more detailed description of program.

Client Service Support. Our dedicated account management team provides the highest level of support to administrative staff. Fairview Insurance offers support in all areas of administration and we are as hands on and proactive as our clients prefer.

We have on-line access to carriers, allowing us to complete all additions, terminations, and status changes quickly and efficiently. All documentation is stored in our secure office data management system for future reference and tracking. Additionally, we are available at the request of our clients for billing support or onsite employee inquiries / meetings, and are available to assist with any type of union negotiation or communication relating to group benefits.

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COBRA Administration. Our firm out-sources all COBRA administration to a third party and we work closely with them to ensure your account is administered properly. If a member has a question or a problem, they can call us and we will assist them with getting it resolved in a timely manner.

Employer Education / Notification. We will keep the client notified on all pertinent employee benefit legislative changes, including changes in the NJ State Health Benefits Program, COBRA and ERISA if applicable. We also handle Chapter 375 (Dependent to Age 31) and RDS (Medicare Part D) assistance on behalf of the entity and we will keep you informed of any changes in legislation,. Should a carrier change their policy or procedures, we will make you aware of such changes and notify employees where applicable.

We also keep our clients aware of any relevant employee benefit related laws and mandates that may impact their benefit programs. We receive continuous updates and will forward on to the appropriate administrators of the city. We continuously attend seminars to stay current in this industry and will pass along pertinent information.

Access to HR Tools - our agency provides each of our clients with their own login information to HR Genius, an award winning online Human Resource and Benefits Library. Please refer to Tab #3 for more information. You may also do a live demo of the site by visiting <http://www.mybensite.com/hrgenius>

Username: fairviewdemo

Password: hrgenius

Health Fairs and Open Enrollment Meetings. Fairview Insurance Agency Associates, Inc. will administer a health fair for the City upon request. We held several successful health fairs for our clients where we incorporated blood pressure readings, massage therapy, healthy food, healthy lifestyle updates, etc. into the services offered to employees.

Assistance with RDS. Fairview Insurance Agency Associates, Inc. will assist you in determining if filing for RDS (Retirement Drug Subsidy) is beneficial to your group and assist you with the process, including filing the application and mailing out creditable coverage letters to the Medicare eligible members.

PLANNING & NEGOTIATING

Insurance Trends. Fairview Insurance Agency Associates, Inc. recognizes that servicing a public sector client is more unique than a private client. We constantly stay updated on changing federal and state legislation, as well as potential changes of legislation that may affect public entities. We receive and monitor these updates on an ongoing basis and report them to our clients.

Physician / Provider Network Analysis. In the event that a change in carrier is warranted, Fairview Insurance Agency Associates, Inc. obtains network GEO Access and Disruption Reports for all providers used by the members during the most recent 12 month time period. GEO Access reports will illustrate how many providers in a specific area are participating with each carrier and a Network Disruption Report will illustrate how many providers participate with a certain carrier compared to your current carrier. In addition to proposed premium, both reports will help to ascertain which carrier or carriers may be the best fit for the client.

Annual Benefit Renewals. Fairview Insurance Agency Associates, Inc. works with the client to develop and administer an effective business plan for annual benefit renewals. We will work closely with the incumbent carrier to provide renewal proposals 60 - 90 days in advance of the renewal date. We will analyze all pertinent information, including the claims experience, plan structure, and rate increases. We will then effectively market the program to the appropriate competing carriers to provide you with the best network, administration, and financial feasibility. Once we evaluate all bids received, we will provide various alternate options, including proposals from other carriers using the same and alternate benefit plan designs. We will then meet with the necessary parties to discuss our business plan for the entity's benefit renewal. All information is presented in a clear and concise format to all necessary parties in a timely manner.

Furthermore, we routinely receive information from carriers regarding the loss history of the group. This helps us to determine if the group is trending well and if not, it allows us to evaluate which measures to take. Factoring in national trend and what the marketplace is dictating, the loss history also allows us to project what type of renewal increase the entity may receive.

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Negotiating the Best Rates. We are extremely effective in negotiating the best possible rates as well as the best possible cash flow incentives/alternatives at the time of initial enrollment and/or annual renewals.

For example, during one of our client's previous renewal periods, we initially negotiated the renewal from a 24% increase down to an 11% increase. Recognizing that they still had budgetary constraints due to pension debts and standard increases, we were then able to negotiate a 30-day deferral which provided the client with an additional \$500,000+ positive cash flow for that year. The deferral was paid back over twelve installments during the next year.

Another client received 38% increase that we negotiated down to a 19% increase. We then negotiated the 19% increase to a 15% increase with a 4% callable. The 4% callable amount was contingent upon the entity's Medical Loss Ratio (MLR) performing higher than 85% for the next contract year.

Innovative and Cost Effective Plan Designs. Fairview Insurance Agency Associates, Inc. can help develop innovative and cost effective measures that are realistic options for public entities. For example, we have presented the implementation of a Health Reimbursement Arrangement (HRA) to many of our public entity clients. Under the 1981 PERC case, *City of Newark FMBA vs. the City of Newark*, it was determined that the administration of a program is an item that can be grieved. We recognize these types of programs would be deemed as a change of administration and need to be negotiated with union leadership. We will analyze utilization reports to determine how to structure this program to the point where it is economically feasible for the entity and then convey such information to union leaders so that they understand the proposed program so that they understand and support the proposed program.

EMPLOYEE SUPPORT SERVICES

Customer Service Support. Fairview Insurance Agency was built on service. The client will have one dedicated account manager and one backup account manager from our office available to them Monday through Friday during normal business hours. The account manager will be responsible for all inquiries and issues, including claim appeals, benefit discrepancies, and any other day-to-day servicing issue that may arise. The account manager and the support staff have direct contacts at the carriers that enable us to “cut through the red tape” and have issues resolved in a timely manner. Furthermore, any inquiry or issue that is brought to our attention is documented along with any responses and results. We keep all documentation in an employee file in our secure HIPAA compliant system for future reference. Please refer to Tab #4 for an illustrative example of our Benefits Issue Tracking system.

Additionally, we provide an outside service, Health Advocate, that offers 24/7 access to handle all member problems. Fairview Insurance Agency will sponsor this program for the city. This service allows members with any medical problems to speak to and receive assistance from a trained medical professional. These professionals are typically Registered Nurses (RNs) who are supported by medical directors and benefit specialists that specialize in navigating through the intricacies of the healthcare system. As soon as a member contacts Health Advocate, they are immediately assigned a Personal Health Advocate (PHA) who works with the member until the problem is resolved. The PHA will handle all claims, benefits, and paperwork issues.

Please refer to Tab #5 for more information on this program.

Employee Education / Notification. Fairview Insurance will coordinate with the client’s administration to provide various employee educational materials. When the need arises, we will either create or obtain information to create supplements which pertain to benefit, legislative, or carrier changes. Any pertinent notifications will be communicated concisely and effectively.

All pertinent materials and support for new employees are also provided by Fairview Insurance. We can supply kits to the client for distribution, or we can conduct enrollment meetings for new employees. All appropriate documents and contact information will be provided by our office. Such information includes, but is

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not limited to, plan documents and summary plan benefit descriptions. Any benefit changes will be added to the plan documents before they are disbursed. Summary plan descriptions are distributed at the time of enrollment and upon request thereafter.

Benefit Reference Guides. Our agency provides each employee, including retirees and COBRA participants, with an employee reference guide. This guide summarizes each plan that Fairview Insurance Agency Associates manages, and includes group numbers and effective dates. In addition, it provides contact information for Fairview Insurance Agency Associates and your carriers. Please refer to Tab #6 for a sample.

Employee Benefits Website. Fairview Insurance provides and maintains a comprehensive online benefits portal that each employee and dependent is granted access to. Members have access to plan summaries and documents, enrollment forms, health and wellness resources, and much more. Please refer to Tab #7 for a sample website. You may also do a live demo by visiting http://demo.mybensite.com/fairview_rg

NUMBER OF EMPLOYEES:

Our firm currently employees 27 Employees; 18 of which hold New Jersey Insurance Producer Licenses.

JOB CLASSIFICATION(S) OF EMPLOYEES (Include resumes of Managers and Supervisors as well as those who will be assigned to provide services):

The following employees will be assigned to provide Employee Benefit Services to the City of Hoboken:

- Ryan Graham – Director of Business Development, Employee Benefits Division
- Julianne Graham – Senior Account Executive, Employee Benefits Division
- Jackie Benitez – Dedicated Account Manager, Employee Benefits Division
- Kim MacQuesten –Dedicated Account Manager, Employee Benefits Division
- Cristina Yezza – Eligibility Coordinator / Administrative Assistant, Employee Benefits Division

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Our service model is to provide exceptional service both quickly and accurately and our service is unparalleled in the industry, setting us apart. While other agencies direct clients and members to contact the carrier first, we advise all to contact us first so that we may effectively resolve any issue before it escalates or creates a hardship. We provide a myriad of services to all our clients, and are as involved as our clients prefer. All of our employee benefits staff is based in our Verona office.

We structure our department, and agency as a whole, in a way that allows us to provide complete service and management of our clients' employee benefits programs. We provide a team of knowledgeable and capable staff, each with specific expertise.

We structure our department, and agency as a whole, in a way that allows us to provide complete service and management for our clients' employee benefits programs. We provide a team of knowledgeable and capable staff, each with specific expertise.

Fairview has a specific plan proposed for the management and coordination of the account, which we find unique to our competitors. We pride ourselves on being a very hands-on and easily accessible agency.

Ryan Graham is the Director of Business Development and is responsible for managing and monitoring the overall progress of the insurance programs. He is available to meet with the governing body, business administrator, and all other members of staff that the administration would deem necessary on an as needed basis. Ryan is available for negotiations, presentations, arbitrations, and benefit program discussions / recommendations.

Julianne Graham is the Senior Account Executive and oversees all operations for the department. She is responsible for the RFP process upon renewal (including underwriting and market analysis), implementation of new plans or procedures, and oversees the management of the account on a daily basis. Julianne is available to meet with the administration at their convenience and as needed.

Jackie Benitez is the Dedicated Account Manger and has multiple functions for both the administration and their membership. She will meet with the Business Administrator (and anyone else) a minimum of once a month. Jackie performs bill reconciliations, assists in any administrative burdens, and answers any employee benefits related questions. All employees and dependents will have the ability to call our office from Monday through

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Friday during normal business hours (8:30 a.m. to 4:30 p.m.) and discuss any benefit issues with Jackie. Jackie is also responsible for maintaining the employee benefit website.

Kim MacQuesten is also a dedicated Account Manager and is available as support to Jackie Benitez, Ryan Graham, and Julie Graham when needed.

Cristina Yezza is the department administrative assistant / eligibility coordinator and is responsible for assisting Jackie with all eligibility changes.

Please refer to Tab #8 for staff resumes and licenses.

YEAR COMPANY WAS ESTABLISHED:

Fairview Insurance was established in 1970.

QUALIFICATIONS

This Vendor must have the ability to satisfactorily perform the required work by reasons of (1) experience in performing work of a similar nature; (2) demonstrated competence in the services to be provided; (3) strength and stability of the firm; (4) staffing capability; (5) work load; (6) record of meeting schedules on similar projects; and, (7) supportive client references. Vendor shall complete the Firm Qualifications form as well as providing the following information:

- **Provide a general description of the firm’s financial condition and indentify any conditions (e.g., bankruptcy, pending litigation, planned office closures, impending merger) that may impede Vendor’s ability to complete the project. The firm shall provide proof of a minimum of three consecutive years of demonstrated profitability as reference by audited financial statements by an independent, certified public accounting firm, the latest of which is dated not earlier than the previous twelve months from the date of submission of this RFQ.**

Fairview Insurance has been a privately held firm for over 41 years. Fairview has never filed for bankruptcy, no pending litigations, no planned office closures or impending mergers that would impede our ability to compete for this project. Fairview Insurance is not a public company therefore we are not required to provide audited financial statements.

- **Provide whether the firm of its principals are now or have ever been included in any bankruptcy, or re-organization proceedings, or have operated under a different name. If so, explain.**

Fairview Insurance has never been included in bankruptcy, re-organization proceedings, or operated under a different name.

- **Provide a minimum of five (5) references from clients for whom similar projects have been completed. Include the following information for each project:**

- **Name of contracting company or government agency**

1. Township of Bloomfield
2. Bloomfield Board of Education

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3. Township of West Orange
4. Township of Livingston
5. Borough of Caldwell

○ **Contact person's name, position, and current telephone number**

1. Bloomfield BA – Yoshi Manale – 973-680-4004
2. Bloomfield BOE BA – Mike Derderian – 973-680-8515
3. West Orange BA – Jack Sayers – 973-325-4050
4. Township of Livingston – BA – Michele Meade – 973-535-7973
5. Borough of Caldwell – BA – Paul Carelli – 973-466-4634

○ **Scope of services performed**

FAIRVIEW INSURANCE SERVICE OVERVIEW

At Fairview Insurance, we pride ourselves on our Risk Management Services and our abilities to properly insure the Public Entity. Through a series Risk Management controls we work proactively to ensure the entity is properly covered, working as safety as possible and costs are kept to a minimum. Fairview Insurance is available to accommodate any required meetings. Below is description of some of the relevant services performed routinely on Public Sector Accounts. Additional Risk Management Services are provided on an as needed basis.

Immediately Upon Being Appointed as Risk Manager

Fairview Insurance Associates will review all lines of insurance to insure that proper coverage is in place. This insures that there are no gaps in coverage and the public entity is fully covered. If we find there are gaps in coverage we make the necessary recommendations to the Business Administrator.

Examples of this review are:

- Review Quasi Entities to ensure they are classified correct and make determination as to whether coverage is afforded under the township or if separate coverage is needed.
- Review and ensure all Public Entity buildings appear on the statement of values.
- Review and ensure all vehicles are listed on the policy
- Review all workers compensation class codes and payrolls to ensure accuracy
- Ensure all key positions have surety bonds protecting against theft

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- Review and ensure all equipment appears on equipment schedule
- Review all current insurance policies, prepare an analysis and provide recommendations

Claims Management

Although there is no way to predict the severity of a claim or eliminate claim entirely there are a number of action items that the entity and risk manager can work on jointly to keep these claims to a minimum. Some examples are:

- *Promoting Self Inspection* - As Public Sector employees are present and on facilities full time an effective approach is self inspections. Quarterly safety checklists are completed by department heads are completed and reviewed to eliminate hazards.
- *Proactive Hazard Identification Walk Through* -Fairview Insurance will do periodic walk through of the facilities to identify the issues and make the necessary recommendations.
- *Streamline Claims Reporting Process* - Fairview Insurance reviews current Public Entity's Claims handling process. By helping to identify and documenting which department(s) or contacts are specifically assigned to report claims.

The benefits are:

- Minimize employee loss work time
- Reduce overall claim totals
- Avoid Claim Denials based on late or failure to report
- Employees back to worker sooner reducing the unnecessary exposure of overtime and soft dollar saving of having to train new part-time workers

Quarterly Claim Review and Interdepartmental Meetings

Claims can be minimized through the above actions, but accidents and injuries do occur. The purposes of Quarterly Claims Meetings are geared to promote communication and reduce the frequency of the claims. The following are services and benefits that are provided but not limited to the following:

- Review Title 59 Guidelines and the spirit of Sovereign Immunity
- Meet with department heads to review prior quarter's claims.
- Identify claim trends and specify what department the claims are coming from
- Based on these trends recommend a safety program to provide training where needed
- *These trainings review PEOSHA trainings facilitated through insurance carriers such as - Blood Borne Pathogens, Confined Space Entry, Excavation, Fire Safety,*

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Flagger/Work Zone Safety, Ladder Safety, Lock Out/Tag Out, Personal Protective, Equipment, Powered Industrial Trucks/Forklifts, Respiratory Protection, Hazcom, Spill Prevention, and Defensive Driving ECT.

Administrative Assistance

- Fairview Insurance works to reduce the insurance related administrative burden from Business Administrators. Our services include but are limited to the following:
- Continuous assistance to the Public Entity in identifying its insurable Property & Casualty exposures and to recommend professional methods to reduce, assume or transfer the risk of loss.
- Assist the Public Entity in the preparation of applications, statements of values, and similar documents requested by the Insurance Company of record.
- Review Certificates of Insurance from contractors, vendors and professionals, when requested by the Public Entity.
- Review the Public Entity premiums in the preparation of its annual insurance budget.
- Assist where needed in the settlement of claims, with the understanding that the scope of Fairview Insurance's involvement does not include the work normally done by a public adjuster.
- Contract Review: We will review, from a risk management standpoint, construction documents, lease agreements and other contracts which you provide us and we will offer our recommendations. This review will concentrate on insurance requirements; however, all contracts should be reviewed by legal counsel.
- Endorsements: Policy changes are handled on a special endorsement request form which is sent to the company and copied to you. It lets you know what changes have been ordered and on what basis. Please review the form to make certain the information is correct. When the endorsement is received, it is checked for accuracy and the premium is checked for correctness.
- Location Visits: The staff at Fairview Insurance Agency Associates, Inc., in conjunction with the insurance company, will visit job sites on an "as needed" basis to evaluate unique loss exposures which may result from your operations.

Renewal Policies

- Renewal Meeting: We will conduct a renewal meeting to determine your exposures for the coming policy year with approximately 60-90 days prior to expiration date. Some of the renewal topics discussed would include updating vehicles, payrolls,

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inland marine equipment, list of certificate holders, classifications, lease review, property values, driver information and audit review. We will prepare an annual report on such items as:

- Summary of Agency service activities during the past year
 - Brief review of major outstanding claims
 - Summary of premiums and loss experience
 - Our views of the marketplace and how it relates to you
- **Renewal Checklist:** We feel renewals are just as important as producing new business. Much time is spent reviewing renewal policies, reviewing all coverages, and making sure our insured receive the best coverages for what they are paying for.
 - **Renewal Policies:** We endeavor to have renewal policies to our clients prior to the renewal date. If this cannot be done for some reason, detailed binders of insurance are prepared confirming renewal coverage in effect. We do not take our clients for granted.
 - **Renewal Marketing:** We will facilitate the remarketing of your insurance coverages to various markets available to guarantee that the most comprehensive and competitive program is in place.
 - **Communication:** We will communicate on a frequent basis to discuss any particular issue not previously addressed within the service agreement. We are also available on request to provide assistance and consultation on risk management issues which are of concern.
- **Commencement and termination of dates of services**
 1. Township of Bloomfield – January 1 2002 to current
 2. Bloomfield Board of Education – July 1 2008 to current
 3. Township of West Orange – January 1 1998 to current
 4. Township of Livingston – January 1 2004 to current
 5. Borough of Caldwell – January 1 2008 to current

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○ **Approximate rates / fees earned from the contracting company**

Insurance carriers recognize the most effective way for their products to enter into the marketplace is through the insurance broker/consultant community. Therefore, insurance carriers have commissions automatically imputed into the rates. Joint Insurance Fund pays “Risk Management Fees” based upon premium assessment. The Standard Risk Management Fees for Hoboken would range between 6% to 7% based on the annual assessment.

○ **Status and comments**

- **Township of Bloomfield (2002 – Present)** - Fairview Insurance Associates established Risk Management Safety Program with special emphasis on Workers Compensation Safety. Patterns of claims were identified and trainings were recommended and implemented within the Township. Working closely with the department heads, the Township of Bloomfield was able to reduce their workers compensation claims which resulted in premium reductions.
- **Bloomfield Board of Education (2008 – Present)** - As Risk Manager Fairview Insurance established guidelines and helped implement a Safety Program to reduce claims which leads to premium reduction and stabilization. Continuous review of claims with administration to increase safety and reduce frequency accidents. Special effort to transfer the administrative burden from the School District to Fairview Insurance. Additionally Fairview Insurance attends Joint Insurance Fund Meetings as the representative and relayed any and all updates and changes in the insurance industry and how they related to the Bloomfield Board of Education.
- **Township of West Orange (1998 – Present)** - As Risk Management Consultant Fairview Insurance Associates examined policies from a coverage and pricing standpoint. Gaps in coverage were identified and placement into different Joint Insurance Fund was recommended. Negotiations on behalf of the Township were completed which resulted in an increase in coverage and a reduction in premiums. Quarterly safety committee meetings are done on an ongoing basis to maintain a heightened level of workplace safety awareness.
- **Township of Livingston (2004 – Present)** - As Risk Managers Fairview Insurance established a Risk Management Safety Program with special emphasis on Automobile Liability. We coordinated a computer sign up which allows the Township to check Motor Vehicle Reports free of charge with the State of New Jersey. Additionally enabled the Township to leverage the Joint Insurance Fund outside Loss Control Division to inspect all premises for auto fleet maintenance,

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proper valuation and loss prevention. Provided outline for the Township Safety Committee to conduct quarterly safety meetings.

- **Borough of Caldwell (2008 – Present)** – Fairview Insurance conducted our standard competitive business model. The goal was to reduce overall costs and increase services through competition. We went out to bid utilizing multiple various insurance vehicles and obtained multiple quotes. This resulted in an annual savings of over \$50,000 and significantly increasing the safety services and controls for all departments and department heads. Previously the annual assessments were increasing an average 8% a year and after the change in Joint Insurance Funds the average increase was reduced to 3%. After selecting Fairview Insurance the Borough of Caldwell is now paying less in 2010 than they were paying in 2006.

Recommended that the Borough Police Force become certified with an accredited Police Program to review, update and implement policies and procedures within the police force. This program will allow the police force to be able to accomplish more with less, reduce both workers compensation, general liability claims which leads to a decrease in premiums.

- **Borough of Roselle (2007 – 2010)** - As Risk Manager for the Borough of Roselle very significant financial reductions were achieved for the Workers Compensation line of Insurance. Fairview Insurance did an overall analysis of areas relating to Workers Compensation relating to legitimacy of workers compensation claims, employee workplace safety awareness, Physician Networks, Accident Investigations and other areas. Fairview Insurance recommended a Workers Compensation Project Plan that was approved and implemented. The results were dramatic. Annual Saving of Workers Compensation Premiums of over \$75,000 were achieved, over \$30,000 of one time billing mistakes were uncovered and safety was at this highest levels in years.

Additionally, Fairview Insurance identified 4 Public Official Claims that were originally denied due to late reporting. Through negotiation and leverage of experience we were able to have the insurance company rescind the declination of the claims. This resulted in a saving of legal fees and settlement cost of over \$150,000.

- **Housing Authority of City of Passaic (2008 – Present)** - Fairview Insurance identified a strong need for specific trainings. Wrongful termination, harassment and other EPLI claims are on the rise and the best way to control frequency and severity is proactive trainings. Fairview Insurance recommended

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and coordinated an all day 3 session Employment Practices training. This included Employee Conduct, Conflict Resolution & Stress Management.

- **Cherry Hill Township - (1994 - 2008)** Fairview Insurance reduced premiums overall by \$2.8 million. Established a safety and risk management committee that led to favorable loss experience and increased employee safety which helped the Township finish 2nd among 42 municipalities for overall safety awards for 2006 & 2007.
 - **North Jersey Water District - (2001 - Present)** As Risk Managers Reduced premiums by \$1,620,000. Coordinated Safety Program with Insurance Carriers. Reviewed contracts for outsourcing of services.
- **Comprehensive list of firm's active relationships with insurance carriers and related products:**

Fairview has excellent relationships with all of the insurance carriers in New Jersey.

- a. Garden State Joint Insurance Fund
- b. New Jersey School Boards Association
- c. Suburban Essex Joint Insurance Fund
- d. Bergen County Joint Insurance Fund
- e. Housing Authority Joint Insurance Fund
- f. Utilities Joint Insurance Fund
- g. The Hartford
- h. Greater New York
- i. Chartis
- j. Travelers Insurance
- k. Selective
- l. Utica National
- m. Franklin Mutual
- n. Zurich Environmental

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FIRM QUALIFICATIONS

COMPANY NAME:

Fairview Insurance Agency Associates, Inc.

COMPANY LOCATIONS:

25 Fairview Avenue

Verona, NJ 07044

973-857-0870

COMPANY OVERVIEW, PRINCIPAL ACTIVITIES, ETC.:

Our service model is to provide exceptional service both quickly and accurately and our service is unparalleled in the industry, setting us apart. Fairview Insurance prides ourselves in managing all aspects of the Property & Casualty Insurance. This includes all coverages that are within the Joint Insurance Fund and all related coverages that must be placed outside the Joint Insurance Fund. Additionally we are the primary point of contact for insurance inquiries, claims reviews, and safety trainings to reduce the frequency of workplace accidents and claims related to the City. While other agencies direct clients and members to contact the carrier first, we advise all to contact us first so that we may effectively resolve any issue before it becomes escalated to minimize the impact to the City. We provide a myriad of services to all our clients, and are as involved as our clients prefer. All of our staff that will be managing the Risk Management servicing needs are located at our Verona office. Additionally we have a part of the team lives and is located in the City of Hoboken for an immediate response.

We structure our department, and agency as a whole, in a way that allows us to provide complete service and management for our clients' employee benefits programs. We provide a team of knowledgeable and capable staff, each with specific expertise.

Glenn Jacobs, CIC Executive Vice President of Property casualty Division – Is responsible for Risk Management for Public sector accounts. Glenn will be the primary point of contact and will perform account renewal assistance, client risk management analysis, loss control coordination and act as the insurance carrier liaison. Glenn has over 25 years experience in the industry and currently serves on the Garden State JIF's Employment Practice Liability Insurance committee.

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Zach Edelman, Director of Business Development – Secondary point of contact and responsible for visits with the clients, loss control and claim management assistance to assure client profitability and appropriate insurance analysis. Zach will assist Glenn and will help coordinate the various servicing needs of the client.

Dawn Barbieri, Commercial Line Manager – Responsible for underwriting of new and renewal Public Sector business. Dawn will handle client’s inquiries regarding insurance coverage and will manage the account on a daily basis to assure that the customers’ needs are met. Dawn has over twenty years of experience in the industry.

Anne Campagna, Account Manager who is responsible for providing high quality client service which includes marketing, assistance with routine coverage questions, endorsement processing, certificate of insurance coordination, problem solving, billing and policy review. Anne has over 20 years experience in the insurance industry and will assist Dawn on a daily basis.

NUMBER OF EMPLOYEES:

27 Employees

JOB CLASSIFICATION(S) OF EMPLOYEES (Include resumes of Managers and Supervisors as well as those who will be assigned to provide services):

Glenn Jacobs – Property and Casualty - Vice President

Zach Edelman – Property and Casualty - Director of Business Development

Anne Campagna – Property and Casualty - Account Manager

Dawn Barbieri Property and Casualty – Public Sector Commercial Lines Account Manager

Please see attached for resumes

YEAR COMPANY WAS ESTABLISHED:

Fairview Insurance was established in 1970.



Fairview Insurance Agency Associates, Inc.
Public Sector Clientele

Client	Line of Coverage	Contact	Contact #
Township of Bloomfield	Medical Prescription P&C / Risk Manager	Yoshi Manale, Business Administrator	973-680-4004
Township of West Orange	Prescription Medical Dental P&C / Risk Manager	Jack Sayers, Business Administrator	973-325-4050
Township of Livingston	Dental Disabilitiy P&C/ Risk Manager	Michele Meade, Business Administrator	973-535-7973
North Jersey District Water Supply Commission	Medical Prescription Dental Life P&C / Risk Manager	Colleen DeStefano, Assistant Executive Director	973-831-6286
Borough of New Providence	P&C / Risk Manager	Wendi Barry	908-665-1400
Lake Hopatcong Water Commission	P&C / Risk Manager	Donna McCalle-Holly	973-601-1070
Mercer County Improvement Authority	P&C / Risk Manager	Randy Jacobs	609-278-8085
Borough of Caldwell	Medical Prescription Dental P&C / Risk Manager	Paul Carelli, Business Administrator	973-466-4634
Township of Parsippany - Troy Hills	Medical Prescription Dental Vision Life	Jasmine Lim, Business Administrator	973-263-4391
City of Passaic Board of Education	Prescription Vision Dental Disability	Henry Lee, Business Administrator	973-470-5241
		James Shoop, Assistant B.A.	973-470-5242
Roselle Board of Education	Medical Prescription Dental	Luiggi Compana, Business Administrator	908-298-2040
Borough of Roselle	Medical Prescription Dental Disability	David Brown, Business Administrator	973-245-5600



Bloomfield Board of Education	Medical Prescription Dental P&C / Risk Manager	Michael Dederian, Business Administrator	973-680-8501
City of Orange Township	Medical Dental Prescription	John Mason, Business Administrator	973-266-4010
Western Monmouth Utilities Authority	P&C/Risk Manager	Michael Dimino, Executive Director	732-446-9300
Housing Authority City of Passaic	P&C / Risk Manager	Victor Cirilo, Executive Director	973-365-6330
Township of Lopatcong	Dental Life / Disabilty	Beth Dilts, Business Administrator	908-859-3355
Borough of Northvale	P&C / Risk Manager	Donna Gambutti, Deputy Clerk	201-767-3330

RAYMOND J. McCARTHY
MAYOR

E-mail:
mccarthy@bloomfieldtwpnj.com



Telephone
973 • 680 • 4080

Fax
973 • 680 • 4040

TOWNSHIP OF BLOOMFIELD
NEW JERSEY 07003-3487

June 2, 2010

Mr. Ryan Graham
Fairview Insurance Agency Associates, Inc.
25 Fairview Avenue
Verona, NJ 07044

Dear Mr. Graham:

On behalf of the Township of Bloomfield, we greatly appreciate the work accomplished by your agency. In 2006, your agency was responsible for saving our Township over \$600,000 in medical and prescription premiums. In addition, your assistance in our collective bargaining negotiations has enabled us to achieve an additional significant savings. On top of the savings, the administrative staff, employees and dependents have received superb service that has exceeded our expectations.

We are pleased with your performance and look forward to the continued high level of service.

Very sincerely,

Raymond J. McCarthy

Bloomfield Board of Education
Office of the Business Administrator/Board Secretary
155 Broad Street
Bloomfield, NJ 07003

June 2, 2010

Ryan Graham
Fairview Insurance Agency Associates, Inc.
25 Fairview Avenue
Verona, NJ 07044

Dear Mr. Graham:

The Bloomfield Board of Education is a school district with 6,000 students and an operating budget of \$85M. It is with great pleasure to identify the efforts of your company.

The staff handles all insurance declaration page requests in an expeditious manner. As for your ability to handle Health benefits, your firm is second to none. I always have my issues pertaining to budget, coverage's, or general health concerns, answered immediately. Within the first 30 days with the district, you were able to reduce our premiums by approximately \$100,000 by renegotiating our existing contracts.

If I could be of any assistance, please feel free to call me at 973-680-8515.

Sincerely,



Michael Derderian
Business Administrator

TOWNSHIP OF

Parsippany-Troy Hills



Department of Administration

Jasmine L. Lim
Business Administrator

1001 Parsippany Boulevard
Parsippany, New Jersey 07054 • 973-263-4391

June 4, 2010

To Whom It May Concern:

I am herein providing a reference for the Fairview Insurance Agency. Fairview has served as co-broker for the Township of Parsippany - Troy Hills' employee health benefits for almost four (4) years. During that time Fairview has negotiated renewals for the Township, provided assistance to employees to resolve health insurance issues and provided valuable advice and guidance regarding negotiations with collective bargaining units.

During the first year that Fairview worked on the medical renewal, the Township was able to realize a \$600,000 savings by contracting directly with Horizon rather than staying in the State Health Benefits Plan. For the 2010 calendar year, Fairview negotiated a contract with CIGNA that provided a \$668,000 savings over the renewal quote provided by Horizon.

Fairview's large portfolio of, and years of experience with, public sector clients has provided Fairview staff with a wealth of experience and knowledge on public sector employee benefits trends and contract negotiations. Over the years, several cost savings changes in medical, prescription and dental benefits were effectuated.

I have found Fairview to be very responsive to the Township and pro-active in sharing information with the Township on the Health Care Reform Act, Medicare and other human resources / employee benefit issues. Fairview seems to enjoy a good relationship with most of the insurance carriers and the Township has benefited from these good relations.

If you have any questions, please feel free to contact me at the above number or email address.

Sincerely,

Jasmine L. Lim
Business Administrator

COMMISSIONERS
CARMEN A. ORECHIO
CHAIRMAN
NUTLEY, NJ
LOUIS A. CUCCINELLO
VICE CHAIRMAN
MALEDON, NJ
CHARLES P. SHOTMYER
FRANKLIN LAKES, NJ
BRENDA C. SHERMAN
NUTLEY, NJ
MICHAEL T. CRICCO
HOBOKEN, NJ
JOSEPH TEMPESTA, JR.
WEST CALDWELL, NJ
ALBERT MANZO
PATERSON, NJ



ONE P.A. ORECHIO DRIVE
WANAQUE, NJ 07446
973-836-3600 FAX: 973-836-6701

MICHAEL J. RESTAINO
EXECUTIVE DIRECTOR
COLLEEN D'STEFANO
DEPUTY EXECUTIVE DIRECTOR
ANGELO M. VALENTE
COMMISSION SECRETARY

June 4, 2010

Mr. Ryan Graham
Fairview Associates
25 Fairview Avenue
Verona, NJ 07044

Dear Mr. Graham:

I wanted to take this opportunity to thank you for all the help and excellent service Fairview has provided in assisting the Commission with its employee insurance needs, including most recently assisting us in reducing our claims experience and thus saving the Commission considerable money in its premiums.

I also wanted to thank you for your help in educating and convincing our employees to voluntarily move to the less expensive Direct Access option of our hospitalization and major medical insurance as well as working with our prescription provider to offer an incentive to our employees to choose less expensive generics. Both of these measures saved the Commission considerable expense without forcing a reduction in benefits.

Finally, I will thank you for providing special service for some of the unique circumstances our employees encountered in dealing with some of their illnesses. We very much appreciate the assistance you provided and the fact that you went the extra mile for the Commission and its employees. I would recommend Fairview to anyone.

Sincerely,

Colleen DeStefano
Deputy Executive Director

Wellness Coaches USA

“Workplace wellness initiatives to accomplish large scale reductions in employee population health risks have become a national business imperative.”

As a result, employers of all sizes and business classifications, throughout the country, are working to develop effective workplace wellness initiatives. Unfortunately, most are struggling to find wellness alternatives capable of “engaging” the large number of employees necessary for the achievement of workplace wellness success.

The Solution: Onsite Wellness Coaching...

...a workplace wellness model which is gaining increasing recognition throughout

the wellness world as the wellness approach most capable of

substantively improving employee population health risks.

A. Enter Wellness Coaches USA!

We are the largest, most highly developed and experienced national provider of onsite wellness coaching. In fact, recognizing the need for a more powerful approach to workplace wellness, our original and sole business purpose was, and remains, the creation and distribution of a workplace wellness model planned and structured to specifically and exclusively accommodate the reality of onsite wellness coaching.

Our application of this model, operating through our proprietary delivery methodology, engages more employees in wellness coaching than ever before possible (a remarkable 60% to 80% of employees, every year), and capitalizes upon such extremely high engagement levels to achieve outstanding improvement in employee population health risks.

We do so by “taking wellness to the people”, right where they spend the majority of their waking hours...the workplace.

Without such large-scale engagement in wellness coaching, it is very difficult to achieve employee population wellness success; and, as such high levels of engagement are rarely achieved by the commonly prevailing telephonic and internet coaching delivery methodologies, our “onsite” process has proven to be **distinctive in the wellness marketplace.**

B. Wellness Coach Deployment

More specifically, our onsite wellness coaching process works through the deployment of our Wellness Coaches directly to our customers’ workplaces. There, in the workplace, our Wellness Coaches make regular, scheduled and rotating rounds throughout all departments, work groups and locations. During our rounds, our Wellness Coaches “reach out” to employees; personally, regularly and systematically interacting with them to develop their interest in wellness and their readiness to improve, and to provide a forum for them to initiate engagement in wellness coaching when they are ready to do so.

In the process, we touch virtually 100% of employees; not only educating and building their self-awareness, but really getting to know them and what makes them tick; building their trust and their interest in wellness; encouraging discussion regarding their own health needs and goals; steadily moving them to an interest in taking action to improve; and then, most importantly, engaging them in wellness coaching to support their efforts to improve those lifestyle behaviors and health risks that are important to them in their own lives.

Scope of Work and Staffing

A. Scope of Work

We propose to provide **Fairview Insurance's client** with our wellness coaching services for their clients' **employees** working at their various City locations. Our wellness coaching process will be comprised of a proactive, integrated, ongoing and systematic series of personal, private, one-on-one and face-to-face interactions between our wellness coaches and your employees. Through this very human process, and the personal relationships it fosters, our Wellness Coaches will provide your employees with wellness coaching, and the supplemental educational, testing, and promotional resources we provide.

B. Staffing

Our process will be implemented through the deployment of our highly trained staff Wellness Coaches directly to your workplace, to make regular, scheduled and rotating rounds, interacting with all employees, right where they work. Your Wellness Coaches will be a health care professional, trained to deliver our services in the workplace, and will have an athletic training, exercise physiology, rehabilitation, corporate wellness, or health promotion backgrounds.

Our Process (Here's how it works)

A. Implementation

Our process will be initiated by a startup campaign designed to educate your employees regarding our process mechanics, and to stimulate their interest and enthusiasm. This startup effort generally includes some combination of group meetings for all employees, as well as the dissemination of hard copy educational and promotional material (posters and bulletin boards, emails, flyers, etc.).

Then our process begins. It is implemented by our staff Wellness Coaches deployed directly to the workplace to make regular, scheduled and rotating rounds, pursuant to an agreed upon schedule, throughout all departments, work groups and locations to interact, face-to-face, with employees (in a non-disruptive fashion). Our Wellness Coaches, who are all our employees, are deployed to our customers for a predetermined number of hours per week (generally ranging from 8 hours, to multiple full time coaches, each dedicated 40 hours per week). Each Wellness Coach is responsible for undertaking activities as customized for each of our customers, though generally including an average of between 35 and 45 interactions (between 3 and 15 minutes each) with individual employees each 8 hour day.

Lifestyle issues which our Wellness Coaches are prepared to address include nutrition and healthy eating, exercise, diet and weight loss, smoking cessation, substance abuse, and medication noncompliance, and the chronic health conditions such behaviors cause. In addition, our Wellness Coaches will be available, as our customers determine, to coach employees on how to avoid, prevent, self-manage, and otherwise address the common musculoskeletal conditions or symptoms (work related or otherwise) that may impede an employee's ability to perform his/her job and/or lead to (or exacerbate) injury if not addressed.

B. Our Workplace Presence: Head-Start on Engagement

Before describing our process below, we note that our very presence in the workplace gives us a strong advantage and head-start in stimulating engagement. That's because, first, the workplace is the only place where employees are truly available and accessible (in concentration), allowing us to reach out to them proactively and efficiently. Next, unlike telephonic and web-based coaching resources which are most often only "useable" during employees' "off hours", our wellness coaching is highly visible, convenient, and "on the clock", making it readily available and painless for employees to engage.

Perhaps most significantly, our regular presence in the workplace gives us the opportunity to develop personal and trusting relationships with employees, making it possible for employees "in turn" to work on issues of importance in their lives with people they know and trust, rather than just "voices on the phone", or "messages online". As a result

we transform wellness from the remote and impersonal to the human, familiar and very personal; making it very natural and comfortable for employees to engage.

C. First: Building Trust and Rapport/ Driving Interest and Engagement

In addition to the boost to engagement provided by our very presence in the workplace, we have designed our process to physically utilize our presence in the workplace to further enhance employee engagement through ongoing interactions between our Wellness Coaches and the employees we serve. This means that our Wellness Coaches do not merely hope employees will engage as a result of our presence and availability (though many will do so). Rather, our coaches “reach out” to employees; personally, regularly and systematically interacting with them during rounds throughout the workplace to develop their interest in wellness and their readiness to improve, and to provide a forum for them to initiate engagement in wellness coaching when they are ready to do so.

More specifically, this component of our process consists of a regular, systematic and proactive flow of coach-initiated interactions with employees (3 to 5 minutes each) during which our **Wellness Coaches:**

- (1) First, make rounds throughout the workplace to **introduce** themselves personally to employees, **promote** our program and its benefits, and **explain** its mechanics.
- (2) Continue, on a regular and ongoing basis, their periodic rounds throughout the workplace, distributing and discussing **health and wellness information** customized for each employer we serve.
- (3) Concurrently, during their rounds (a) **administer**, either on demand or via scheduled events, blood pressure and BMI testing, (b) **conduct** small group educational sessions (lunch ‘n learns, seminars, etc.), and (c) **promote and help develop and implement** structured health promotion programming (weight-loss competitions, walking/exercise programs, etc.).
- (4) Promote participation in any other health management resource our customers determine appropriate (disease management, EAP, Nurse Hotline or other telephonic/web-based resources)

All of these interactions permit our Wellness Coaches to reach and touch virtually 100% of employees; not only educating and building employee self-awareness, but really getting to know them; building their trust; learning what makes them tick; promoting health and wellness values; building their interest in wellness; establishing themselves as the “go to” resource for help with health and wellness issues; encouraging discussion regarding personal health and wellness needs and goals; steadily moving more and more employees to an interest in taking action to improve.

D. Next: “Employee Engagement”

Then, as a result of our continuous presence and interaction, **employees in increasing numbers initiate engagement with our Wellness Coaches** for coaching support for their personal efforts to improve their lifestyle behaviors and health risks...**60% to 80% of them**, every year. We achieve this level of success for all of our customers, of all sizes, in all business classifications, throughout the country.

E. Then: We Coach!!!

Workplace wellness coaching is the core of our onsite wellness process. That’s because, from our perspective, it is the “key” to wellness success. Very few of us, on our own, make the lifestyle changes necessary to optimize our health; even though we know that our health status is driven by the way we lead our lives. The reality is that we can’t just want, or know how to do things differently. Wanting and knowing are not enough. To really make lasting improvements in the way we live our lives, we need someone to support our efforts, to help us stay on track...to be our ally...to stand with us to help us find, within ourselves, the will and commitment needed to initiate, manage and sustain change. **That’s why employers are increasingly turning to wellness coaching as the only wellness resource that can effectively provide their employees with the support they need to finally take “action” to improve their health behaviors.**

Specifically, we provide our customers' employees with one-on-one, individualized, live and face-to-face wellness coaching to support their efforts to take action to change and improve risky lifestyle behaviors (or otherwise deal with those health issues of importance to them and their families). Our coaching interactions take place right in the workplace either on a spontaneous basis as our Wellness Coach makes their regular and scheduled rounds throughout the workplace, on a scheduled basis, or by appointment in areas designated for such purpose.

Our coaching process is comprehensive and customized to meet the unique needs of each employee we serve. The goal is to move them steadily, each at their own pace and according to their own personal and unique needs, through the stages of change to sustained behavior and health improvement. Components of the process include, as necessary to accommodate the needs of each person coached:

- ❖ Helping them, through education and coaching methodology, understand their own needs and goals, and the benefits of self-improvement
- ❖ Helping them visualize what improvement would mean for their lives
- ❖ Building confidence, self responsibility and self efficacy; fostering accountability
- ❖ Setting realistic, achievable, meaningful goals
- ❖ Building skills and providing tools; solving problems; guiding, supporting
- ❖ Overcoming obstacles
- ❖ Preventing relapse
- ❖ Celebrating success

F. And the Process Continues...

And the process continues...right in the workplace; personally and face-to-face; educating, testing, promoting, driving readiness to change, and, most importantly, COACHING; with all process components working together as an integrated whole; continuously shifting and adapting to meet the ever-changing needs of employees; moving them through the stages of change to sustained improvement in lifestyle behaviors and health risk factors.

Our Wellness Coaches

The core, or the "heart", of our service model is one-on-one and face-to-face wellness coaching to help and support employees' efforts to improve their lifestyle behaviors and health risks. That is why we are committed to developing and continuously building the professional coaching expertise and competence of our Wellness Coaches. For us, wellness coaching is not just about putting somebody in the workplace and calling them a coach. It is not episodic or part time, nor is it simply wellness coordination, education or promotion, with a little counseling thrown in. **It is a specialized profession and competence that is based upon scientific methodology that must be learned and practiced.**

A. Qualifications

Our Wellness Coaches are health care professionals trained by us to deliver our services in the workplace. They generally have exercise science (athletic training, exercise physiology, etc.), nutrition, rehabilitation, corporate wellness or health promotion backgrounds. We generally undertake to recruit and hire local residents to fulfill our staff needs. More specifically, our coaches are all our employees, and all must (1) have at least an undergraduate college degree (many of our coaches have advanced degrees) in a healthcare field, such as athletic training, exercise physiology, corporate wellness, health promotion, and occupational therapy, (2) have 3+ years experience in their chosen specialty, and (3) be "people" people, outgoing and confident, extremely conscientious, able to work independently, and very hard working.

B. Training

In addition, all coaches participate in our initial coach training process which includes; (1) classroom training, (2) visits to customer locations similar to their initial assignments to shadow senior coaches, (3) onsite startup support from senior coaches and managers, (4) ongoing mentoring process. In addition, and most importantly we have developed our own, internal coach training platform to provide our coaches with initial and continuing education and instruction in coaching psychology and methodology.

C. Our Coaches' Creed

I'm here to partner with you and support your efforts as you travel down the path to a healthier tomorrow. I'll provide health information, advice and education, as well as connect you with the resources you need to be successful. I will listen intently to you. I'll help you set goals and develop an effective plan for their accomplishment. I'll help you identify solutions that work best for you. I'll encourage you to look inside yourself and challenge the mindset that works against you, and help you discover the motivation to propel you forward. I'll call upon you to do the work it takes to succeed...

And I will always believe in you.

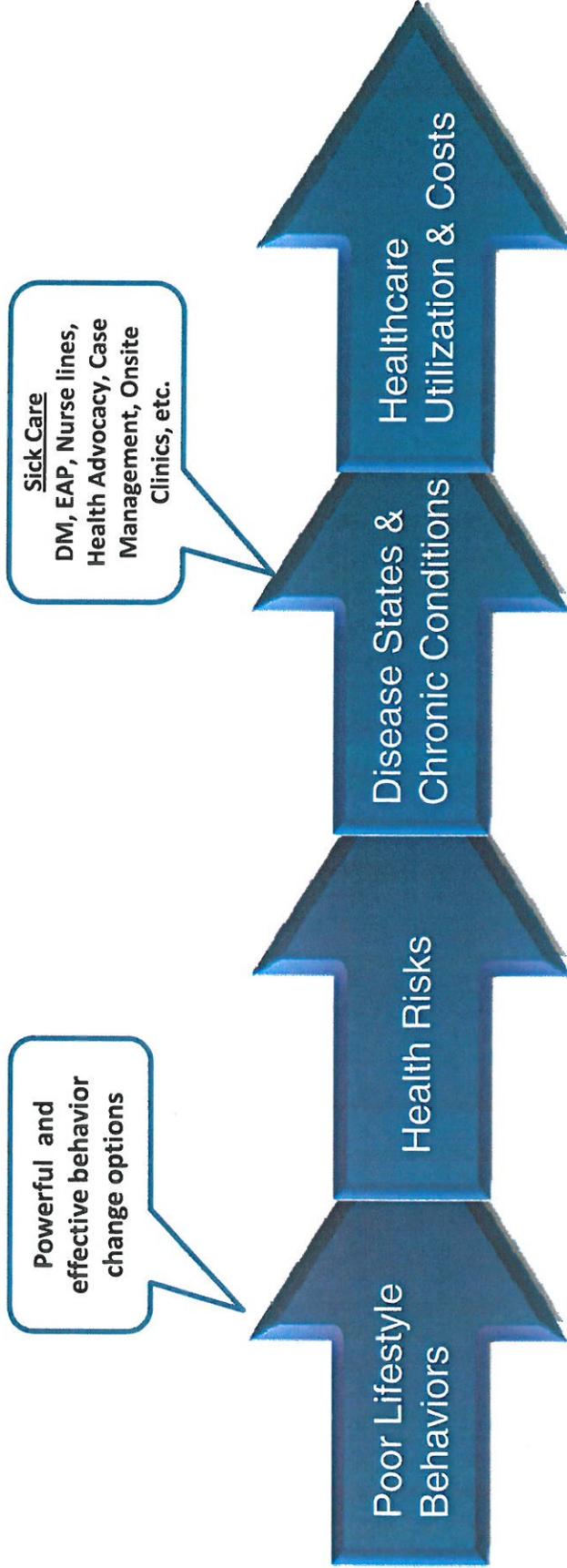


Wellness Coaches USA

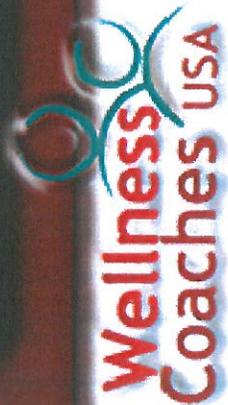
Improving health in the workplace...face to face

We're on an Unsustainable Path...

There are TWO places where a company can focus efforts to contain costs....
However at **ONLY ONE** can you truly begin to solve the problem. **We must stop the flow.....**



The research has proven that the cost of waiting for people to get sick far exceeds the cost of helping healthy people stay healthy.

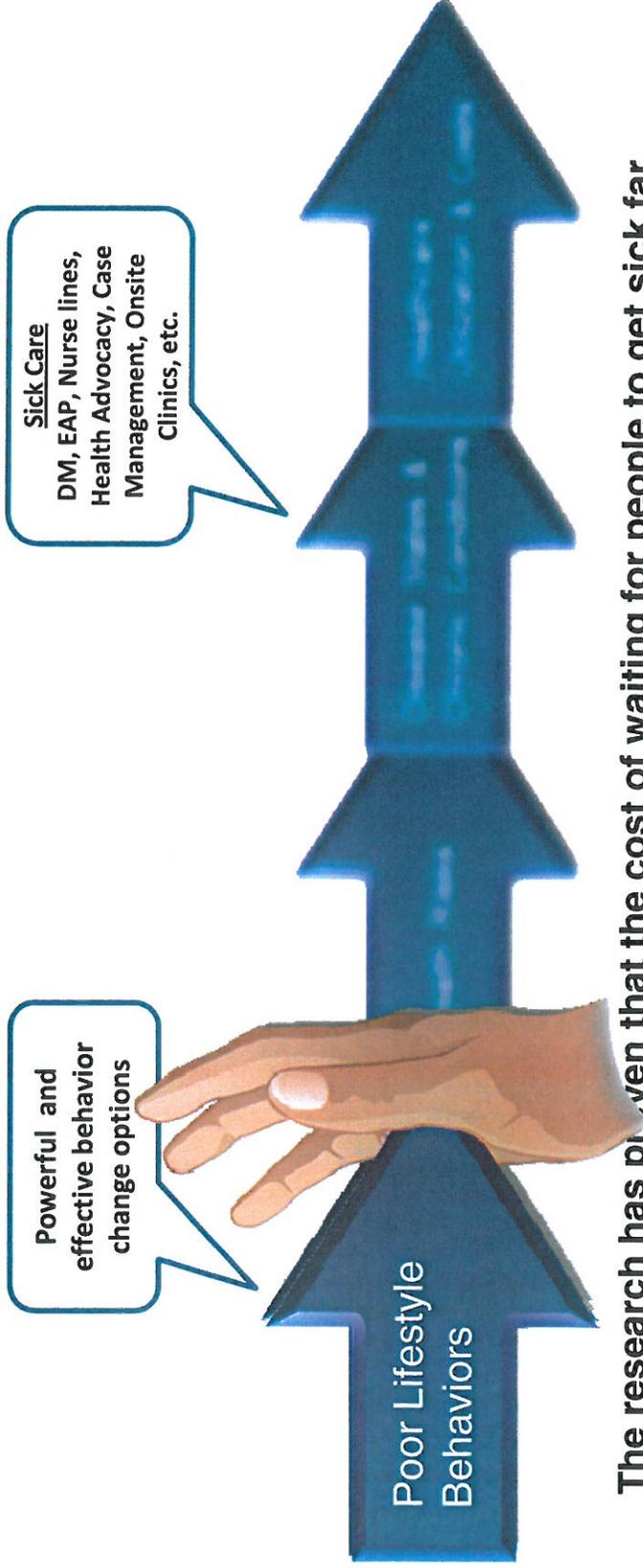


Improving health in the workplace...face to face



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Choosing the Right Behavior Change Option

Does the behavior change option meet the following 5 criteria:

- **Total Population Engagement** – Does it move virtually the entire workforce (90-100%) toward improving risky, or maintaining healthy, lifestyle behaviors?
- **State-of-the-Art Coaching** – Does it include a well-developed and state-of-the-art coaching option, delivered by highly trained health/wellness coaches, and is it based upon scientifically validated behavior change theory and practice?
- **Large Scale Health Risk Reductions** – Does it have a proven ability to produce large scale health risk reductions for the entire population?
- **Produce an ROI** – Has it shown an ability to produce an attractive ROI?
- **Cost Effective** – Can it be delivered cost effectively?



WCUSA Meets all 5 Requirements

Our unique and powerful **coach embedded** onsite model is the only behavior change model available in the wellness marketplace that simultaneously delivers:

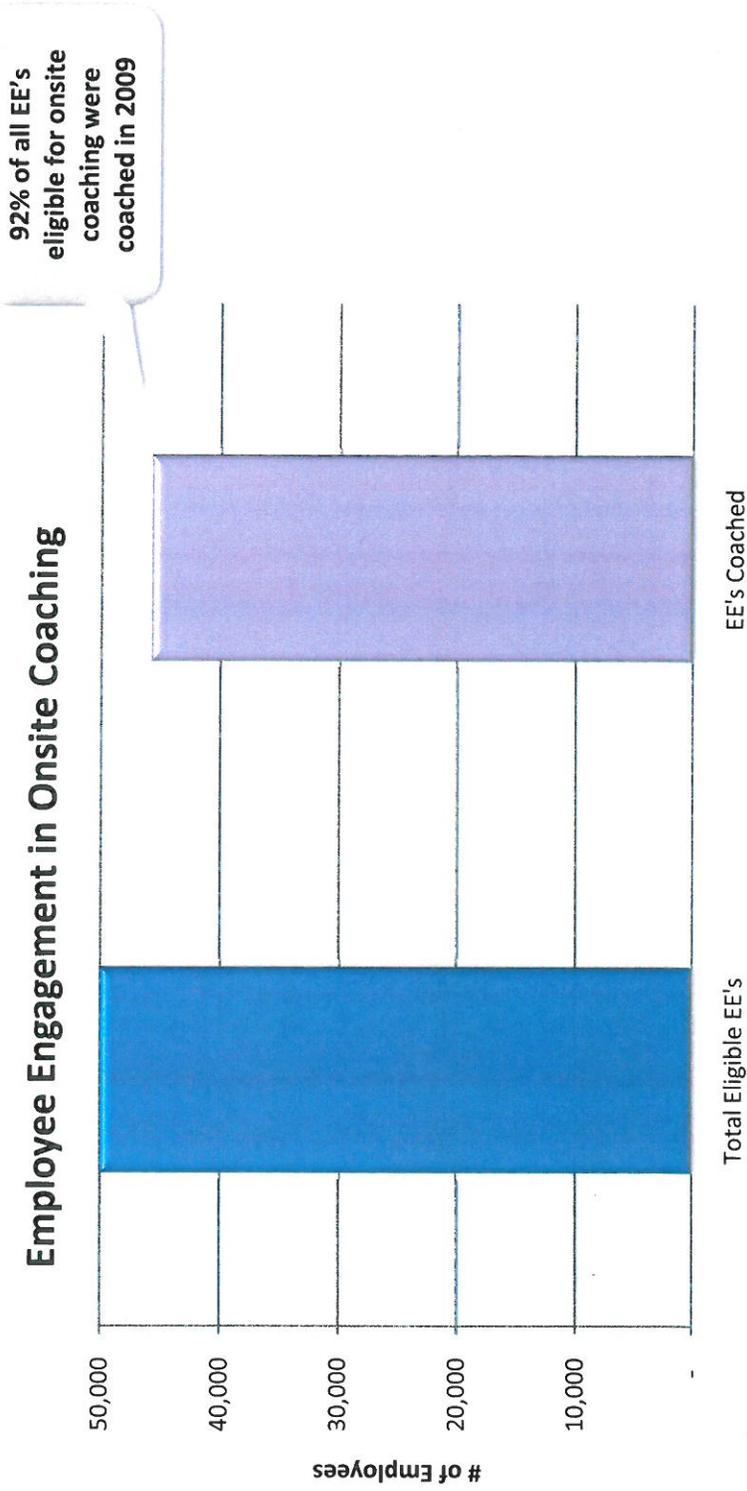
- 1. Total Population Engagement**
- 2. A highly developed, professional onsite, face-to-face coaching process**
- 3. Larger scale health risk improvements than ever before possible**
- 4. Very impressive ROI**
- 5. Lowest possible cost per employee coached**



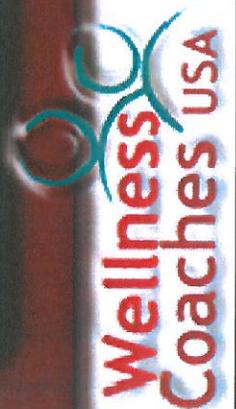
Improving health in the workplace . . . face to face



WCUSA Meets all 5 Requirements - 1. "Total Population Engagement"



Source: Data from WCUSA coaching software for all customers serviced during 2009.



Improving health in the workplace...face to face

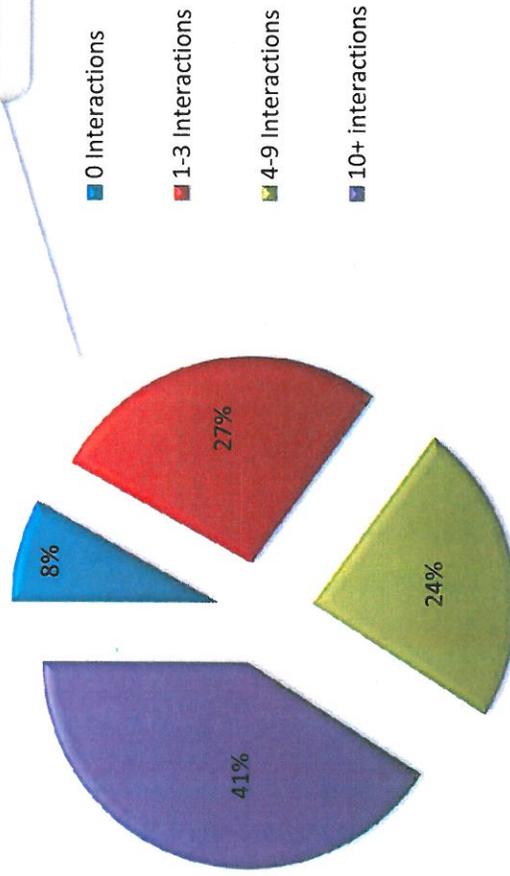


WCUSA Meets all 5 Requirements

1. "Total Population Engagement"

Employee Engagement
(One-on-One Coaching Interactions per EE during 2009)

WCUSA averaged 12.5 one-on-one coaching interactions per EE during 2009



Source: Data from WCUSA coaching software for all customers serviced during 2009.

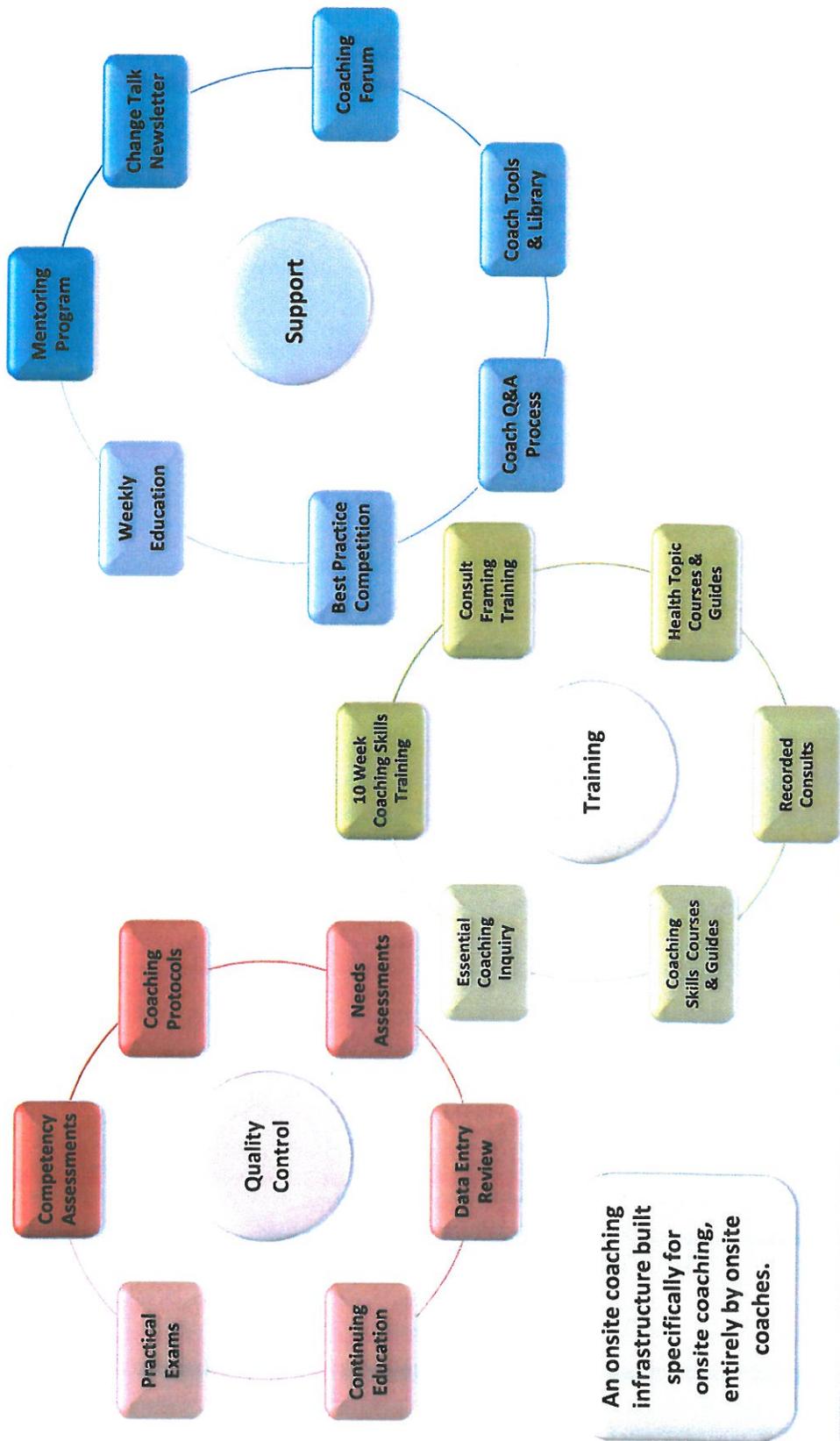


WCUSA Meets all 5 Requirements - 2. “State-of-the-Art Coaching”

- Onsite coaching is now emerging as the most powerful approach to change behaviors.
- WCUSA has been providing and refining our onsite coaching process for almost 10 years.
- WCUSA provides the most high quality, highly developed, professional **onsite** wellness coaching process available in the industry.
- We have developed an entire infrastructure to accommodate the onsite delivery of wellness coaching, including training, support and quality control features.



Here's what High Quality Coaching means to us....



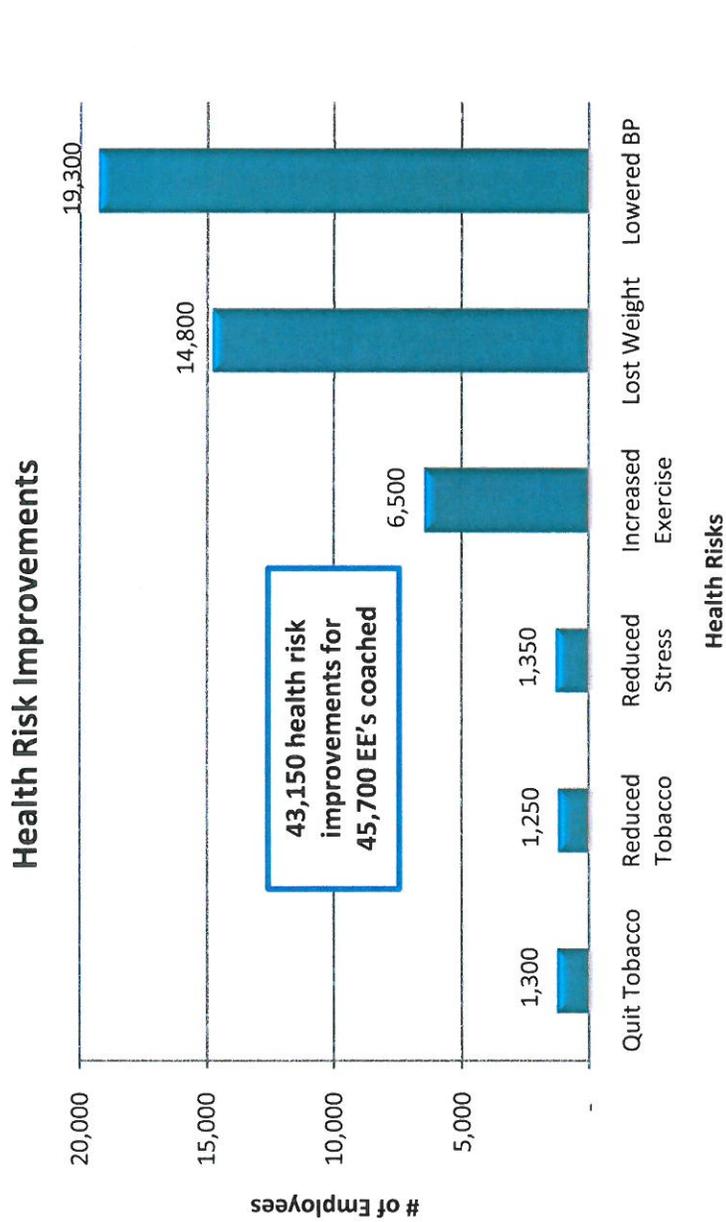
An onsite coaching infrastructure built specifically for onsite coaching, entirely by onsite coaches.



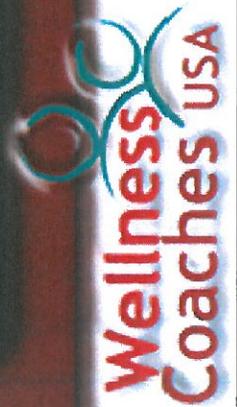
Improving health in the workplace...face to face



WCUSA Meets all 5 Requirements - 3. "Large Scale Health Risk Improvements"



Source: Data from WCUSA coaching software for all customers serviced during 2009.



Improving health in the workplace...face to face



WCUSA Meets all 5 Requirements - 4. “Impressive ROI”

- **Example 1: Population Healthcare Costs**
 - City of Las Vegas World Congress Outcomes

- **Example 2: Workers’ Compensation**
 - Large National Transportation Company

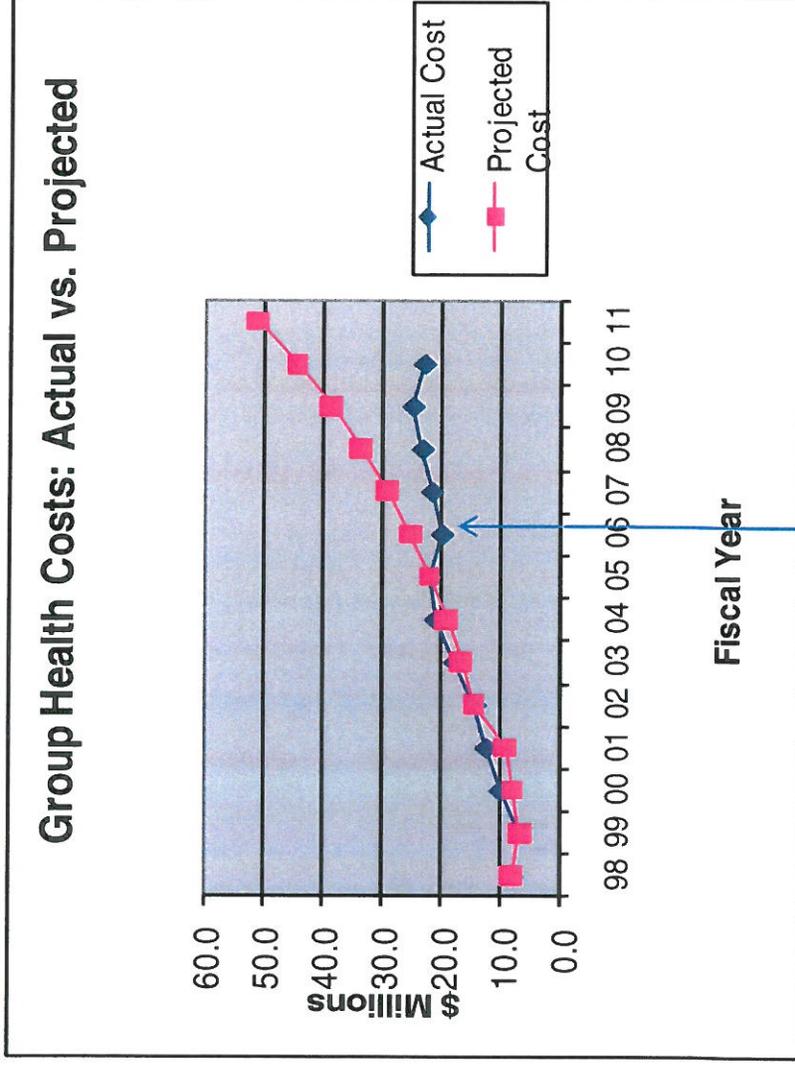
- **Example 3: Health Risk Factor Valuation**
 - Thomson Healthcare Study



WCUSA Meets all 5 Requirements - 4. “Impressive ROI”

Example 1:

- City of Las Vegas @ World Congress
- Group Healthcare costs remain flat for past 5 years
- Current year total costs nearly \$20M less than previously projected in 2005.



Improving health in the workplace . . . face to face

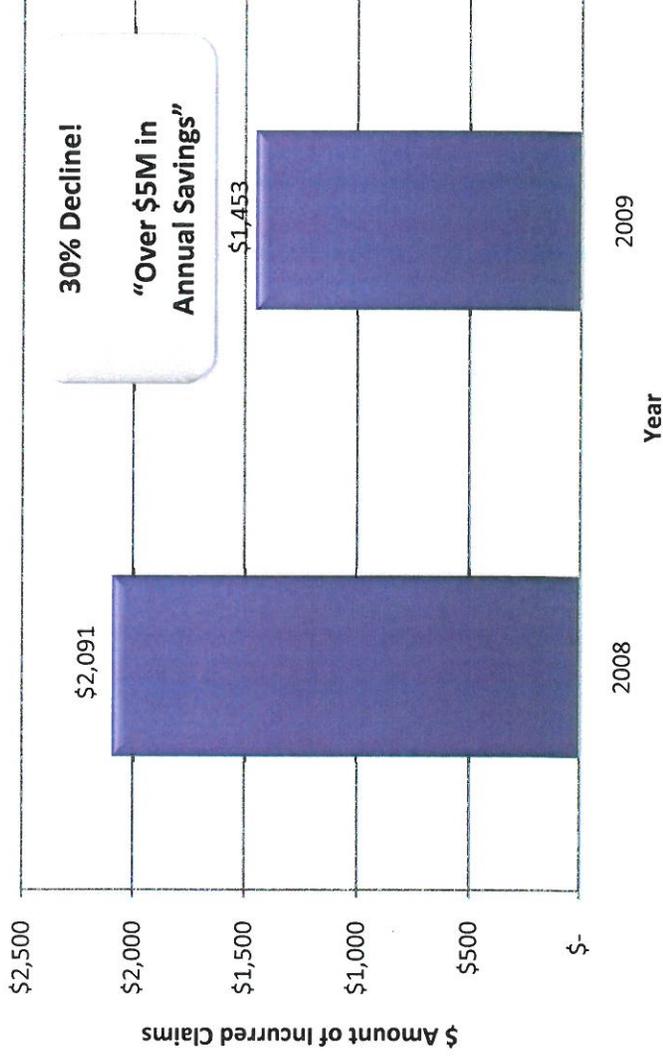


WCUSA Meets all 5 Requirements - 4. “Impressive ROI”

Example 2:

- Transportation Company with 8,500 lives in 20 states
- Aggregate data is from all facilities in which our on-site coaching services had been in place for a 12 month period.

Workers Comp Incurred Costs per Employee
(80 Locations - Total 8,500 lives)



WCUSA Meets all 5 Requirements

4. “Impressive ROI”

Example 3:

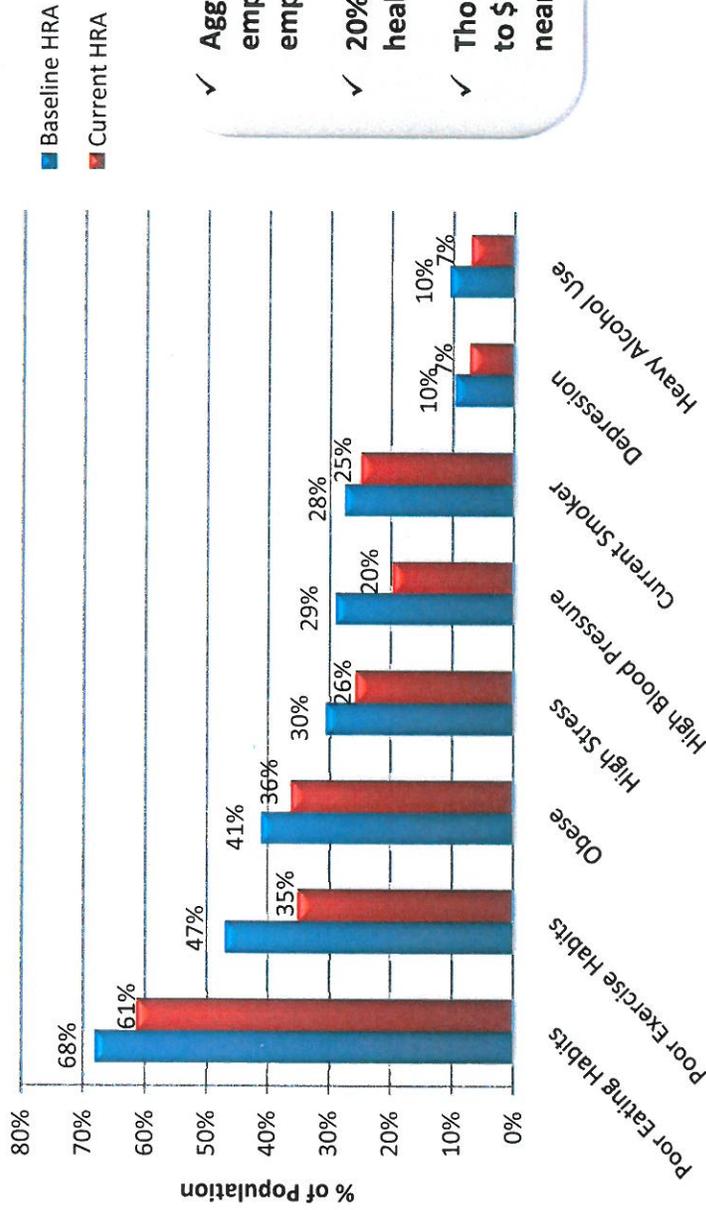
- Entered into licensing agreement with Thomson Healthcare to utilize their proprietary Health & Productivity Management Return on Investment Tool
- Purpose was to forecast expected returns associated with health risk reductions we have achieved for multiple employers.



WCUSA Meets all 5 Requirements

4. “Impressive ROI”

Changes in Population Health Risk Factor Prevalence Rate



- ✓ Aggregate HRA results from multi-employer group of 5,700 employees
- ✓ 20% average reduction across all health risks
- ✓ Thomson Study showed ROI of \$4 to \$1 or net annual savings of nearly \$700 per EE



Improving health in the workplace...face to face



WCUSA Meets all 5 Requirements

5. “Cost Effective Solution”

At 1st glance, onsite coaching may seem expensive when compared with traditional telephonic and online coaching.

But when you dig a little deeper, you may be shocked by what you'll discover.

See below from actual proposal.

	Telephonic	Our Face-to-face
Eligible Lives	1,000	1,000
Annual Cost of Contract	\$9,750	\$105,000
% EE's "Engaged"	4%	90%
# EE's "Engaged"	40	900
Price/"Engaged" Employee*	\$245	\$115
Price to coach 90% of EE's	\$220,500	\$105,000

Our onsite coaching is over 50% less expensive per person coached than telephonic.

* Industry average for annual cost per engaged employee in telephonic/web based coaching is \$225-\$325



Improving health in the workplace . . . face to face



WCUSA Meets all 5 Requirements

5. "Cost Effective Solution"

The Rub.... telephonic & web coaching programs can't get anywhere near 90% engagement...even with expensive incentives (which will further create cost disparity)

PEPM Myth Buster

Many providers will try to mask true costs by proposing services on a PEPM basis. So, in this example, you may see someone propose \$.80 PEPM (\$9,750/1,000/12) vs. our PEPM cost of \$8.75.

Don't fall for this marketing rope a dope. No matter how they spin it, only 40 employees will be coached, and it will cost you twice as much to coach them.

Average incentive nationwide was approx. \$175 in 2009. If the average incentive was used to drive engagement, it would nearly double the cost per engaged employee.

	Telephonic	Our Face-to-face
Eligible Lives	1,000	1,000
Annual Cost of Contract	\$9,750	\$105,000
% EE's "Engaged"	4%	90%
# EE's "Engaged"	40	900
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Improving health in the workplace...face to face



WCUSA Meets all 5 Requirements

5. “Cost Effective Solution”: The Missing “E” in PEPM

PEPM must be analyzed as P”E”EPM....Per “Engaged” Employee Per Month

	Telephonic	Our Face-to-face
Eligible Lives	1,000	1,000
Annual Cost of Contract	\$9,750	\$105,000
% EE’s “Engaged”	4%	90%
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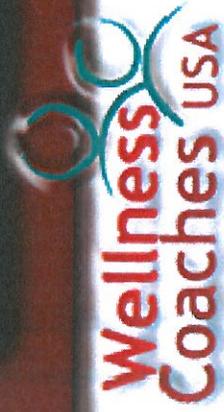
On a P”E”EPM basis, telephonic coaching would be \$20.40 compared to \$9.58 for our onsite coaching.

- The bottom line.... when compared to all other coaching alternatives, the cost for each person coached is at least 50% less expensive with our onsite coaching model....
- The only questions you need to ask are, (1) how much can I afford to spend on coaching, and/or, (2) how many people do I want to have coached.



Recap of Our Value Proposition and Distinctiveness

- **Total Population Engagement**
 - >90% of total population
- **High Quality, Professional Onsite Coaching**
 - Largest & most experienced onsite coaching provider (10 years)
- **Large Scale Health Risk Improvements**
 - Nearly 1 risk improved per employee coached in 2009
- **Impressive ROI**
 - Healthcare costs, workers' comp, health risk improvements
- **Most Cost Effective Coaching Option**
 - 50% less expensive than other coaching alternatives



Improving health in the workplace . . . face to face



Overview of Our Process

Mission

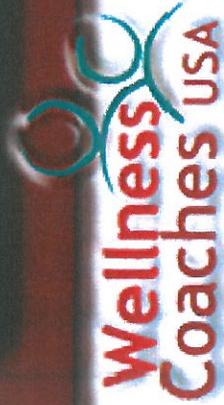
Achieve **large-scale improvement** in our customers' employee **population health risks**.

Strategy

Apply our embedded onsite face-to-face coaching delivery methodology to **“get entire employee populations”** continuously **“on the move”** to sustained improvement in population health risks.

Issues Addressed

All of the most common lifestyle issues like **tobacco use, exercise, weight loss, nutrition, blood pressure and stress**, and related chronic health conditions



Improving health in the workplace . . . face to face



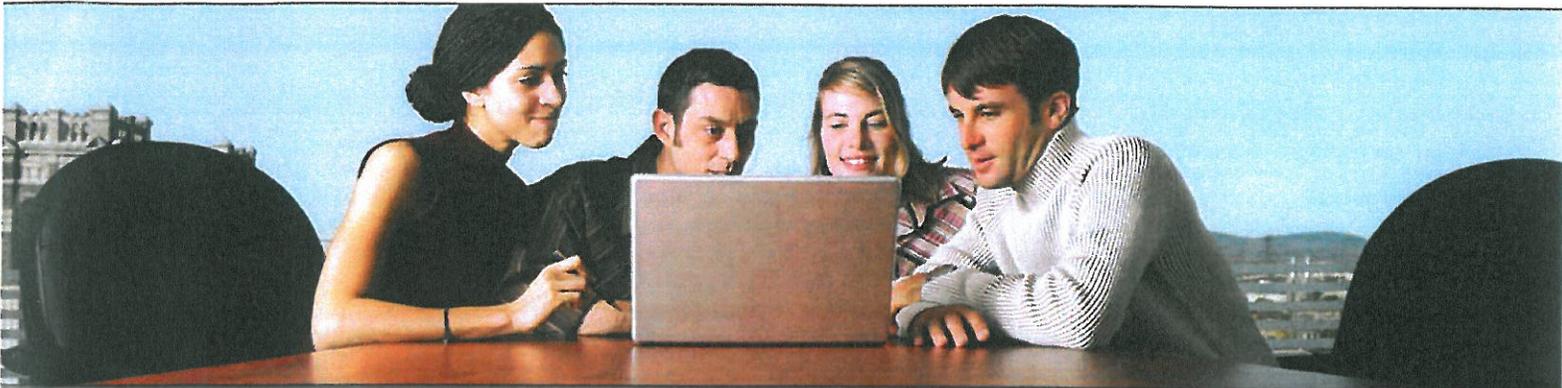
Overview of Our Process

Logistics

- Wellness Coaches permanently assigned and deployed directly to our customers' facilities to **work with and among employees**
- Always highly visible and conveniently accessible**
- Coaches interact regularly and frequently with them all – all jobs, all departments, all health risk levels – each coach conducting 30 to 40 interactions every day – 6,000 to 8,000 per year**
- Coaches conduct their interactions during regular, scheduled, systematic and rotating rounds throughout the workplace.**



Employee Benefits Website Services Overview



Fairview Insurance Agency Associates offers the latest in benefits technology to help you communicate benefit details, along with the importance of the benefits package you are providing. Give employees instant access to all benefit offerings by utilizing our customized website solutions! We provide our knowledge and expertise to get the job done!

General Features:

Your electronic filing cabinet of benefit information will improve communication and increase employee satisfaction. Employee Health & Welfare Plans as well as Retirement Plan Design become easy to communicate. Take a look at the other valuable features of our benefit websites:

- Organize ALL Benefits in a Single Location
- Customized Company Branded Interface
- Dedicated Web Address
- Instant Access of the Following Forms:
 - ✓ Enrollment & Claim Forms
 - ✓ Mail Order Drug Applications
 - ✓ Plan Administration & HIPAA Forms
 - ✓ Tax Forms
- Provide 24/7 Access for All Employees/Spouses
- Glossary of Insurance Terms
- Useful Benefit Website Links & Calculators
- FAQ's and Answers
- Provider Directory- Instant Access to Doctors
- Government Regulations
- Complete Benefit Contact Information, Customer Service Numbers, and Group Numbers
- Company News Bulletin Board
- Multiple Tier Password Security
- No Training Required - Just Point and Click!

HR Highlights

We don't have to tell you how difficult the rapidly changing benefit environment can make your job or remind you that costs are increasing dramatically. Let us help you communicate benefit information with less effort. Below are practical applications for our services:

- Enhance Company Image
- Increase Employee Perception of Benefit Package
- Find Information Quickly and Easily
- Recruiting & New Hire Orientation Tool
- Replace New Hire Information Package
- Help Promote Self Service Employees
- Ensure Compliance
- Provide Employees a Clear Understanding of Benefit Information
- Open Enrollment Communication
- Communicate Changes to Benefit Plans
- Disseminate Important Company News to Employees
- Allow HR Focus on Strategic Issues
- Increase Departmental Efficiencies
- Consistent Application of Policies and Procedures
- Multiple Location Support

Please take a moment and review a demonstration of the Employee Benefits Website by entering the web address below into your internet browser address bar.

http://demo.mybensite.com/fairview_rg



- Welcome
- Your Benefits
- Healthcare Reform
- Medical Welcome
- Aetna PPO
- MCARE HMO Plan
- Medical Rates & Questions
- Dental
- Vision
- Employee Assistance Program
- Flexible Spending Account
- Life & Disability
- Short Term Disability
- Long Term Disability
- AFLAC
- 401(k) / Retirement
- Human Resource Policies
- Additional Benefits
- Your Employee Rights
- Healthcare Reform
- Health and Wellness
- Medicare Part D
- Tax Forms
- Health Resources
- Helpful Calculators
- Still Have Questions
- Log Out

Welcome Welcome To Your Benefits Website

Welcome

Tuesday, June 14th, 2011

Welcome to the River's Bend Employee Benefits Website! We encourage all of our employees and their families to become familiar with and use the resources offered on our customized Employee Benefits Website as often as possible. You will find that almost all of your questions and concerns can be addressed with a simple click of the mouse!

Inside, you will find detailed information about our current employee benefits program and all of the necessary benefit summaries, claim forms, enrollment forms, customer service numbers, frequently asked questions, and direct links to your on-line provider network directories. Just point and click on the subject of interest and "surf" to easy answers and access to your employee benefits!

Welcome! We look forward to helping you!



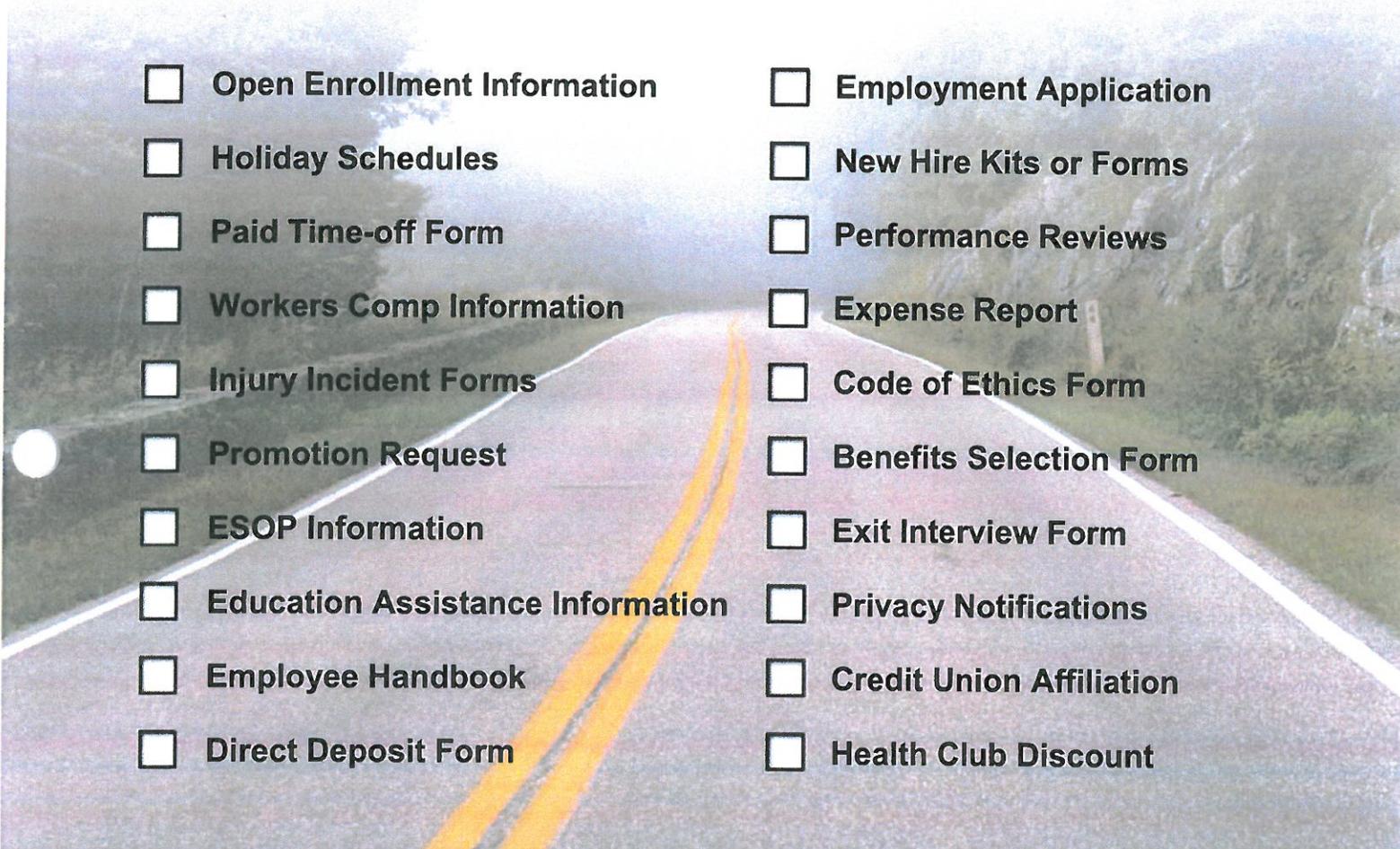
Message From The President

[New Employees Click Here](#)

[Open Enrollment Instructions](#)

[\[Website Use Terms and Conditions\]](#) || [\[Add this page to your Favorites List\]](#)

HR Check List

- 
- Open Enrollment Information
 - Holiday Schedules
 - Paid Time-off Form
 - Workers Comp Information
 - Injury Incident Forms
 - Promotion Request
 - ESOP Information
 - Education Assistance Information
 - Employee Handbook
 - Direct Deposit Form
 - Employment Application
 - New Hire Kits or Forms
 - Performance Reviews
 - Expense Report
 - Code of Ethics Form
 - Benefits Selection Form
 - Exit Interview Form
 - Privacy Notifications
 - Credit Union Affiliation
 - Health Club Discount

There is no additional charge to include any of the vital employee forms listed here. Use this checklist to make sure your website is complete!



State of New Jersey
Department of Banking and Insurance
20 West State Street
Trenton, NJ 08625-0327

LICENSE NUMBER

8038220

EFFECTIVE DATE

06/01/2010

EXPIRATION DATE

5/31/2012

INSURANCE PRODUCER LICENSE

THIS CERTIFIES THAT **FAIRVIEW INSURANCE AGENCY
ASSOCIATES INC**

IS DULY LICENSED AS A **PRODUCER**

AT BUSINESS ADDRESS **25 FAIRVIEW AVE
VERONA, NJ 07044**

WITH THE AUTHORITIES OF **LIFE INSURANCE; ACCIDENT, HEALTH OR
SICKNESS; PERSONAL LINES; PROPERTY;
CASUALTY; SURPLUS LINES INSURANCE**

This insurance license is valid and shall remain in effect unless revoked or suspended provided that the fee set forth in N.J.A.C. 11:17-2.12 is paid and renewal requirements set forth in N.J.A.C. 11:17-2.5, including continuing education requirements for resident individuals, are met by the renewal effective date. A renewal application will be mailed to the licensee mailing address approximately 60 days prior to the renewal effective date. A new license will not be reissued upon renewal.

printed: 4/29/2010
control number: 659

Thomas B. Considine

Commissioner

25 Fairview Avenue
Verona, NJ 07044

Phone 973-857-0870
Fax 973-239-2136
E-mail rgraham@fairviewinsurance.com

Ryan D. Graham

Professional Qualifications

10/98 - Present Fairview Insurance Agency Verona, NJ

Director of Business Development, Employee Benefits

- Oversee the Benefits Department and all Public Sector accounts.
- Evaluate and advise clients on Employee Benefit Programs including Health, Prescription, Dental, Life, Disability and Long Term Care insurance.
- Act as a liaison between Council/Board Members and Collective Bargaining Units regarding plan structures and cost containment strategies.
- Negotiate savings with carriers.
- Evaluate program costs and make recommendations for plan or procedure changes, if necessary.

8/97 – 9/98 MWW Group Secaucus, NJ

Account Coordinator, Public Affairs and Investor Relations

- Coordinated client press kits.
- Wrote AP press releases pertaining to client affairs.
- Act as the liaison between the client and portfolio manager/financial analyst.

Education

1993 - 1997 Albright College Reading, PA

B.A., Marketing

- Class President

Professional memberships

Member of NAHU

Community activities

Township of Verona Board of Adjustments.

Essex County Workforce Investment Board member (WIB)

Member of Governor Chris Christie's Healthcare Transition Committee

Jaycees NJ State Director and Executive Board Member

KerryCore NY. Original initial committee member. Coordinated various fundraising events.

White House Intern for Washington DC Public Liaisons office. Acted as liaison between staff members and media press.

The Leaguers, Inc., Newark NJ. Received Valuable Contributions Award in 2001; Executive Committee Member of Annual Golf Fundraiser; donated computers to the associated Newark schools.

Licenses

Life, Health, Property & Casualty Insurance

CTLC Designation / Long Term Care Partnership Certification



State of New Jersey

Department of Banking and Insurance
20 West State Street
Trenton, NJ 08625-0327

LICENSE NUMBER
9835926

This insurance license is valid and shall remain in effect unless revoked or suspended provided that the fee set forth in N.J.A.C. 11:17-2.12 is paid and renewal requirements set forth in N.J.A.C. 11:17-2.5, including continuing education requirements for resident individuals, are met by the license expiration date. A renewal notice will be mailed to the licensee mailing address approximately 30 days prior to the license expiration date.

THIS CERTIFIES THAT **RYAN D. GRAHAM**

AT BUSINESS ADDRESS FAIRVIEW INS AGENCY ASSOC INC
25 FAIRVIEW AVE
P O BOX 324
VERONA, NJ 07044

IS DULY LICENSED WITH THE FOLLOWING LICENSE TYPE(S) AND AUTHORITIES

LICENSE TYPE	LINES OF AUTHORITY	EFFECTIVE DATE	EXPIRATION DATE
PRODUCER	LIFE INSURANCE; ACCIDENT, HEALTH OR SICKNESS; PERSONAL LINES; PROPERTY; CASUALTY	08/01/2010	08/31/2012

printed: 12/01/2010

Tom Coniglio
Commissioner of Banking and Insurance

The Department maintains an informative website at www.njdoib.org. Please visit this web page for valuable information and forms necessary to maintain compliance with licensing requirements.

25 Fairview Avenue
Verona, NJ 07044

Phone 973-857-0870
Fax 973-239-2136
E-mail jkgraham@fairviewinsurance.com

Julianne N. Graham

Professional Qualifications

7/06 - Present Fairview Insurance Agency Verona, NJ

Senior Account Executive, Employee Benefits

- Collect claim data and perform extensive analysis including the development of loss ratios, demographic studies, and plan design evaluation.
- Make recommendations regarding plan design and cost containment measures and provide data analysis of such.
- Coordinate all RFPs with carriers, including negotiation of plan and rates.
- Present all data to clients including governing bodies, union officials, business administrators, committees, etc.
- Act as liaison between the entity, carrier and employees.
- Oversee the benefits department including the Account Managers and Customer Service Representatives.

6/03 – 7/06 Pegasus Health Care Newton, NJ

Director of Marketing and Underwriting

- Develop pricing by converting a computerized actuarial model into contribution levels for self funded plan members.
- Negotiate stop loss rates with multiple carriers.
- Evaluate risk potential of groups and make recommendations to the President as to accept the risk.
- Preparation and presentation of detailed proposals to clients.
- New business development.
- Assist with the roll out of association based health plans.
- Secured quota share partnerships with various carriers, secured vendors and negotiated contracts.
- File and maintain company records for the Captive Insurance Company with the DC Department of Insurance.

Education

2002 - 2003 SCCC Newton, NJ

CMA/MOA

Licenses

NJ Life and Health Insurance Producer License.

Long Term Care Partnership Certification

Professional Memberships

Member, National Association of Professional Women



State of New Jersey
 Department of Banking and Insurance
 20 West State Street
 Trenton, NJ 08625-0327

LICENSE NUMBER
1031320

This insurance license is valid and shall remain in effect unless revoked or suspended provided that the fee set forth in N.J.A.C. 11:17-2.12 is paid and renewal requirements set forth in N.J.A.C. 11:17-2.5, including continuing education requirements for resident individuals, are met by the license expiration date. A renewal notice will be mailed to the licensee mailing address approximately 30 days prior to the license expiration date.

THIS CERTIFIES THAT **JULIANNE N. KUNSTLE**

AT BUSINESS ADDRESS C/O FAIEVIEW INSURANCE AGENCY ASSOCIATES
 25 FAIRVIEW AVE
 VERONA, NJ 07044

IS DULY LICENSED WITH THE FOLLOWING LICENSE TYPE(S) AND AUTHORITIES

LICENSE TYPE	LINES OF AUTHORITY	EFFECTIVE DATE	EXPIRATION DATE
PRODUCER	LIFE INSURANCE; ACCIDENT, HEALTH OR SICKNESS	03/01/2011	02/28/2013

printed: 03/28/2011

Tom Corbett
 Commissioner of Banking and Insurance

The Department maintains an informative website at www.njdobi.org. Please visit this web page for valuable information and forms necessary to maintain compliance with licensing requirements.

25 Fairview Avenue
Verona, NJ 07044

Phone 973-857-0870
Fax 973-239-2136
E-mail jbenitez@fairviewinsurance.com

Jackie Benitez

Professional Qualifications

6/09 - Current Fairview Insurance Agency Verona, NJ

Account Manager / Client Liaison

- Provide ongoing support to clients.
- Perform carrier invoice reconciliation.
- Assist client Administration in various tasks and requests.
- Evaluate plan benefits and contracts for accuracy.
- Assist with group implementation and enrollment.
- Coordinate between carriers and clients.
- Generate proposals and renewals for small groups via online system.

2009 - 6/09 Quadel Consulting Services Newark, NJ

Administrative Assistant

- Provide administrative support and secretarial support, prepares correspondence, reports, and other documents at the direction on the Managing Director.
- Maintains confidential files and reports.
- Submits information for monthly reports to managers, as needed.

2008 - 2008 Gallagher Benefit Services Manhattan, NY

Account Executive

- Provided support to middle market and broker inquiries by contacting appropriate operations areas to facilitate quality customer service and issue resolution.
- Represented business clients in negotiations with insurance carriers during annual policy renewals.
Examined and presented proposals of new business and services from various insurers.

2007 - 2008 CIGNA Healthcare Jersey City, NJ

Client Strategy Specialist

- Coordinate with account managers to resolve complex and non-routine inquires, kept them informed of account status and potential opportunities for account growth and expansion, and reviews portfolios to ensure that products were properly utilized for client satisfaction.

- Made on-site presentations to existing and prospective clients to introduce and promote new or recommended account services.

1997- 2007

Horizon BC/BS of NJ

Newark, NJ

Account Consultant

- Earned the following promotions during tenure at Horizon:
 - Dental Claims Specialist
 - Associate Sales Promotions Coordinator
 - Sr. Account Specialist, Small Group Dental
 - Account Consultant, Life and Disability Agency
- Coordinated necessary communication and document transfers between clients, attorneys and loan officers; reviewed and released policy renewals to brokers and clients.

Education

James J. Ferris High School
Jersey City, NJ

Licenses

NJ Life and Health Insurance Producer License



State of New Jersey
Department of Banking and Insurance
20 West State Street
Trenton, NJ 08625-0327

LICENSE NUMBER
0231206
EFFECTIVE DATE
08/01/2010
EXPIRATION DATE
3/31/2012

INSURANCE PRODUCER LICENSE

THIS CERTIFIES THAT **RAMONA J BENITEZ**

IS DULY LICENSED AS A **PRODUCER**

AT BUSINESS ADDRESS **FAIRVIEW INSURANCE AGENCY
25 FAIRVIEW AVE
VERONA, NJ 07044**

WITH THE AUTHORITIES OF **LIFE INSURANCE; ACCIDENT, HEALTH OR
SICKNESS**

This insurance license is valid and shall remain in effect unless revoked or suspended provided that the fee set forth in N.J.A.C.11:17-2.12 is paid and renewal requirements set forth in N.J.A.C. 11:17-2.5, including continuing education requirements for resident individuals, are met by the renewal effective date. A renewal application will be mailed to the licensee mailing address approximately 30 days prior to the renewal effective date. A new license will not be reissued upon renewal.

printed: 7/29/2010
control number: 67

Thomas B. Considine

Commissioner

25 Fairview Avenue
Verona, NJ 07044

Phone 973-857-0870
Fax 973-239-2136
E-mail kmacquesten@fairviewinsurance.com

Kimberly MacQuesten

Professional Qualifications

9/07 - Current Fairview Insurance Agency Verona, NJ

Account Manager / Client Liaison

- Provide ongoing support to clients.
- Perform carrier invoice reconciliation.
- Assist client Administration in various tasks and requests.
- Evaluate plan benefits and contracts for accuracy.
- Assist with the RDS process.
- Assist with group implementation and enrollment.
- Coordinate between carriers and clients.
- Generate proposals and renewals for small groups via online system.

2006 - 9/07 Bankers Life and Casualty , NJ

Insurance Sales Agent

- Individual agent for products such as long term care, life insurance, tax deferred annuities and Medicare supplements.
- Awarded successful new agent award.

2003 - 2006 Singer Nelson Charlmers Teaneck, NJ

Account Manager

- Requested proposals, presented results and suggestions to client.
- Negotiated rate renewals for groups of up to 500 employees.
- Evaluated existing benefit plans for correct level of benefits.
- Coordinate renewal and year end activities with multiple insurance companies.
- Acted as an employee advocate by researching issues thoroughly and writing appeal letters, if needed.
- Acted as a resource regarding federal and state regulations.

1989 - 2003 Prudential / Aetna Roseland, NJ

Account Manager

- Managed several large National Accounts benefits plans, including managed and indemnity plans (ASO and insured), dental, life, disability, vision, flexible spending accounts, 401 (k) and COBRA.
- Implemented new dental plans which saved over 2 million dollars.

- Coordinated and managed enrollment meetings.
- Confirmed accuracy of monthly and quarterly reports delivered to the client and senior management.
- Primary liaison between the customer and consultants and appropriate areas at Aetna.

Education

University of Maryland

Baltimore, MD

Bachelor of Science

Licenses

NJ Life and Health Insurance Producer License.

Long Term Care Certification



State of New Jersey
 Department of Banking and Insurance
 20 West State Street
 Trenton, NJ 08625-0327

LICENSE NUMBER
9617107

This insurance license is valid and shall remain in effect unless revoked or suspended provided that the fee set forth in N.J.A.C. 11:17-2.12 is paid and renewal requirements set forth in N.J.A.C. 11:17-2.5, including continuing education requirements for resident individuals, are met by the license expiration date. A renewal notice will be mailed to the licensee mailing address approximately 30 days prior to the license expiration date.

THIS CERTIFIES THAT **KIMBERLY H. MACQUESTEN**

AT BUSINESS ADDRESS FAIRVIEW INSURANCE AGENCY ASSOC INC
 25 FAIRVIEW AVE
 VERONA, NJ 07044

IS DULY LICENSED WITH THE FOLLOWING LICENSE TYPE(S) AND AUTHORITIES

LICENSE TYPE	LINES OF AUTHORITY	EFFECTIVE DATE	EXPIRATION DATE
PRODUCER	LIFE INSURANCE; ACCIDENT, HEALTH OR SICKNESS	10/01/2010	09/30/2012

printed: 09/07/2010

Tom Condit
 Commissioner of Banking and Insurance

The Department maintains an informative website at www.njdobi.org. Please visit this web page for valuable information and forms necessary to maintain compliance with licensing requirements.

Glenn R. Jacobs, CIC

Experience: 1979 to Present

FAIRVIEW INSURANCE AGENCY ASSOCIATES, INC., Verona, NJ

Position: Executive Vice President

- Responsible for sales of commercial and personal lines business as well as administrative functions including employee training and human resources.
- Expertise in the development of sales of niche programs including construction and equipment dealerships, rental stores, municipalities and public entities.
- **FAIRLEIGH DICKINSON UNIVERSITY, ADJUNCT PROFESSOR** – 2000 to present. Petrocelli College, Undergraduate and Graduate: Insurance Studies
- **AMERICAN SCHOOL OF BUSINESS, Fairfield, NJ** – 2000 to present: Teaching insurance licensing class and continuing education seminars

Education:

- Graduated RIDER UNIVERSITY with BS in Management, 1978
- Obtained Property/Casualty/Life/Health License in State of NJ
- Obtained Excess/Surplus Lines License in various states
- Aetna Life & Casualty Home Office Sales School, Hartford, CT, 1980
- Professional Independent Agent Sales School, Oberlin College, OH 1981
- CERTIFIED INSURANCE COUNSELOR Designation, NJ and National Membership 1980 to Present
- Certified Licensed Multi-State Professional Insurance Agent

Professional Services:

- Livingston Township Risk Manager, 2004 to Present. Garden State Municipal Joint Insurance Fund Committee member. Advisor for new coverages available to Townships. Assists with Loss Control, premium analysis, contract reviews and maximized premium savings. GSMJIF Employment Related Practice Insurance committee member.
- American Rental Association-Preferred Insurance Agent: New Jersey/ New York
- Past Board Member of Essex County Independent Agent Association
- Past Board Member of Young Professional Insurance Agent Association

**Community
Activities:**

- Head Coach of East Hanover Township PAL Football
- Head Coach of East Hanover Little League
- Head Coach of East Hanover Travel Team Soccer
- Head Coach of East Hanover Basketball
- East Hanover Board of Adjustments 1996-2004
- Athletic Director for St. Rose of Lima Academy, 2006 to 2008
- Inducted into Livingston High School Athletic Hall of Fame 2004



State of New Jersey
Department of Banking and Insurance
20 West State Street
Trenton, NJ 08625-0327

LICENSE NUMBER
8038219
EFFECTIVE DATE
05/01/2009
EXPIRATION DATE
11/30/2011

INSURANCE PRODUCER LICENSE

THIS CERTIFIES THAT **GLENN R JACOBS**

IS DULY LICENSED AS A **PRODUCER**

AT BUSINESS ADDRESS **25 FAIRVIEW AVE
VERONA, NJ 07044**

WITH THE AUTHORITIES OF **LIFE INSURANCE; ACCIDENT, HEALTH OR
SICKNESS; PERSONAL LINES; PROPERTY;
CASUALTY; SURPLUS LINES INSURANCE**

This insurance license is valid and shall remain in effect unless revoked or suspended provided that the fee set forth in N.J.A.C. 11:17-2.12 is paid and renewal requirements set forth in N.J.A.C. 11:17-2.5, including continuing education requirements for resident individuals, are met by the renewal effective date. A renewal application will be mailed to the licensee mailing address approximately 30 days prior to the renewal effective date. A new license will not be reissued upon renewal.

printed: 4/2/2009
control number: 102

Steven M. Goldman

Commissioner

Zachary William Edelman

Experience 2005 to Present Fairview Insurance Agency Assoc. Inc. Verona, NJ

Director of Business Development

- Client responsibilities include best practices of procurement, placement, and account management of public entity and private sector programs.
- Special focus on reduction in workplace injuries
- Ensure current premiums are competitive and coverage comprehensive by bidding out insurance policies when necessary.
- Make necessary recommendations to ensure coverages are current and in-line within municipality infrastructure and budgets.
- Facilitate PEOSHA and OSHA training to ensure regulatory compliance.
- Attend Joint Insurance Fund meetings to keep municipalities compliant within JIF guidelines.

Professional Services

- Borough of Caldwell- Risk Manager 2007 – Present
Annual Reduction of insurance costs of approximately \$50,000. Significant increase in PEOSH Safety Services and trainings.
- Borough of Roselle- Risk Manager 2007 - 2009
Reduced annual workers compensation costs by over \$40,000 through audits and in-depth policy and claim review. Facilitation of interdepartmental quarterly claims review meetings to promote safety.
- Bloomfield Board of Education-Risk Manager 2007 – Present
Through competitive business model reduced premiums by approximately \$45,000.

2003 to 2005 EPIX

Account Executive

- Responsible for consulting Human Resource Solutions unique to each company
- Consultative Selling approach
- Worked in team environment for setting up and running payroll, insurance benefits, 401K accounts and other
- benefit services
- Responsible for accurately forecasting renewal rates and new business forecasts

2000 – 2003

Thomson NewsEdge

Global Account Manager

- 2001 Circle of Excellence for Outstanding Account Management Achievement
- Managed news solutions onto Corporate Intranets and Portals
- Responsible for a renewal base of 3.1 million dollars annually
- Managed relationships with executive administrative

Education

- University of Pittsburgh, graduated with BA in Business Communications, minor in Philosophy, May 1997
- Semester at Sea: A shipboard education in international marketing and business
- Associates in Arts Degree from Ocean County College – 1971
- NJ State Property & Casualty License- 2005



State of New Jersey
 Department of Banking and Insurance
 20 West State Street
 Trenton, NJ 08625-0327

LICENSE NUMBER
1037065

This insurance license is valid and shall remain in effect unless revoked or suspended provided that the fee set forth in N.J.A.C. 11:17-2.12 is paid and renewal requirements set forth in N.J.A.C. 11:17-2.5, including continuing education requirements for resident individuals, are met by the license expiration date. A renewal notice will be mailed to the licensee mailing address approximately 30 days prior to the license expiration date.

THIS CERTIFIES THAT **ZACH W. EDELMAN**

AT BUSINESS ADDRESS C/O FAIRVIEW INSURANCE AGENCY
 25 FAIRVIEW AVE
 P O BOX 324
 VERONA, NJ 07044

IS DULY LICENSED WITH THE FOLLOWING LICENSE TYPE(S) AND AUTHORITIES

LICENSE TYPE	LINES OF AUTHORITY	EFFECTIVE DATE	EXPIRATION DATE
PRODUCER	PROPERTY; CASUALTY	04/11/2011	01/31/2013

printed: 04/11/2011

Tom Caserio
 Commissioner of Banking and Insurance

The Department maintains an informative website at www.njdobi.org. Please visit this web page for valuable information and forms necessary to maintain compliance with licensing requirements.

Department Contact Information
 web site: www.njdobi.org
 phone: (609) 292-4337
 fax: (609) 984-5263

The request for any change of license information must be sent to the Department within 30 days of the change.

Make any checks and/or money orders payable to: **STATE OF NEW JERSEY, GENERAL TREASURY**

Mailing Address: Department of Banking and Insurance
 20 West State Street
 P.O. Box 327
 Trenton, NJ. 08625-0327

Dawn Barbieri

Experience

1992-Present Fairview Ins. Agency Assoc., Inc. Verona, NJ

Commercial Lines Manager

- Manages custom program business
- Services a book of approximately \$4.4 million in premiums
- Handles broad spectrum of risks including Municipalities, Water Districts, Construction & Forklift Equipment Dealers, Wholesale & Retail, Manufacturing, Contractors and Restaurants.
- All facets of customer service/client management
- Underwriting, rating, marketing, binding & billing of commercial book.
- Input/Update all client information into Agency automation system.
- Oversees the Commercial Lines staff in day-to-day operations, organization, production and problem mitigation.
- Trains new employees on all facets of employment.
- Licensed Producer in NJ for Property & Casualty, Life and Health.
- Maintains through regular annual updates.

1987 - 1992 Turner Group Montville, NJ

Account Executive

- Handled Commercial book of business.

1983 - 1987 Zester & Company Totowa, NJ

Account Executive

- Handled Commercial book of business.

1981 - 1983 Northern NJ Insurance Agency Newfoundland, NJ

Account Executive

- Handled book of business.

Education

1986 - **Insurance Program Brokers License**, Bergen Community College

1987 - **Insurance Program Brokers License**, William Paterson College

Interests

Traveling, gardening.



State of New Jersey
Department of Banking and Insurance
20 West State Street
Trenton, NJ 08625-0327

LICENSE NUMBER

8628412

EFFECTIVE DATE

11/01/2009

EXPIRATION DATE

10/31/2011

INSURANCE PRODUCER LICENSE

THIS CERTIFIES THAT **DAWN D BARBIERI**

IS DULY LICENSED AS A **PRODUCER**

AT BUSINESS ADDRESS **C/O FAIRVIEW INSURANCE AGENCY ASSOCIATES
25 FAIRVIEW AVENUE
VERONA, NJ 07044**

WITH THE AUTHORITIES OF **ACCIDENT, HEALTH OR SICKNESS; PERSONAL
LINES; PROPERTY; CASUALTY**

This insurance license is valid and shall remain in effect unless revoked or suspended provided that the fee set forth in N.J.A.C. 11:17-2.12 is paid and renewal requirements set forth in N.J.A.C. 11:17-2.5, including continuing education requirements for resident individuals, are met by the renewal effective date. A renewal application will be mailed to the licensee mailing address approximately 30 days prior to the renewal effective date. A new license will not be reissued upon renewal.

printed: 10/5/2009
control number: 78

Neil N. Jasey

Commissioner

Teresa M. Sulsona, CISR, CPSR

Experience

1981 – Present Fairview Ins. Agency Assoc., Inc. Verona, NJ

General Manager, Personal & Commercial Divisions

- Manages custom program business
- Services book of approximately \$4 million in premium
- Handles various risks including National Equipment Dealer Program, Wholesale & Retail Manufacturers and Municipalities.
- All aspects of customer service and client management
- Underwriting, rating, marketing and binding of commercial book of business
- Input/Update of client information on Agency Automation System (TAM)
- Assists Commercial Lines Manager in overseeing the daily operations of the Commercial Lines Department and its staff.
- Assists Personal Lines/Small Business Manager in overseeing the daily operations of the Personal/Small Commercial Lines Dept and its' staff.
- Monitors the processing of new business submissions
- Monitors the client base loss experience for the agency; interceding when necessary.
- Acts as liaison between staff and upper management.
- Maintains operation of Agency computer network, including updates
- Trains and assists new and current staff with all computer related operations
- Licensed NJ Producer for Property & Casualty, Life & Health
- Prior position in Fairview: Assistant Commercial Lines Manager
- Maintains two designations: CISR (Certified Insurance Service Representative) and CPSR (Certified Professional Service Representative)

Education

1980 – 1981 Katharine Gibbs University Montclair, NJ

- Graduated Advanced One-Year Course with Honors

1982 Insurance Program Licensing Course



State of New Jersey
Department of Banking and Insurance
20 West State Street
Trenton, NJ 08625-0327

LICENSE NUMBER

8623909

EFFECTIVE DATE

05/01/2009

EXPIRATION DATE

4/30/2011

INSURANCE PRODUCER LICENSE

THIS CERTIFIES THAT **TERESA M SULSONA**

IS DULY LICENSED AS A **PRODUCER**

AT BUSINESS ADDRESS **FARIVIEW INSURANCE AGENCY, ASSOCIATES INC
25 FAIRVIEW AVE
P O BOX 324
VERONA, NJ 07044**

WITH THE AUTHORITIES OF **ACCIDENT, HEALTH OR SICKNESS; PERSONAL
LINES; PROPERTY; CASUALTY**

This insurance license is valid and shall remain in effect unless revoked or suspended provided that the fee set forth in N.J.A.C. 11:17-2.12 is paid and renewal requirements set forth in N.J.A.C. 11:17-2.5, including continuing education requirements for resident individuals, are met by the renewal effective date. A renewal application will be mailed to the licensee mailing address approximately 30 days prior to the renewal effective date. A new license will not be reissued upon renewal.

printed: 4/9/2009
control number: 141

Steven M. Goldman

Commissioner

Anne Campagna

Experience

2008 to Present Fairview Ins. Agency Assoc., Inc. Verona, NJ

Commercial Lines Account Executive

- Manages custom program business
- Services a book of approximately \$4.4 million in premiums
- Handles broad spectrum of risks including Municipalities, Construction & Forklift Equipment Dealers, Wholesale & Retail, Manufacturing & Contractors
- All facets of customer service/client management
- Underwriting rating, marketing, binding & billing of commercial book

2006 – 2008 Bollinger Insurance Agency, Short Hills, NJ

Commercial Lines Account Executive

- Managed custom program business in Medical Malpractice
- Serviced a book of approximately \$5-7million in premium
- Handled broad spectrum of risks including Wholesale & Retail Distributors Manufacturing, Contractors. Medical Facilities, Large Property Management Companies and Large Hotel Chains
- All facets of customer service/client management
- Underwriting, rating, marketing, binding & billing of commercial book

1982 -2006 Fairview Ins. Agency Assoc., Inc. Verona, NJ

Select Account/Personal Lines Manager

- Managed sales and service of small commercial and personal lines accounts.
- Handled All facets of customer service/client management
- Quoting and placing of small commercial lines and personal lines coverages
- Updated carrier rating and underwriting procedures for small commercial and personal lines accounts
- Cross-training customer service representatives and sales producers in underwriting and rating procedures.

Education

2005 Graduate Program in Paralegal Studies – ABA Approved
Program, Montclair State University

2001 Bachelor of Science: Social/Behavioral Science,
Minor: Psychology, Seton Hall University

1982 Insurance Program Licensing Course Licensed NJ
Producer in Property & Casualty, Life and Health. Maintains
through regular annual updates

Interests

Interior Design, Sewing



State of New Jersey
 Department of Banking and Insurance
 20 West State Street
 Trenton, NJ 08625-0327

LICENSE NUMBER
8623902

THIS CERTIFIES THAT **ANNE CAMPAGNA**

AT BUSINESS ADDRESS FIARVIEW INSURANCE AGENCY ASSOCIATES INC
 25 FAIRVIEW AVENUE
 VERONA, NJ 07044

This insurance license is valid and shall remain in effect unless revoked or suspended provided that the fee set forth in N.J.A.C. 11:17-2.12 is paid and renewal requirements set forth in N.J.A.C. 11:17-2.5, including continuing education requirements for resident individuals, are met by the license expiration date. A renewal notice will be mailed to the licensee mailing address approximately 30 days prior to the license expiration date.

IS DULY LICENSED WITH THE FOLLOWING LICENSE TYPE(S) AND AUTHORITIES

LICENSE TYPE	LINES OF AUTHORITY	EFFECTIVE DATE	EXPIRATION DATE
PRODUCER	ACCIDENT, HEALTH OR SICKNESS; PERSONAL LINES; PROPERTY; CASUALTY	11/01/2010	04/30/2012

printed: 11/05/2010

Tom Corbett
 Commissioner of Banking and Insurance

The Department maintains an informative website at www.njdobi.org. Please visit this web page for valuable information and forms necessary to maintain compliance with licensing requirements.



**CITY OF HOBOKEN
PROPOSAL DOCUMENT CHECKLIST
RFQ – Insurance Brokerage Services**

REQUIRED	SUBMISSION REQUIREMENT	READ AND/OR SUBMITTED
X	One original/three hard copies and one electronic copy of submission	
X	Proposal Forms	
X	Stockholder Disclosure Certificate	
X	Non-Collusion Affidavit	
X	New Jersey Business Registration Certificate	
X	Mandatory Affirmative Action Language	
X	Americans With Disabilities Act of 1990 Language	
X	Insurance	
X	Prevailing Wages	
X	Public Works Vendor Registration Act	
X	Nuclear-Free Hoboken Ordinance	



CERTIFICATE OF LIABILITY INSURANCE

OP ID: DB

DATE (MM/DD/YYYY)

06/10/11

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Fairview Associates 25 Fairview Avenue Verona, NJ 07044 Fairview Insurance Agency		973-857-0870 973-857-9645	CONTACT NAME: PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS: PRODUCER CUSTOMER ID #: FAIRV-2
INSURED Fairview Insurance Agency Associates, Inc. 25 Fairview Avenue Verona, NJ 07044-1341		INSURER(S) AFFORDING COVERAGE INSURER A: Selective Insurance Company 12572 INSURER B: Pennsylvania National Ins. Co. 32441 INSURER C: Westport Insurance Corporation INSURER D: INSURER E: INSURER F:	

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC			S1246017	02/14/11	02/14/12	EACH OCCURRENCE	\$ 2,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000
							MED EXP (Any one person)	\$ 10,000
							PERSONAL & ADV INJURY	\$ 2,000,000
							GENERAL AGGREGATE	\$ 6,000,000
							PRODUCTS - COMP/OP AGG	\$ 6,000,000
								\$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			S1246017	02/14/11	02/14/12	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
								\$
B	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DEDUCTIBLE <input checked="" type="checkbox"/> RETENTION \$ 10,000			3810601956	09/20/10	09/20/11	EACH OCCURRENCE	\$ 8,000,000
							AGGREGATE	\$ 8,000,000
								\$
								\$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N <input type="checkbox"/> N/A			WED4NJ005012005	09/20/10	09/20/11	WC STATUTORY LIMITS	OTHER
							E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$
Errors & Omissions							Per Claim	2,000,000
							Aggregate	4,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 City of Hoboken will be included as an additional insured if awarded bid.

CERTIFICATE HOLDER**CANCELLATION**

City of Hoboken
 C/O Law Department
 94 Washington Street
 Hoboken, NJ 07030

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

John F. Graham



FAIRVIEW
INSURANCE AGENCY
ASSOCIATES, INC.

June 10, 2010

City of Hoboken
c/o Law Department
94 Washington Street
Hoboken, New Jersey 07030

Re: Indemnification Statement

Dear Sir or Madam:

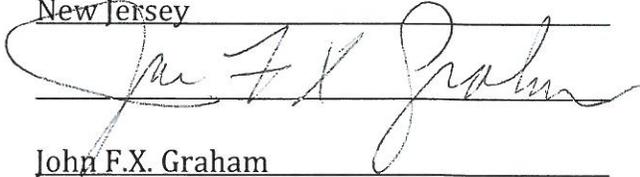
This is to confirm the following:

Fairview Insurance Agency Associates, Inc. shall indemnify, defend, and save harmless the City, at our own cost and expense, from and against all losses and all claims, demands, payments, suits, actions, recoveries and judgments of every nature and description brought or recovered against our firm, by reason of any act or omission of Fairview Insurance Agency Associates, Inc., and our agents or employees, in the execution of the work.

Please refer to the Certificate of Errors and Omissions coverage for evidence of such.

Legal Name of Corporation: Fairview Insurance Agency Associates, Inc.

State of Incorporation: New Jersey

Signed by: 

Name: John F.X. Graham

Title: Chief Executive Officer

Dated: June 10, 2011



25 Fairview Avenue • P.O. Box 324 • Verona, New Jersey 07044
Tel: 973.857.0870 • Toll Free: 800.372.2558 • Fax: 973.857.9645
1930 E. Marlton Pike, Suite C-16 • Cherry Hill, New Jersey 08003
Tel: 856.424.8515 • Toll Free: 800.452.5376 • Fax: 856.424.7933

www.fairviewinsurance.com



AFFIRMATIVE ACTION COMPLIANCE NOTICE
N.J.S.A. 10:5-31 and N.J.A.C. 17:27

GOODS AND SERVICES CONTRACTS
(INCLUDING PROFESSIONAL SERVICES)

This form is a summary of the successful Vendor's requirement to comply with the requirements of N.J.S.A. 10:5-31 and N.J.A.C. 17:27-1 et seq.

The successful Vendor shall submit to the public agency, after notification of award but prior to execution of this contract, one of the following three documents as forms of evidence:

(a) A photocopy of a valid letter that the vendor is operating under an existing Federally approved or sanctioned affirmative action program (good for one year from the date of the letter);

OR

(b) A photocopy of a Certificate of Employee Information Report approval, issued in accordance with N.J.A.C. 17:27-4;

OR

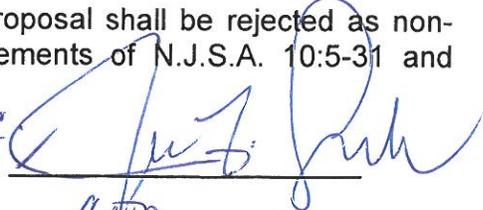
(c) A photocopy of an Employee Information Report (Form AA302) provided by the Division and distributed to the public agency to be completed by the vendor in accordance with N.J.A.C. 17:27-4.

The successful vendor may obtain the Affirmative Action Employee Information Report (AA302) from the contracting unit during normal business hours.

The successful vendor(s) must submit the copies of the AA302 Report to the Division of Contract Compliance and Equal Employment Opportunity in Public Contracts (Division). The Public Agency copy is submitted to the public agency, and the vendor copy is retained by the vendor.

The undersigned vendor certifies that he/she is aware of the commitment to comply with the requirements of N.J.S.A. 10:5-31 and N.J.A.C. 17:27.1 et seq. and agrees to furnish the required forms of evidence.

The undersigned vendor further understands that his/her proposal shall be rejected as non-responsive if said vendor fails to comply with the requirements of N.J.S.A. 10:5-31 and N.J.A.C. 17:27-1 et seq.

COMPANY: Fairview Insurance Agency Assoc. Inc SIGNATURE: 
PRINT NAME: John F. Graham TITLE: CEO
DATE: 6/13/11

**CERTIFICATE OF EMPLOYEE INFORMATION REPORT
RENEWAL**

This is to certify that the contractor listed below has submitted an Employee Information Report pursuant to N.J.A.C. 17:27-1.1 et seq. and the State Treasurer has approved said report. This approval will remain in effect for the period of **15-MAY-2005** to **15-MAY-2012**

FAIRVIEW INSURANCE AGENCY ASSOCIATES, INC.
25 FAIRVIEW AVENUE
VERONA NJ 07044



A handwritten signature in cursive script, appearing to read "John P. Lawrence".

State Treasurer

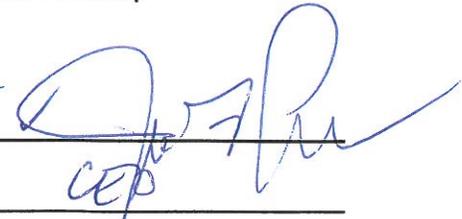
**AMERICANS WITH DISABILITIES ACT OF 1990
ACKNOWLEDGEMENT FORM**

This form is an agreement of the successful Vendor's obligations to comply with the requirements of 42 U.S.C. §121.01 et seq., referred to as the Americans Disability Act of 1990.

The undersigned Vendor hereby acknowledges receipt of the Americans With Disabilities Act of 1990 found at Appendix B of this packet.

The undersigned Vendor hereby certifies that he/she is aware of the commitment to comply with the requirements of 42 U.S.C. §121.01 et seq. and agrees to furnish any required forms as evidence of compliance.

The undersigned Vendor further certifies that he/she understands that his/her proposal shall be rejected as non-responsive, and any contract entered into shall be void and of no effect if said Vendor fails to comply with the requirements of 42 U.S.C. §121.01 et seq.

COMPANY: Fairview Insurance Agency Assoc. Inc SIGNATURE: 
PRINT NAME: John F. Graham TITLE: CEO
DATE: 6/13/11

STOCKHOLDER DISCLOSURE CERTIFICATION

Name of Business:

I certify that the list below contains the names and home addresses of all stockholders holding 10% or more of the issued and outstanding stock of the undersigned

OR

I certify that no one stockholder owns 10% or more of the issued and outstanding stock of the undersigned.

Check the box that represents the type of business organization:

- Partnership Corporation Sole Proprietorship
 Limited Partnership Limited Liability Corporation Limited Liability Partnership
 Subchapter S Corporation

Sign and notarize the form below, and, if necessary, complete the stockholder list below.

Stockholders:

Table with 2 columns and 2 rows of stockholder information including Name and Home Address for John F. Graham, Janet L. Graham, Lawrence K. Graham, and Glenn R. Jacobs.

Notary section containing the date '13 day of June, 2011', the signature of Patricia A. Holmes, and the signature and name of John F. Graham as the affiant.

PATRICIA A. HOLMES
NOTARY PUBLIC OF NEW JERSEY
My Commission Expires Dec. 1, 2012

CEO (Corporate Seal)

STATE OF NEW JERSEY
BUSINESS REGISTRATION CERTIFICATE

DEPARTMENT OF TREASURY/
DIVISION OF REVENUE
PO BOX 252
TRENTON, N J 08646-0252

TAXPAYER NAME:

FAIRVIEW INSURANCE AGENCY ASSOCIATES, IN

TRADE NAME:

FAIRVIEW ASSOCIATES

ADDRESS:

25 FAIRVIEW AVENUE
VERONA NJ 07044-1341

SEQUENCE NUMBER:

1113731

EFFECTIVE DATE:

07/22/70

ISSUANCE DATE:

12/20/04

J.P. & Tully
Director

FORM-BRC(08-01)

This Certificate is NOT assignable or transferable. It must be conspicuously displayed at above address.



June 10, 2010

City of Hoboken
c/o Law Department
94 Washington Street
Hoboken, New Jersey 07030

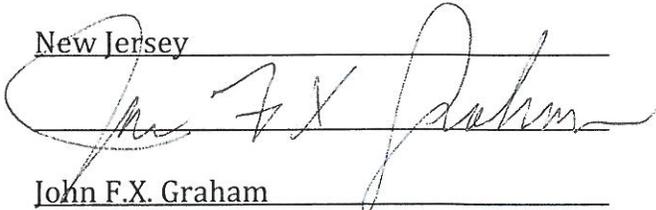
Re: New Jersey Worker and Community Right to Know Act

Dear Sir or Madam:

This is to confirm that the New Jersey Worker and Community Right to Know Act (N.J.S.A. 34:5A-1 et seq. and N.J.A.C. 8:59-2 et. seq) does not apply to our organization.

Legal Name of Corporation: Fairview Insurance Agency Associates, Inc.

State of Incorporation: New Jersey

Signed by: 

Name: John F.X. Graham

Title: Chief Executive Officer

Dated: June 10, 2011



25 Fairview Avenue • P.O. Box 324 • Verona, New Jersey 07044
Tel: 973.857.0870 • Toll Free: 800.372.2558 • Fax: 973.857.9645
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Tel: 856.424.8515 • Toll Free: 800.452.5376 • Fax: 856.424.7933

www.fairviewinsurance.com





June 10, 2010

City of Hoboken
c/o Law Department
94 Washington Street
Hoboken, New Jersey 07030

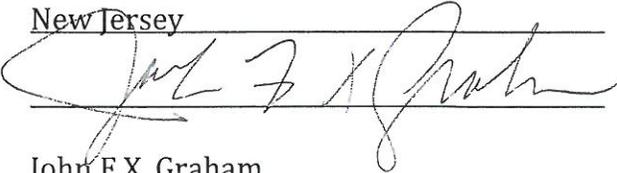
Re: Prevailing Wage Act

Dear Sir or Madam:

This is to confirm that the Prevailing Wage Act, pursuant to N.J.S.A. 34:11-56.25 et. seq, does not apply to our organization.

Legal Name of Corporation: Fairview Insurance Agency Associates, Inc.

State of Incorporation: New Jersey

Signed by: 

Name: John F.X. Graham

Title: Chief Executive Officer

Dated: June 10, 2011

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FAIRVIEW
INSURANCE AGENCY
ASSOCIATES, INC.

June 10, 2010

City of Hoboken
c/o Law Department
94 Washington Street
Hoboken, New Jersey 07030

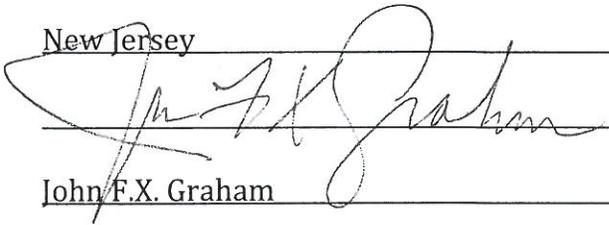
Re: Davis Bacon Act

Dear Sir or Madam:

This is to confirm that the Davis Bacon Act does not apply to our organization.

Legal Name of Corporation: Fairview Insurance Agency Associates, Inc.

State of Incorporation: New Jersey

Signed by: 

Name: John F.X. Graham

Title: Chief Executive Officer

Dated: June 10, 2011



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June 10, 2010

City of Hoboken
c/o Law Department
94 Washington Street
Hoboken, New Jersey 07030

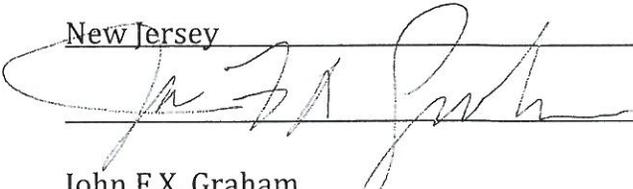
Re: The Public Works Vendor Registration Act

Dear Sir or Madam:

This is to confirm that the Public Works Vendor Registration Act (N.J.S.A. 34:11-56.48 et. seq) does not apply to our organization.

Legal Name of Corporation: Fairview Insurance Agency Associates, Inc.

State of Incorporation: New Jersey

Signed by: 

Name: John F.X. Graham

Title: Chief Executive Officer

Dated: June 10, 2011

25 Fairview Avenue • P.O. Box 324 • Verona, New Jersey 07044
Tel: 973.857.0870 • Toll Free: 800.372.2558 • Fax: 973.857.9645
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www.fairviewinsurance.com



NON-COLLUSION AFFIDAVIT

State of New Jersey

County of Essex

I, John F. Graham residing in Livingston NJ
(name of affiant) (name of municipality)

in the County of Essex and State of NJ of full age, being duly sworn according to law on my oath depose and say that:

I am CEO of the firm of Primerica Insurance Agency Assoc. Inc.
(title or position) (name of firm)

Primerica Insurance Agency Assoc. Inc. the Vendor making this Proposal for the proposal entitled Insurance Brokerage Services and that I executed the said proposal
(title of proposal)

with full authority to do so that said Vendor has not, directly or indirectly entered into any agreement, participated in any collusion, or otherwise taken any action in restraint of free, competitive contracting in connection with the above name project; and that all statements contained in the said proposal and in this affidavit are true and correct, and made with full knowledge that the **City of Hoboken** relies upon the truth of the statements contained in said Proposal and in the statements contained in this affidavit in awarding the contract for the said project.

I further warrant that no person or selling agency has been employed or retained to solicit or secure such contract upon an agreement or understanding for a commission, percentage, brokerage, or contingent fee, except bona fide employees or bona fide established commercial or selling agencies maintained by Primerica Insurance Agency Assoc. Inc.
(name of Vendor)

Subscribed and sworn to before me this day June 13, 2011

[Signature]
(Type or print name of affiant under signature)
John F. Graham

Patricia A. Holmes
Notary Public of PATRICIA A. HOLMES
NOTARY PUBLIC OF NEW JERSEY
My Commission expires My Commission Expires Dec. 1, 2012



FAIRVIEW
INSURANCE AGENCY
ASSOCIATES, INC.

June 10, 2010

City of Hoboken
c/o Law Department
94 Washington Street
Hoboken, New Jersey 07030

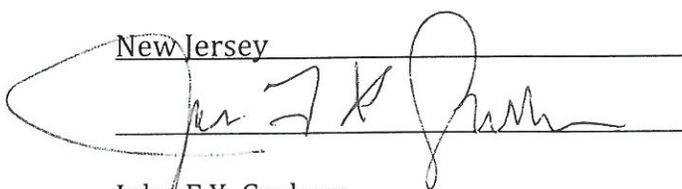
Re: Pay to Play

Dear Sir or Madam:

This is to confirm that our firm is in compliance with all necessary filings for ELEC pursuant N.J.S.A. 19:44A-20.27. Our firm's filings are available from ELEC at 888-313-3532 or at www.elec.state.nj.us.

Legal Name of Corporation: Fairview Insurance Agency Associates, Inc.

State of Incorporation: New Jersey

Signed by: 

Name: John F.X. Graham

Title: Chief Executive Officer

Dated: June 10, 2011



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THE NUCLEAR-FREE HOBOKEN ORDINANCE

(1) FINDINGS: The People of the City of Hoboken hereby find that:

- (a) Nuclear weapons production, in the United States and in other countries, is draining the world's resources and presenting humanity with an ever-increasing threat of nuclear war.
- (b) Any participation in the nuclear war industry, locally, federally, or otherwise, directly condones the possible annihilation of our civilization. We see this as a crime against the sacredness of our humanity.
- (c) The emphatic expression of our community, along with communities throughout the world, can help initiate steps by the United States, the Soviet Union, and other nuclear weapons powers to end the arms race and the proliferation of all nuclear weapon systems.

(2) POLICY: Hoboken shall be established as a Nuclear Free Zone.

A Nuclear Free Zone shall be defined by these requirements:

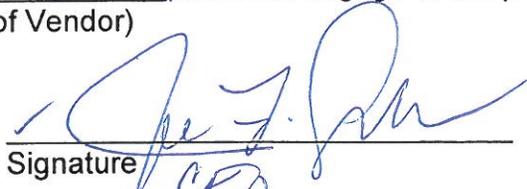
- (a) No nuclear weapons, delivery systems for such weapons, or components expressly intended to contribute to the operation, guidance or delivery of a nuclear weapon shall be produced or stored within the City of its' port.
- (b) No waste from the production of nuclear weapons, their components, or commercial nuclear power shall be stored within the City of its' port.
- (c) No research furthering nuclear weapons, their components, or commercial nuclear power shall be stored within the City of its' port.
- (d) The Mayor and Council of the City of Hoboken shall request the United States Department of Transportation and the New Jersey Department of Transportation to provide the City with advance notification of any radioactive waste shipment through the City limits. Upon such notification, the Mayor and Council shall act to prevent transportation of radioactive waste through the City by seeking an exemption for preemption by Department of Transportation regulations or using other legal means at their disposal.
- (e) The Mayor and Council of the City of Hoboken shall not do business or award any municipal contract to any person, firm, or organization engaged in the production of nuclear weapons or components.

(3) This ordinance expresses the policy of the City of Hoboken. It is not intended to make violations subject to forfeiture and nothing in this ordinance shall be construed to prohibit or regulate any activity not specifically described in Subsection (2).

(4) SEVERABILITY: If any portion of this Ordinance is hereafter declared invalid, all remaining portions shall remain in full force and effect, and to this extent, the provisions of this Ordinance are severable.

 CERTIFICATION: I hereby certify that Primus Insurance Agency Assoc. Inc. does not engage in the production of nuclear weapons or components. (Name of Vendor)

6/13/11
 Date


 Signature
CEO
 Title

JON S. CORZINE
Governor



DAVID ROUSSEAU
State Treasurer

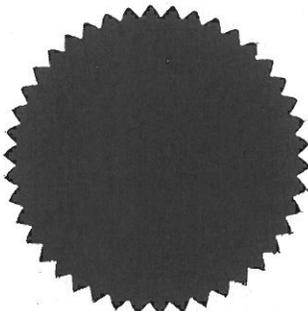
APPROVED

by the
Department of the Treasury
Division of Minority and Woman Business Development
under the
Small Business Set-Aside Act
and
Women and Minority Certification Program

This certificate acknowledges **FAIRVIEW INSURANCE AGENCY ASSOCIATES INC** as a **Category 2** approved Small Business Enterprise that has met the criteria established by N.J.A.C. 17:13.

This registration will remain in effect for three years. Annually the business must submit, not more than 20 days prior to the anniversary of the registration notice, an annual verification statement in which it shall attest that there is no change in the ownership, revenue eligibility or control of that business.

If the business fails to submit the annual verification statement by the anniversary date, the registration will lapse and the business will be removed from the SAVI that lists registered small businesses. If the business seeks to be registered again, it will have to reapply and pay the \$100 application fee. In this case, a new application must be submitted prior the expiration date of this registration.



Certification Number: 51294-20

Issued: January 7, 2010

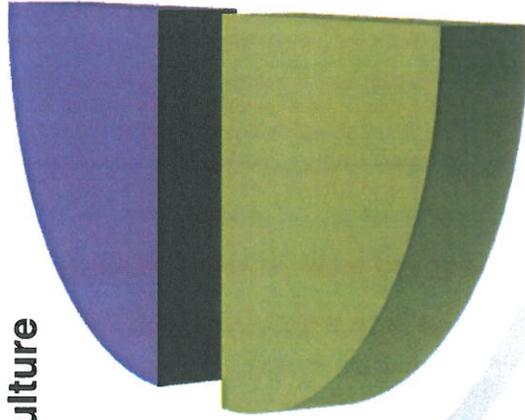
Nina E. Moseley

Nina E. Moseley
Senior Director

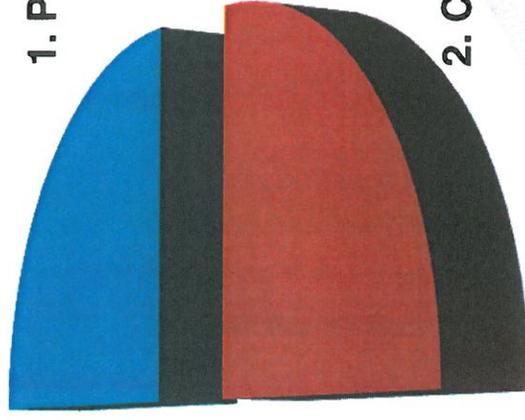
Expiration: January 6, 2013

Here's How Our Process Works!

4. Coaching & Building a Culture of Wellness



3. Kick-off & Promotional Campaign



1. Planning

2. Coach Hiring and Training



Planning

- Allocation of coach time among facilities, departments, work groups and shifts
- Scheduling of coach hours
- Development of initial customized health promotion programs, i.e. walking program
- Development of customized reporting package and other data sharing needs
- Development and planning of kick-off and promotional campaign
- Development of integration strategy



Hiring & Training of Our Wellness Coaches

Hiring

- Typically, local residents
- Health care professionals
- “People” people

Training

- Classroom and workplace
- Coaching methodology and skill sets
- Existing programs and resources



Kickoff and Promotional Campaign

- **Developed during planning process**
- **Executed by Wellness Coaches and our Management Staff**
- **Includes some combination of seminars, small group gatherings, mailings, posters, emails, etc.**



Coaching & Building a Culture of Wellness

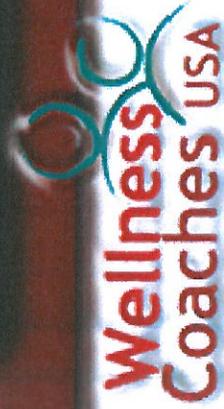
- Providing each employee with the coaching support needed to avoid the natural migration to, or improve, unhealthy and risky lifestyle behaviors
- Helping each employee, according to their own needs, achieve the health and wellness goals that are important to them in their own lives...
- Building employee trust and becoming part of their lives
- Developing employee interest in maintaining or improving their health
- Moving employees to a state of "readiness" or "commitment" to improve their health
- Converting employee commitment to "Action"
- Providing the support employees need to accomplish, and then sustain their health and wellness goals



Coaching & Building a Culture of Wellness

Coaching Components

- Educating through personal distribution and discussion of health and safety information
- Building self-awareness through blood pressure, BMI, weight, and heart rate testing
- Helping set personal objectives and strategies
- Building confidence, self responsibility and self-efficacy
- Building skills and providing resources to help accomplish objectives
- Helping overcome obstacles and maintaining successes
- Fostering accountability



Improving health in the workplace . . .face to face



Coaching & Building a Culture of Wellness

In addition to coaching, our Wellness Coaches work with our customers to promote, develop and/or implement company-wide wellness programs and activities, including:

- Structured **health promotion programs** (i.e. weight loss competitions, walking contests, etc.)
- Third party **health promotion offerings** (i.e. web sites, blood screenings, flu shots, health fairs, etc.)
- Administration of HRA's (either provided by us, the insurance carrier, or other independent vendor you select)
- Provision of **group educational sessions** (i.e. seminars, lunch and learns, etc.)
- Dissemination of **health information**
- Participation on **committees**



Sample of Coach led Activities at City of Las Vegas

- Health Fair
- Biggest Loser Program
- Tooty Fruity Tuesday
- Maintain Don't Gain
- Know Your Numbers (Bio-metrics)
- Thirsty Thursdays
- End of Summer Meltdown
- Cooking with a Celebrity Chef
- Race for the Cure
- Peer Fitness Training
- Fire Fighter Nutrition Classes
- Santa's 5k Run
- Mayor's Health Initiative Walk
- Corporate Fitness Challenge
- Stretch Programs
- Sun Safety Sunscreen Promotion
- Walks for Life Incentive Program
- Hygiene Awareness
- Flu Prevention
- Health Education for Shift workers
- CPR & First Aid Training
- Las Vegas Marathon
- ALA Freedom from Smoking Training
- Feel Great in 08' Event
- Holiday Wellness Challenge
- Croc-a-thon
- 21 Days to Make or Break a Habit
- National Night Out
- Executive Physical Sign-ups
- Summer Hydration Testing



Coaching for Remote Employees, Spouses and Retirees

Integrated Technology Model –

Entered into licensing arrangement with Hummingbird Coaching Services to integrate their online coach communications and content technology platform with our onsite services.

- Expand our coaching reach (employees working at remote locations or from home, spouses, retirees, etc.)
- Three Coaching Methodologies...One Coach....
- Technology Coaching at an Onsite Coaching price....

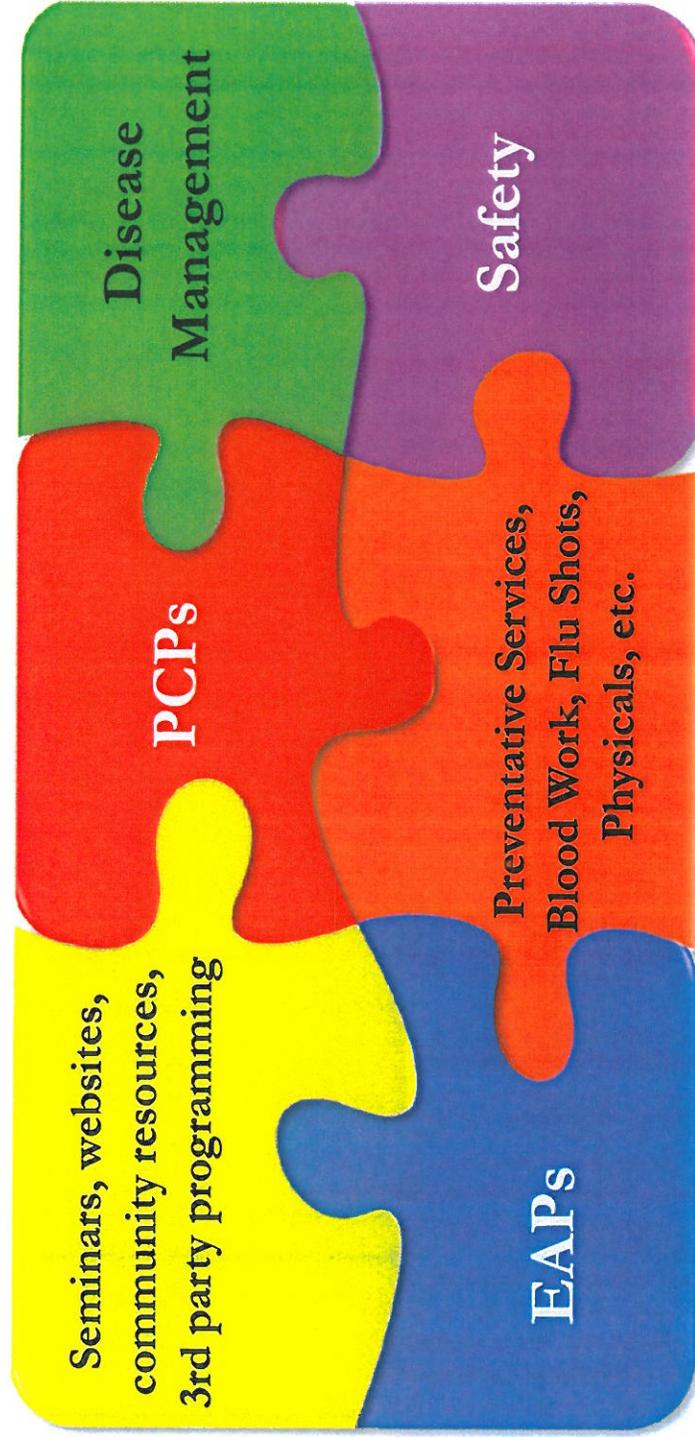


**Wellness
Coaches USA**

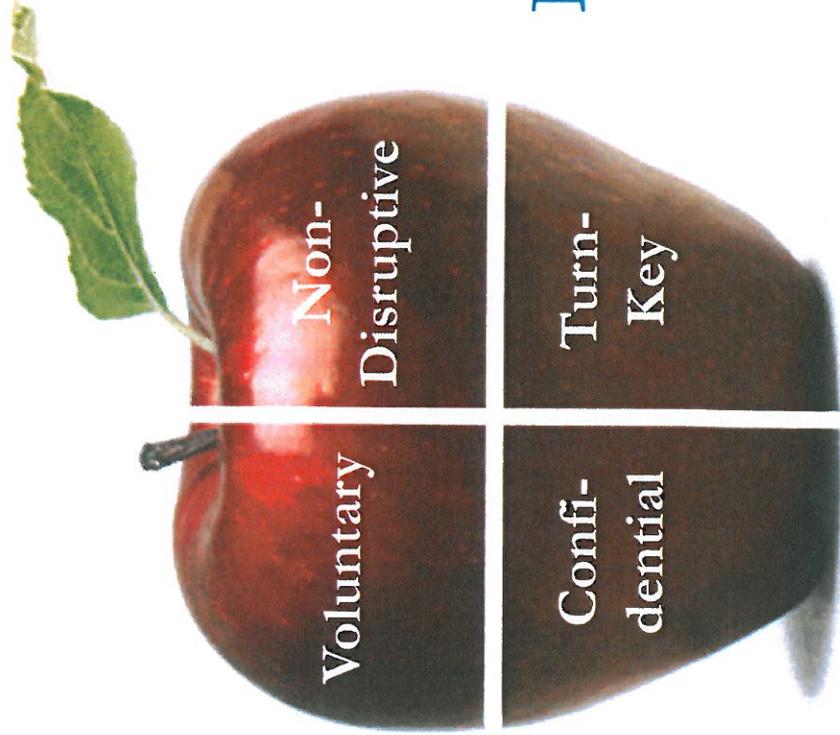
Improving health in the workplace...face to face



Integration



Key Process Commitments



**For
Employees**

**For
Employers**



Our Coaching Software System

Proprietary and internally developed...
collects all employee/coach interactions daily,
including content, outcomes, and follow-up plans.

Used By

Our Coaches; to manage
and assess employee
progress through the
behavior change process

By Management; to manage and
assess coach performance and
quality, evaluate program
success; and for customer
reporting purposes.



Transcending dollars and cents...

“You saved my life”

“I wish my Coach was here 10 years ago”

“Our Coach has completely transformed our culture”

“This is the greatest program my company could have offered”

“There’s no substitute for a Coach in the workplace”

“Employee morale has never been higher”

“I didn’t realize how much the company cared about me”

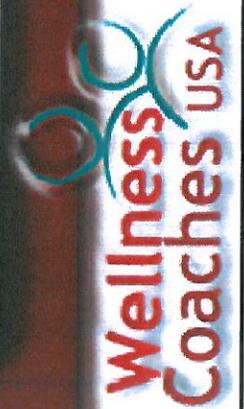
“My Coach has become an important part of my life”



Improving health in the workplace . . . face to face



Wellness Works...Wellness Works Best With Wellness Coaches in the Workplace



Improving health in the workplace . . .face to face





HR & BENEFITS LIBRARY

HR Genius is an award-winning Human Resource, Employment Law and Benefits library. The site features 1000's of pages of content about topics that every business needs to know including:

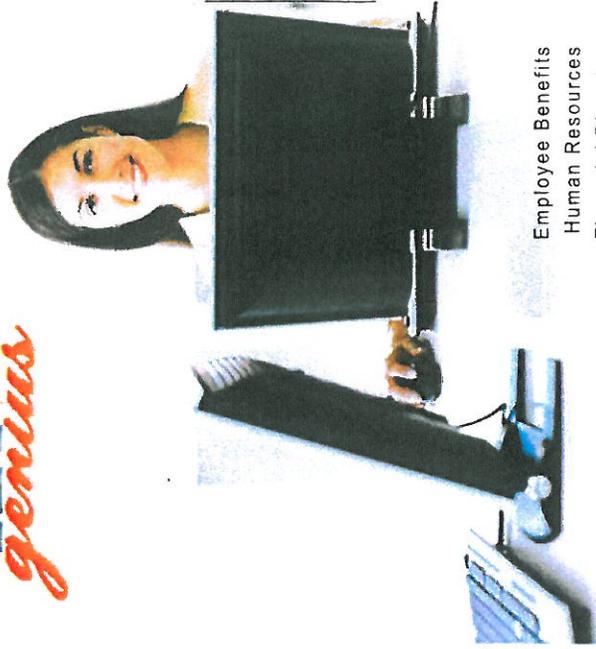
- Employee Benefits: Federal and State requirements with concise explanations
- Downloadable sample Employee Handbook
- Human Resource and Employment information including interviewing, hiring and screening
- Hundreds of downloadable forms, policies and checklists
- Clear explanations of acronyms such as COBRA, ERISA, FMLA, HIPAA
- HR & Benefits Newsletter

HR Genius is a comprehensive online human resource, benefits resource and reference library composed and maintained by employment lawyers, accountants and HR experts.

All this content is provided in an easy-to-navigate, timesaving format that helps you be more proactive and knowledgeable.



HR
genius



Employee Benefits
Human Resources
Financial Planning
State Employment Laws
Forms, Policies & Checklists

**Award-Winning
Online Human
Resource and
Benefits Library**



HR
genius

Information Every Business Needs to Know™

HR GENIUS

As a subscriber, you will benefit from our comprehensive online coverage of State and Federal HR and Benefits laws and regulations.

easy-to-understand explanations and analysis of state and federal human resource laws

TOPICS COVERED:

- EMPLOYEE BENEFITS
- HUMAN RESOURCES
- STATE EMPLOYMENT LAWS
- FINANCIAL PLANNING
- FORMS, POLICIES & CHECKLISTS



MORE INFORMATION

HR Genius gives you easy-to-understand explanations and analysis of complicated laws and confusing acronyms.

MORE FORMS

Our comprehensive collection of proprietary forms includes human resources forms, sample policies, checklists and model documents – all in a downloadable, ready-to-use format.

MORE ANSWERS

Our website content is managed by a panel of expert authors and advisors have years of experience advising clients, educating students and peers, and writing about HR, benefits, and related areas.

What You Need HR Genius Delivers

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Fast Answers to HR and Benefits Questions	Our FAQ sections deliver the answers you are looking for, and our experts will answer your questions one-on-one by email.
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For More Information Please Contact:

Fairview Insurance

(800) 372-2558

HR
genius

[Account Summary](#) [Account Contacts](#) [Activity Log](#) [Service Info](#) [Attachments](#) [Plans](#) [Requests](#)

DOE, JOHN

 [Tasks >>](#)

Account Information			
Status	Active	Broker of Record	
Type	Client	Gender	Male
First Name	JOHN	Social Security Number	123-45-6789
Middle Name		Marital Status	
Last Name	DOE	Email Address	
Optional Salutation		Phone Number	Work : (973) 1234567
Date of Birth	06/14/1978	Group Account Affiliation	Fairview Insurance Agency Asso
Account Number		HIPAA Business Associate Agreement Required	None Selected

Account Dependents
There are currently no account dependents.

Main Address
United States 123 ANYWHERE LANE ANYTOWN, NJ 07110

Billing Address
United States 123 ANYWHERE LANE ANYTOWN, NJ 07110

Mailing Address
United States 123 ANYWHERE LANE ANYTOWN, NJ 07110

Account Summary Account Contacts **Activity Log** Service Info Attachments Plans Requests

DOE, JOHN

Tasks >>

Status	Assigned To	Search Criteria
Select List View	Open & Closed All Account Team Members	<input type="text"/> Update

View Excel

Record #	Inquirer	Assigned To	Date Created	Due Date	Status	Priority	
5218326	Materials: DUPLICATE ID CARD	Benitez, Jackie	06/08/2011		Closed 06/08/2011	Medium	
5218318	Materials: DUPLICATE ID CARD	Benitez, Jackie	06/08/2011		Closed 06/08/2011	Medium	
5218276	Eligibility: ENROLLMENT APPLICATION	Benitez, Jackie	06/08/2011		Closed 06/08/2011	Medium	
5218241	Claims: DOS 1/1/11	Benitez, Jackie	06/08/2011		Open	Medium	

DOE, JOHN: Edit Record #5218241

Download to Calendar

Tasks >>

View Excel

Inquirer Information

Record Summary

Subject Claims
Plans [Select Plan](#)
Short Description DOS 1/1/11
Long Description EMERGENCY EXAM NOT BEING PAID BY INSURANCE CARRIER

11950 characters remaining

Record Details

Date Created	06/08/2011	Created by	Benitez, Jackie
Date Due	<input type="text"/>	Days Open	7
Priority	Medium	Record Status	Open
Assigned to*	Benitez, Jackie	Resolution	<input type="text"/>
Notify Assignee via email?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Date Completed	<input type="text"/>
Notify Team Members via email?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Initial Time Logged	0 Hours 00 Minutes
		Total Time Logged	0 Hours 00 Minutes

Activities

Description	Status	Assigned To	Created Date	Follow-Up Date	Date Completed	Total Time Logged	Action
DOS 1/1/11	In Progress	Benitez, Jackie	06/08/2011			0:00	View/Update
F/U TO DOS 1/1/11	In Progress	Benitez, Jackie	06/08/2011	06/15/2011		0:00	View/Update



Core

HEALTH ADVOCATE

Features

The Personal Health Advocate

The Personal Health Advocate is a trained professional, typically a Registered Nurse, who understands the intricacies of the healthcare system and how to navigate through it. As soon as a member contacts us he/she establishes a relationship with a Personal Health Advocate who stays with them through to the resolution of the problem. Our Personal Health Advocates demonstrate a commitment to service excellence, have strong problem-solving skills and support members as they seek healthcare services and interact with providers and insurers. Personal Health Advocates work in tandem with Medical Directors and with our team of administrative experts who handle claims, benefits, grievances and paperwork issues.

Our staff is specially trained to handle each case with the utmost confidentiality. We follow careful protocols that comply with all governmental privacy standards to ensure that our members' medical and personal information is fully protected and held confidential.

Hours of Operations: Health Advocate can be accessed 24/7. Our normal business hours are Monday – Friday between 8am and 7pm Eastern Time. After hours and during weekends, on-call staff is always available for assistance with issues that need to be addressed during non-business work hours.

Clinical Support Services

Care Coordination: The Personal Health Advocate helps members coordinate care among physicians and medical institutions in various ways:

- Helping members understand tests, treatments and medications recommended or prescribed by their physician.
- Assisting members through a complex medical condition.

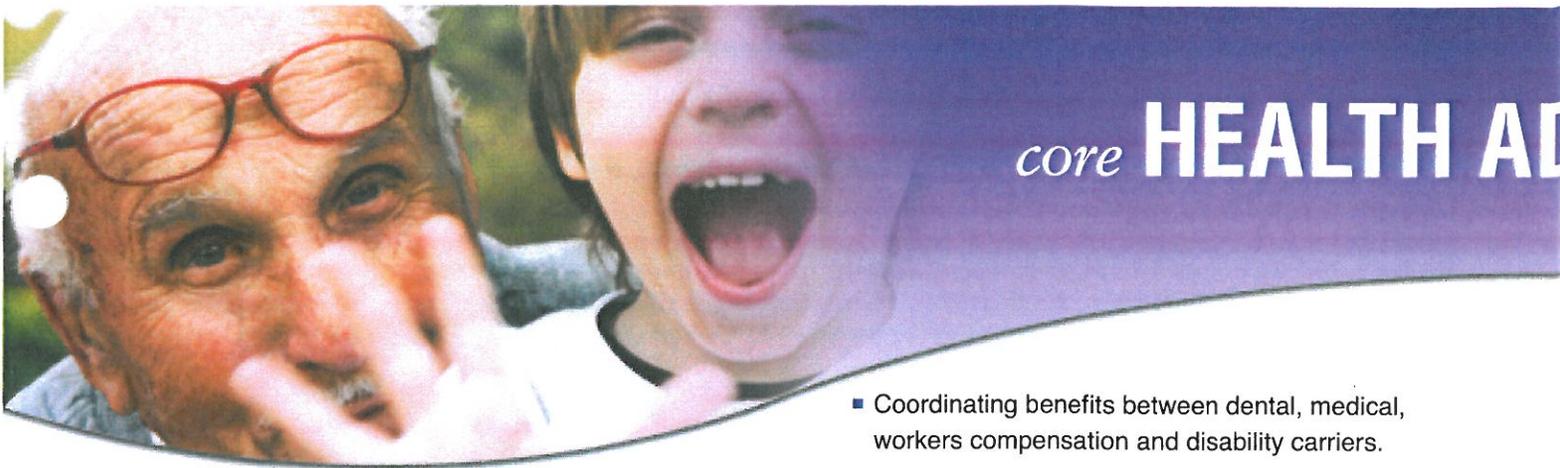
- Facilitating the transfer of medical records, x-rays and lab results prior to a scheduled appointment with a new physician.
- Arranging for home-care equipment following discharge from the hospital.
- Facilitating a review of test results with another physician for confirmation of a diagnosis.
- Coordinating and making arrangements for diagnostic tests.
- Coordinating care for a member with complicated medical issues.
- Consolidating a multiple-day testing schedule for special needs members.
- Arranging for a member to be evaluated for participation in a clinical trial.
- Arranging hospice and other services for terminally ill patients.
- Fostering communication and coordinating benefits between physicians and with insurance companies.

Advocates of Excellence™: Helps members with rare, serious or complex medical conditions identify top medical institutions, critical illness providers and specialized medical programs across the country. Our Personal Health Advocates will schedule appointments and coordinate transportation and lodging when necessary.

Physician Locator™: Helps members identify primary and specialist physicians, hospitals, dentists and related healthcare providers. Our first focus is on network relationships to help members use their benefits to their best advantage.



HEALTH
Advocate™



Rx Advocate™: The Personal Health Advocate can provide members with assistance on prescription drug issues including formulary and benefit questions.

- Providing information for renewing prescriptions.
- Providing information on generic drugs.
- Locating lower cost sources for prescription drugs that are not covered by the health plan.
- Assisting members in obtaining mail order prescriptions.
- Resolving questions between members and pharmacies regarding the amount of product requested and the amount dispensed.
- Obtaining coverage for medications that require mail order.

Administrative Support Services

Claims & Billing Assistance: Personal Health Advocates help sort out and solve claims and related paperwork problems. We work on coverage issues and help members understand the coding and payment rules that apply to their circumstances. Examples of other services include:

- Researching a member's outstanding out-of-pocket responsibilities and resolving errors with providers and/or member's health plan.
- Correcting balance-billing problems.
- Resolving eligibility problems and benefit and claim denials.
- Correcting charges incorrectly applied to the member's deductible.
- Resolving questions about whether services are condition-specific or related to preventive care.

- Coordinating benefits between dental, medical, workers compensation and disability carriers.
- Resolving incorrect plan procedure interpretations such as emergency room claims denied for a lack of precertification.
- Assuring correct application of provider network status.
- Correcting errors in processing of "blind" network provider discounts.
- Providing payers with additional information required to correctly pay a claim or apply a benefit.
- Resolving coordination of benefits disputes between multiple carriers.
- Satisfying plan requests for copies of referrals.
- Resolving errors in the application of deductibles and co-payments.
- Providing the correct member insurance information to providers.

Fee Negotiation: When necessary, Health Advocate can attempt to negotiate fees with healthcare providers to lower the member's out-of-pocket costs. This is often done prior to the member receiving services. We can also review questionable bills to catch duplicate or erroneous charges.

Appeals Advice: Our first approach is to resolve disputes and issues through discussion; however, when appropriate, we will provide advice or assistance to members when filing a complaint or grievance with their health insurer or health plan administrator. We can provide the member with guidance regarding their appeal rights and when all other means have failed, and we agree that the issues are valid, help the member formulate the argument, gather supporting documentation and write the letter of appeal to the health plan. In addition and if appropriate, Health Advocate will telephonically represent a member during a hearing.

ADVOCATE *features*

Coverage Advantage™: If there are questions of coverage for a particular service, or if coverage for clinical care has been denied, the Personal Health Advocate can help members through the review and appeals process. We can also assist in identifying alternative coverage options when necessary.

- Obtaining exceptions for a member to see providers outside of their capitated relationships, if appropriate.
- Obtaining referrals for required services.
- Locating in-network suppliers and obtaining plan approval for the use of out-of-network suppliers for necessary healthcare equipment and supplies that are not available from in-network suppliers.
- Obtaining transitional care coverage at an in-network benefit level when medically necessary.
- Resolving questions of denial of benefits deemed to be non-covered, not medically necessary or ineligible.
- Counseling members regarding current benefit costs and the cost of alternative approaches.
- Helping members understand the process for obtaining coverage for medical equipment, devices and supplies (e.g., hearing aids, diabetic supplies, compression stockings).
- Answering coverage questions.
- Providing information regarding benefit level coverage comparisons for various providers.
- Transitioning members from out of network to in-network providers.
- Assisting members with the preauthorization and predetermination process.
- Locating “hard-to-find” IV drugs or home care services to facilitate hospital discharge.
- Assisting employees with disability coverage questions and helping them go back to work.

- Resolving eligibility questions involving disabled dependent rules, Family Medical Leave Act, COBRA, etc.

Healthcare Coaching

Personal Health Advocates provide members with the information they need to help them become active participants in the management of their health.

- Helping prepare members for their visits with their physicians and other healthcare providers.
- Helping members better understand their serious or chronic conditions.
- Answering questions and providing information and resources about medical terms, tests, medications and treatments.

Information & Service Support

CareQuest™: Health Advocate helps locate and make arrangements for members’ special services needs. The individual member is responsible for payment of any specific services arranged on a fee-for-service basis that are not covered by an insurance plan. Examples of the kind of services we can help members with include:

- Locating homemaker, adult day care and rehabilitation services not covered by the member’s health plan.
- Locating inpatient private duty nursing.
- Finding a group home for individuals with special needs.
- Locating home health aides.
- Helping members complete qualification applications for individual coverage options, including Medicaid and Medicare.



Core

HEALTH ADVOCATE

Features

M.D. Direct™: In the case of serious medical illness, Health Advocate can provide members with access to experts for consultations and second opinions. Every step is taken so that members and their families are advised in full as to the diagnosis, treatment, medications and support systems available to them.

Complementary and Alternative Medicine: Health Advocate helps identify and coordinate a range of wellness services including those offered by Complementary and Alternative Medicine (CAM) practitioners in areas such as acupuncture, chiropractic care and massage therapy.

Mind Matters™: If necessary, Health Advocate can help members find an appropriate mental health provider to meet their specific needs.

Healthy Wheels™: Health Advocate helps arrange transportation services to support our members' healthcare needs.

Senior Care Navigator™: For employees or family members approaching retirement or who are already retired, we offer access to a wide array of services specifically geared for seniors. Our Personal Health Advocates understand senior members' needs and can help members select the appropriate professionals. Among the kind of issues we have worked on are:

- Locating alternative care facilities.
- Obtaining coverage for medical supplies.
- Providing information on adult day care programs.
- Coordinating coverage for home care services with Medicare and Medicaid.
- Assisting with the transition of insurance coverage and benefits from private insurance to Medicare.

- Locating physicians who make house calls for people who cannot easily get to the doctor's office.

Wellness: For those members looking for a personalized approach to weight management, getting and staying in shape and stress management, Health Advocate can help locate providers and arrange appointments for these services.

When it Matters Most!

For additional information

Please contact Health Advocate toll-free at:

Administration & Sales

1-866-385-8033

Members Only

1-866-695-8622

Fax

1-610-941-4200

Email

answers@HealthAdvocate.com

www.HealthAdvocate.com



Health Advocate does not replace health insurance coverage, provide medical care or recommend treatment.

Your Benefits Reference Guide

PBA and S.O.A



FAIRVIEW
INSURANCE AGENCY
ASSOCIATES, INC.

25 Fairview Ave.
Verona, New Jersey 07044

Phone: 973.857.0870 • Toll Free: 800.372.2558 • Fax: 973.857.9131

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You can also view your benefit information **online**:

Web address: www.mybenefitscount.com

Username:

Password:

Whether you have an issue with a claim or a question, Fairview Associates is happy to assist you. Our knowledgeable member service representatives are available during normal business hours and can be reached via telephone, fax, or e-mail. Your dedicated member service representative is:

JACKIE BENITEZ—Extension 130

Phone: 800.372.2558

Fax: 973.857.9131

E-mail: jbenitez@fairviewinsurance.com

Please be sure to include the following information:

- ✓ Name, ID number, and telephone number
- ✓ Group Name and Number
- ✓ Question / Explanation of issue
- ✓ Date of service, name of provider, and amount of claim (if applicable)
- ✓ Copy of claim or EOB (if applicable)

Section 1

CIGNA Account Number: 3332860

CIGNA plan: PPO

Policy Anniversary: January 1st

CIGNA contact number: 1-800-244-6224

Claims address:
P.O. BOX 5200
Scranton, PA 18505-5200

Website: www.cigna.com

SUMMARY OF BENEFITS

Your CIGNA HealthCare PPO plan



- **Features that Add Value**
 - The CIGNA HealthCare 24-Hour Health Information LineSM connects you to registered nurses and a library of hundreds of recorded programs on important health topics 24 hours a day, seven days a week, from anywhere in the U.S.
 - **CIGNA Healthy Rewards®** includes special offers on many health and wellness programs and services often not covered by many traditional benefits plans. Just call 1.800.870.3470 or visit our web site at www.cigna.com.

Quality Service Is Part of Quality Care

- Service is at the heart of everything we do. Our goal is to give you: fast, accurate answers; responsive, courteous and professional assistance; and ease and convenience in finding the information you need to manage your health.
- www.cigna.com – Visit our interactive Web site to learn more about your plan and get health information, 24 hours a day. Once you enroll, register for myCIGNA.com, our convenient, secure web site that combines helpful easy-to-use tools with personalized benefits information to help you make the most of your plan.
- **We Speak Many LanguagesSM**. We offer Language Line Services so that you can talk with us in 150 different languages. Just call Customer Service and ask for an interpreter to assist you.

It's Your Health

- If you choose CIGNA HealthCare, you can take advantage of health and wellness programs:
 - Preventive care services for your children through age 25 and any additional preventive care benefits described in the Benefits Highlights.
 - **CIGNA Well Informed** provides members with customized medical and wellness information to help them make healthier choices, better understand a diagnosis or treatment, and manage their health. The program includes personalized letters and other educational information to help you improve your health. Only you, your doctor and CIGNA have access to this information.

- CIGNA Well Aware for Better Health[®] can help you manage certain chronic conditions.
- The CIGNA HealthCare Healthy Babies[®] program provides you with information to help you have a healthy pregnancy and a healthy baby.
- **CIGNA Healthy Pregnancies, Healthy BabiesSM** is designed to help prevent complications during pregnancy and improve the chances for healthy pregnancies and deliveries. The program aims to identify expectant mothers with risk factors, and help them lower their risk of complications with patient education, wellness programs and targeted support from nurse case managers
- The **CIGNA Comprehensive Oncology ProgramSM** promotes cancer prevention and early detection through personalized care management, educational tools, benefit counseling, and other resources.

You Can Depend on CIGNA HealthCare

- Quality comes first. We select "preferred providers" carefully. And we make sure you have a wide range of doctors to choose from.
- Emergency and urgent care are covered wherever you go, worldwide, 24 hours a day. Urgent care centers can take care of your urgent care needs, and your cost is lower.

It's Your Choice

- When you visit network providers, you get access to quality care at the lowest out-of-pocket costs. Your plan also offers the freedom to choose the providers you prefer — even if they aren't part of the network. Your benefits are the highest when you see "preferred providers," but you're still covered for visits to other providers. Participating providers charge a discounted rate for CIGNA members. If you use a non-network provider, the provider may bill you for the difference between the billed charge and the allowed amount under your benefit plan, in addition to applicable (higher than in-network) deductibles and coinsurance amounts

**Township of
For Employees of
Active & Free Retirees**

Benefit Exclusions - for a list of benefit exclusions please contact CIGNA or your Fairview representative.

These Are Only the Highlights

As you can see, the plan is designed to combine in-depth coverage with cost-effective prices. This summary contains highlights only and is subject to change. The specific terms of coverage, exclusions and limitations including legislated benefits are contained in the Summary Plan Description or Insurance Certificate. This plan is insured and/or administered by Connecticut General Life Insurance Company, a CIGNA Company.

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Catalog Number: BSM42372
(03)
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BENEFIT HIGHLIGHTS		IN-NETWORK	OUT-OF-NETWORK
Mental Health			
Inpatient - Unlimited days maximum per calendar year	No charge, no plan deductible	No charge, no plan deductible	No charge, no plan deductible
Outpatient Mental Health (includes Individual, Group Therapy and Intensive Outpatient Services) - Unlimited visits maximum per calendar year	20% of charges* per office visit; No charge, no plan deductible if only x-ray and/or lab services performed and billed.	20% of charges** per office visit; No charge, no plan deductible if only x-ray and/or lab services performed and billed.	20% of charges** per office visit; No charge, no plan deductible if only x-ray and/or lab services performed and billed.
Physician's Office	No charge, no plan deductible	No charge, no plan deductible	No charge, no plan deductible
Outpatient Facility			
Substance Abuse	No charge, no plan deductible	No charge, no plan deductible	No charge, no plan deductible
Inpatient - Unlimited days maximum per calendar year	No charge, no plan deductible	No charge, no plan deductible	No charge, no plan deductible
Outpatient Substance Abuse (includes Individual and Intensive Outpatient Services) - Unlimited visits maximum per calendar year	20% of charges* per office visit; No charge, no plan deductible if only x-ray and/or lab services performed and billed.	20% of charges* per office visit; No charge, no plan deductible if only x-ray and/or lab services performed and billed.	20% of charges** per office visit; No charge, no plan deductible if only x-ray and/or lab services performed and billed.
Physician's Office	No charge, no plan deductible	No charge, no plan deductible	No charge, no plan deductible
Outpatient Facility			
Durable Medical Equipment	Unlimited maximum per calendar year	20% of charges**	No charge, no plan deductible
External Prosthetic Appliances	Unlimited maximum per calendar year	No charge, no plan deductible	20% of charges**
Prescription Drugs	Carved out	Carved out	Carved out
OTHER BENEFIT INFORMATION			
Annual Deductible			
Individual	\$100		\$100
Family	\$200		\$200
Annual Out-of-Pocket Maximum			
Individual	Including Deductible	Including Deductible	Including Deductible
Family	\$400	\$400	\$400
Coinsurance	\$800	\$800	\$800
Pre-certification - Inpatient - PHS (required for all inpatient admissions)	CIGNA HealthCare pays 80% or 100% of eligible charges. You pay 20% or 0% of charges after the plan deductible. Coordinated by your physician	CIGNA HealthCare pays 80% or 100% of eligible charges. You pay 20% or 0% of charges after the plan deductible. Participant must obtain approval for inpatient admission; subject to penalty/reduction or denial for non-compliance	CIGNA HealthCare pays 80% or 100% of eligible charges. You pay 20% or 0% of charges after the plan deductible. Participant must obtain approval for inpatient admission; subject to penalty/reduction or denial for non-compliance
Lifetime Maximum	Unlimited	Unlimited	Unlimited
Pre-existing Condition Limitation	No	No	No

*Services are subject to calendar year deductible
**Out-of-network services are subject to calendar year deductible and maximum reimbursable charge limitations. Providers may bill the member the difference between their billed charge and the maximum reimbursable charge as determined by the benefit plan.
In-network and out-of-network services apply to the same treatment or dollar maximum.

Footnotes:

Regarding In-Network and Out-of-Network Services:
• Once the out-of-pocket maximum is reached, the plan pays 100% of eligible charges for the remainder of the plan year, including Mental Health and Substance Abuse services

Regarding In-Network Services:

• All services must be provided by one of the preferred providers on our list in order to be covered.

Regarding Out-of-Network Services:

• Your out-of-pocket costs will be higher than with a preferred provider.
• All out-of-network hospital admissions must be pre-certified and are subject to Continued Stay Review (CSR). A penalty applies to admissions which are not pre-certified. Non-approved admissions/days result in denial of benefits. The pre-certification penalty or cost of denied benefits does not apply to deductible or out-of-pocket maximum.

Case Management

Coordinated by CIGNA HealthCare. This is a service designed to provide assistance to a patient who is at risk of developing medical complexities or for whom a health incident has precipitated a need for rehabilitation or additional health care support. The program strives to attain a balance between quality and cost effective care while maximizing the patient's quality of life.

Section 1

CIGNA Account Number: 3332860

CIGNA plan: OAP

Policy Anniversary: January 1st

CIGNA contact number: 1-800-244-6224

Claims address: P.O. BOX 5200

Scranton, PA 18505-5200

Website: www.cigna.com

SUMMARY OF BENEFITS

Your CIGNA HealthCare Open Access Plus plan

Features that Add Value

- Your plan offers the convenience of referral-free access to doctors, and the option to select a personal Primary Care Physician (PCP), as your source for routine care and guidance when you need specialized care. As your needs change, so may your choice of doctors. That's why you can change your PCP for any reason.
- The CIGNA HealthCare 24-Hour Health Information LineSM connects you to trained nurses and a library of hundreds of recorded programs on important health topics 24 hours a day, seven days a week, from anywhere in the U.S.
- CIGNA Health RewardsSM includes special offers on programs and services designed to enhance your health and wellness. Just call 1.800.870.3470 or visit our web site at www.cigna.com.
- CIGNA Behavioral Advantage emphasizes the mind-body connection. The program provides support from medical and mental health case managers, as well as a number of tools and resources, to help you take control of your health and wellness.

Quality Service Is Part of Quality Care

- Service is at the heart of everything we do. Our goal is to give you: fast, accurate answers; responsive, courteous and professional assistance; and ease and convenience in finding the information you need to manage your health.
www.cigna.com – Visit our interactive Web site to learn more about your plan and get health information, 24 hours a day. Once you enroll, register for myCIGNA.com, our convenient, secure website that combines helpful easy-to-use tools with personalized benefits information to help you make the most of your plan.
- We Speak Many LanguagesSM. We offer Language Line Services so that you can talk with us in 150 different languages. Just call Customer Service, and ask for an interpreter to assist you.



It's Your Health

When you choose CIGNA HealthCare, you can take advantage of our health and wellness programs

- We encourage you to use a PCP as a valuable resource and personal health advocate.
- Preventive care services for your children through age 2 and any additional preventive care benefits described in the Benefit Highlights.
- CIGNA Well Informed provides members with customized medical and wellness information to help them make healthier choices, better understand a diagnosis or treatment, and manage their health. The program includes personalized letters and other educational information to help you improve your health. Only you, your doctor and CIGNA have access to this information.
- CIGNA Well-Aware for Better HealthSM can help you manage certain chronic conditions.
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- When you visit network providers, you get access to quality care at the lowest out-of-pocket costs available under your plan. Your plan also offers the freedom to choose the providers you prefer—even if they aren't part of the network. Your benefits are the highest when you see "participating providers", but you're still covered for visits to other providers. Participating providers charge a discounted rate for CIGNA members. If you use a non-network provider, the provider may bill you for the difference between the billed charge and the allowed amount under your benefit plan, in addition to applicable (higher than in-network) deductibles and coinsurance amounts.

For Employees of Township of
(Rx Carved Out) OUS-NU

BENEFIT HIGHLIGHTS	IN-NETWORK	OUT-OF-NETWORK
Calendar Year Plan Deductible Individual Family Maximum Calendar Year Out-of-Pocket Maximum Individual / Family Maximum Coinsurance	None None Includes all copayments, coinsurance and plan deductibles \$400/\$800 CIGNA HealthCare pays 100% of eligible charges. You pay 0% of charges. Coordinated by your physician Coordinated by your physician	\$100 \$250 Includes all deductibles and coinsurance \$2,000/\$5,000 CIGNA HealthCare pays 70% of eligible charges. You pay 30% of charges after plan deductible. Participant must obtain approval for inpatient admission; subject to penalty/reduction or denial for non-compliance Participant must obtain approval for selected outpatient procedures and diagnostic testing; subject to penalty/reduction or denial for non-compliance \$5,000,000# No
Pre-certification - Inpatient - PHS+ (required for all inpatient admissions)	Coordinated by your physician	Participant must obtain approval for inpatient admission; subject to penalty/reduction or denial for non-compliance
Pre-certification - Outpatient - PHS+ (required for selected outpatient procedures and diagnostic testing or outpatient services)	Coordinated by your physician	Participant must obtain approval for selected outpatient procedures and diagnostic testing; subject to penalty/reduction or denial for non-compliance
Lifetime Maximum	Unlimited	\$5,000,000#
Pre-existing Condition Limitation	No	No
Physician Services Primary Care Physician (PCP) Office Visit Specialty Physician Office Visit Consultant and Referral Physician Services	\$5 copayment per office visit; No copay if only x-ray and/or lab services are performed and billed. \$5 copayment per office visit; No copay if only x-ray and/or lab services are performed and billed. No charge \$5 copayment per office visit	30% of charges** 30% of charges** 30% of charges** 30% of charges**
Allergy Treatments/Injections - PCP or Specialty Physician	No charge, no plan deductible	No charge, no plan deductible
Allergy Serum (dispensed by physician in office) Second Opinion Consultations (provided on voluntary basis) Surgery Performed in the Physician's Office - PCP or Specialty Physician	No charge No charge, no plan deductible \$5 copayment per office visit	No charge No charge, no plan deductible 30% of charges**
Preventive Care Routine Preventive Care for Children through age 2 (including routine immunizations) Immunizations	\$5 copayment per office visit; No copay if only x-ray and/or lab services are performed and billed. No charge, no plan deductible \$5 copayment per office visit; No copay if only x-ray and/or lab services are performed and billed. Unlimited maximum per calendar year#	30% of charges, no plan deductible 30% of charges, no plan deductible 30% of charges, no plan deductible Under age 40: Unlimited maximum per calendar year# Age 40 and above: Unlimited maximum per calendar year#
Routine Preventive Care for Children and Adults from age 3 (including routine immunizations)	No charge, no plan deductible	30% of charges, no plan deductible
Immunizations	No charge, no plan deductible	30% of charges, no plan deductible
Preventive Mammograms, PSA, Pap Test	No charge, no plan deductible, if billed by independent diagnostic facility or outpatient hospital No charge, no plan deductible	30% of charges, no plan deductible 30% of charges, no plan deductible
Diagnostic Mammograms, PSA, Pap Test (Note: Diagnostic Related Services are subject to the plan's laboratory & radiology benefit; based on place of service)	\$5 copayment for associated wellness exam	\$5 copayment for associated wellness exam

BENEFIT HIGHLIGHTS	IN-NETWORK	OUT-OF-NETWORK
Inpatient Hospital Services including: Semi-Private Room and Board Diagnostic/Therapeutic Lab and X-ray Drugs and Medication Operating and Recovery Room Radiation Therapy and Chemotherapy Anesthesia and Inhalation Therapy	No charge	\$200 deductible per admission, plus 30% of charges* Pre-certification required
Inpatient Hospital Doctor's Visits/Consultations Inpatient Hospital Professional Services Outpatient Facility Services	No charge No charge No charge	30% of charges** 30% of charges** 30% of charges**
Treatment Room including: Diagnostic/Therapeutic Lab and X-rays Anesthesia and Inhalation Therapy Physician and Outpatient Professional Services	No charge	30% of charges**
Laboratory and Radiology Services (includes preadmission testing) Advanced Radiological Imaging (MRI, CAT Scans, PET Scans, etc.) Other Laboratory and Radiology Services Physician's Office Emergency Room/Urgent Care Facility (billed by facility as part of the Emergency Room/Urgent Care visit) Independent X-Ray and/or Lab Facility Independent X-Ray and/or Lab Facility (in conjunction with an Emergency Room visit)	No charge No charge No charge No charge No charge No charge	30% of charges** 30% of charges** 30% of charges** No charge, except if not a true emergency, then 30% of charges** 30% of charges** No charge
Short-Term Rehabilitative Therapy - (includes cardiac rehab, physical, speech, occupational, pulmonary rehab & cognitive therapy) Unlimited days maximum per calendar year# for all therapies combined	\$5 copayment per office visit; No copay if only x-ray and/or lab services are performed and billed.	30% of charges**
Chiropractic Services Days maximum per calendar year#	\$5 copayment per office visit; No copay if only x-ray and/or lab services are performed and billed.	30% of charges**
Outpatient Cardiac Rehabilitation 30 days maximum per calendar year#	\$5 copayment per office visit; No copay if only x-ray and/or lab services are performed and billed.	30% of charges**
Emergency and Urgent Care Services Physician's Office - PCP or Specialty Physician	\$5 copayment per office visit; No copay if only x-ray and/or lab services are performed and billed.	Care will be provided at in-network levels if it meets the "prudent layperson" definition of an emergency. Otherwise 30% of charges**
Hospital Emergency Room Outpatient Professional Services (Radiology, Pathology and Emergency Room Physician) Urgent Care Facility or Outpatient Facility Ambulance	\$25 copayment per visit (copay waived if admitted) No charge \$25 copayment per visit (copay waived if admitted) No charge	

BENEFIT HIGHLIGHTS	IN-NETWORK	OUT-OF-NETWORK
TMA – Surgical and Non-surgical, case-by-case basis. Always excludes appliances and orthodontic treatment. Subject to medical necessity. Physician's Office	\$5 copayment per office visit; No copy if only x-ray and/or lab services are performed and billed. No charge	30% of charges**
Inpatient Facility	No charge	30% of charges* Precertification required
Outpatient Facility Services	No charge	30% of charges**
Physician's Services – Inpatient or Outpatient	No charge	30% of charges**
Mental Health	No charge	30% of charges**
Inpatient – Unlimited maximum per calendar year	No charge	\$200 deductible per admission, plus 30% of charges* Pre-certification required
Outpatient Mental Health (includes Individual, Group Therapy and Intensive Outpatient services) – Unlimited maximum per calendar year	No charge	30% of charges**
Physician's Office	\$5 copayment per office visit	30% of charges**
Outpatient Facility services	No charge	30% of charges**
Substance Abuse	No charge	\$200 deductible per admission, plus 30% of charges* Pre-certification required
Inpatient – Unlimited maximum per calendar year	No charge	30% of charges**
Outpatient Substance Abuse (includes Individual and Intensive Outpatient services) – Unlimited maximum per calendar year	No charge	30% of charges**
Physician's Office	\$5 copayment per office visit	30% of charges**
Outpatient Facility services	No charge	30% of charges**
Durable Medical Equipment	No charge	30% of charges**
External Prosthetic Appliances	No charge	30% of charges**
Acupuncture	\$5 copayment per office visit	30% of charges**
Phys	No charge	30% of charges**
\$500 maximum per calendar year	No charge	30% of charges**

BENEFIT HIGHLIGHTS	IN-NETWORK	OUT-OF-NETWORK
Maternity Care Services Initial Office Visit to Confirm Pregnancy	\$5 copayment per office visit; No copay if only x-ray and/or lab services are performed and billed. No charge	30% of charges**
All subsequent Prenatal Visits, Postnatal Visits and Physician's Delivery Charges (total maternity fee) Office Visits not included in the total maternity fee performed by OB or Specialty Physician	\$5 copayment per office visit; No copay if only x-ray and/or lab services are performed and billed. No charge	30% of charges**
Delivery – Facility (Inpatient Hospital/Birthing Center Charges)	No charge	\$200 deductible per admission, plus 30% of charges* Pre-certification required
Inpatient Services at Other Health Care Facilities Skilled Nursing, Rehabilitation and Sub-Acute Facilities 180 days maximum per calendar year# combined for all facilities listed	No charge	30% of charges**
Home Health Services – Includes outpatient private duty nursing when approved as medically necessary. Unlimited days maximum per calendar year#, 16 hour maximum per day#	No charge	30% of charges**
Family Planning Services Office Visits (lab & radiology tests, counseling)	\$5 copayment per office visit; No copay if only x-ray and/or lab services are performed and billed. No charge	30% of charges, no plan deductible
Vasectomy/Tubal Ligation (excludes reversals) Inpatient Facility	No charge	\$200 deductible per admission, plus 30% of charges* Pre-certification required
Outpatient Facility Services Physician's Services – Inpatient or Outpatient Physician's Office	No charge No charge \$5 copayment per office visit; No copay if only x-ray and/or lab services are performed and billed.	30% of charges** 30% of charges** 30% of charges**
Inferility Services Office Visit (lab & radiology tests, counseling) – FCP or Specialty Physician	\$5 copayment per office visit; No copay if only x-ray and/or lab services are performed and billed.	30% of charges**
Treatment/Surgery (includes artificial insemination, in-vitro fertilization, GIFT, ZIFT, etc.) Inpatient Facility	No charge	\$200 deductible per admission, plus 30% of charges* Pre-certification required
Outpatient Facility Services Physician's Services – Inpatient or Outpatient Lifetime Maximum: Unlimited#	No charge No charge	30% of charges** 30% of charges**

Footnotes

- Services are subject to calendar-year deductible.
 - Out-of-network services are subject to the calendar-year deductible and maximum reimbursable charge limitations. Providers may bill the member the difference between their billed charge and the maximum reimbursable charge as determined by the benefit plan.
 - # In-network and out-of-network services apply to the same treatment or dollar maximum.
- Regarding In-Network and Out-of-Network Services:**
- Once the out-of-pocket maximum is reached, the plan pays 100% of eligible charges for the remainder of the plan year, including Mental Health and Substance Abuse services.
 - All inpatient hospital admissions and certain outpatient surgical and diagnostic procedures require Preadmission Certification and Continued Stay Review. Failure to obtain Preadmission Certification and/or Continued Stay Review may result in non-compliance penalties and/or reduction of benefits. Call the toll-free number on your CIGNA HealthCare ID Card.
- Regarding In-Network Services:**
- All services must be provided by one of the participating providers on our list in order to be covered.
 - All copayments, coinsurance and plan deductibles apply to the out-of-pocket maximum. These copayments, plan deductibles and coinsurance are no longer required once the out-of-pocket maximum is reached.
- Regarding Out-of-Network Services:**
- Your out-of-pocket costs will be higher than with a participating provider.
 - The Out-of-Network Inpatient and Outpatient Facility deductibles, coinsurance and plan deductibles apply to the Out-of-Network out-of-pocket maximum.

Case Management

Coordinated by CIGNA HealthCare. This is a service designed to provide assistance to a patient who is at risk of developing medical complexities or for whom a health incident has precipitated a need for rehabilitation or additional health care support. The program strives to attain a balance between quality and cost effective care while maximizing the patient's quality of life.

Benefit Exclusions

These are examples of the exclusions in your plan. The complete list of exclusions is provided in your Certificate or Summary Plan Description. To the extent there may be differences, the terms of the Certificate or Summary Plan Description control.

1. Any service or supply not described as covered in the Covered Expenses section of the plan.
2. Any medical service or device that is not medically necessary.
3. Treatment of an illness or injury which is due to war or care for military service disabilities treatable through governmental services.
4. Any services and supplies for or in connection with experimental, investigational or unproven services.
5. Dental treatment of the teeth, gums or structures directly supporting the teeth, however, charges made for services or supplies provided for or in connection with an accidental injury to sound natural teeth are covered provided a continuous course of dental treatment is started within 6 months of the accident.
6. Unless otherwise covered as a basic benefit, reports, evaluations, physical examinations, or hospitalization not required for health reasons, including but not limited to employment, insurance or government licenses, and court ordered, forensic, or custodial evaluations.
7. Court ordered treatment or hospitalizations.
8. Infertility donor services and charges, except as required by state law.
9. Any services, supplies, medications or drugs for the treatment of male or female sexual dysfunction.
10. Medical and hospital care and costs for the child of a Dependent, unless this infant child is otherwise eligible under the plan.
11. Therapy or treatment intended primarily to improve or maintain general physical condition or for the purpose of enhancing job, school, athletic or recreational performance.
12. Consumable medical supplies other than ostomy supplies and urinary catheters.
13. Private hospital rooms and/or private duty nursing except as provided under the Home Health Services provision.
14. Artificial aids, including but not limited to hearing aids, semi-implantable hearing devices, audiant bone conductors, bone anchored hearing aids, corrective orthopedic shoes, arch supports, elastic stockings, garter belts, corsets, dentures and wigs.
15. Eyeglass lenses and frames and contact lenses (except for the first pair of contact lenses for treatment of keratoconus or postcataract surgery).
16. Routine refraction, eye exercises and surgical treatment for the correction of a refractive error, including radial keratotomy.
17. All non-injectable prescription drugs, injectable prescription drugs that do not require physician supervision and are typically considered self-administered drugs, non-prescription drugs, and investigational and experimental drugs, except as provided in the plan.

Benefit Exclusions (continued)

18. Routine foot care, however, services associated with foot care for diabetes and peripheral vascular disease are covered when medically necessary.
19. Genetic screening or pre-implantation genetic screening.
20. Fees associated with the collection or donation of blood or blood products.
21. Cost of biologicals that are immunizations or medications for the purpose of travel, or to protect against occupational hazards and risks.
22. All nutritional supplements and formulae are excluded, except infant formula needed for the treatment of inborn errors of metabolism.
23. Services for or in connection with an injury or illness arising out of, or in the course of, any employment for wage or profit.
24. Expenses incurred for medical treatment by a person age 65 or older, who is covered under the plan as a retiree, or his dependent, when payment is denied by the Medicare plan because treatment was not received from a participating provider of the Medicare plan.
25. Expenses incurred for medical treatment when payment is denied by the primary plan because treatment was not received from a participating provider of the primary plan.
26. The following services are excluded from coverage regardless of clinical indications: Massage Therapy; Macromastia or Gynecomastia Surgeries; Abdominoplasty/Femulotomy; Blepharoplasty; Orthognathic Surgeries; Acupuncture; Craniosacral/Cranial therapy; Surgical ancillary services; Movement Therapy; Applied Kinesiology; Rolting; Prolotherapy; Transsexual Surgery; Non-medical counseling or Beauty Aids; Aids or devices that assist with non-verbal communications; Cosmetic; Personal or Comfort Items; Dietary Supplements; Health and E-mail & Internet Consultations; Telemedicine; Health Club Membership fees; Weight Loss Program fees; Smoking Cessation Program fees; Reversal of male and female voluntary sterilization procedures; and Extracorporeal Shock Wave Lithotripsy for musculoskeletal and orthopedic conditions.

These Are Only the Highlights

As you can see, the plan is designed to combine in-depth coverage with cost-effective prices. This summary contains highlights only and is subject to change. The specific terms of coverage, exclusions and limitations including legislated benefits are contained in the Summary Plan Description or Insurance Certificate. This plan is insured and/or administered by Connecticut General Life Insurance Company, a CIGNA Company.

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Section 2

Benecard Group Number: 1000-1499

Policy Anniversary: May 1st

Benecard member services: 1-888-907-0070

Mailing address: P.O. Box 2187
Clifton, NJ 07015

Mail Order: 1-877-723-6005

Mail Order address: Benecard
P.O. Box 779
Mechanicsburg, PA 17055

Website: www.benecardpdf.com

Client ID#: 1234 Group #: 1000 - 1499
(White Collar/Active Police/Blue Collar Supervisors
Police retired after 7-1-2007)

<u>Your Co-Payment Schedule</u>	
Retail	<ul style="list-style-type: none">• \$0 for a Generic Equivalent Medication• \$10 for a Brand Name Medication
Mail order:	<ul style="list-style-type: none">• \$0 for a Generic Equivalent Medication• \$10 for a Brand Name Medication

Benecard Member Services
1-877-723-6005
TDD: 1-888-907-0020
24 hours a day, 7 days a week



www.benecardpdf.com

Retail Program

Your ID card provides all the information your pharmacist will need to process your prescription through Benecard PBF.

Your retail co-payment amount will be:

- \$0 for a Generic Equivalent Medication
- \$10 for a Brand Name Medication

You will only pay the actual cost of your prescription if it is less than your co-payment amount. Retail quantities will be dispensed according to the prescription order written by your physician up to a maximum of a 34-day supply or up to 100 units of a medication, whichever is greater.

Discounts For Non-Covered Medications

Be sure to present your Benecard PBF ID card at a participating network pharmacy to receive a discount off the retail price of medications that may not be covered under the guidelines of your prescription benefit program.

Pharmacy Network

Your Benecard PBF prescription benefit program provides you with access to an extensive national pharmacy network. To locate a participating pharmacy, visit www.benecardpbf.com or call Benecard Member Services toll-free at 1-877-723-6005 (TDD: 1-888-907-0020).

Direct Reimbursement

If you must pay out-of-pocket for the full price of your medication that should have been covered under the program, manually submit a Direct Member Reimbursement Form, available from your Benefits Manager or online at www.benecardpbf.com. You will need to provide an itemized receipt showing: the amount charged, prescription number, name of medication dispensed, manufacturer, dosage form, strength, quantity, and date dispensed. Your pharmacist can assist you if you do not have a detailed receipt. Direct reimbursement is based upon the coverage outlined herein and is reimbursable at the same rate that would have been reimbursed to the pharmacy, less any applicable co-payment amount. This amount may be significantly lower than the retail price you paid; therefore, it is advised that you use a participating network pharmacy to reduce your out-of-pocket costs.

Mail Service Pharmacy

You may wish to consider the convenience and savings offered by Benecard PBF's mail service pharmacy, Benecard Central Fill, if you take maintenance type medications on a long-term basis. Information on how to take advantage of this service is included and available from your Benefits Manager or online at www.benecardpbf.com. Up to a 90-day supply may be obtained on a non-emergency basis through mail order. The medication can be shipped directly to your home.

Your mail order co-payment amount, required at the time you place your order, will be:

- \$0 for a Generic Equivalent Medication
- \$10 for a Brand Name Medication

Specialty Medications

Specialty pharmaceuticals are typically produced through biotechnology, administered by injection, and/or require special handling and monitoring. If your doctor has prescribed a specialty medication, submit your prescription to Benecard Central Fill or your local retail pharmacy. Specialty medications are subject to your program's retail co-payment and at a limited day supply.

Save With Generics

Generic equivalent medications must meet the same Food and Drug Administration (FDA) standards for purity, strength, and safety as brand name medications. They also must have the same active ingredients and identical absorption rate within the body as the brand name version. If you wish to take advantage of this savings opportunity, you should ask your physician to prescribe your medication either generically or as a brand with substitutions permissible. You may also consult with your pharmacist regarding generic medication options that may be available to you.

Eligibility

Your Benefits Manager determines who is eligible for benefits under Township of Parsippany-Troy Hills prescription benefit program. Eligible dependents may include your spouse and unmarried children who are dependent upon you. Coverage for a dependent will end:

- when your coverage ends,
- on the last day of the benefit month in which the dependent fails to meet the definition of a dependent,
- on the last day of the calendar year they turn 19, or
- when an unmarried child who is a full-time student reaches the last day of the calendar year they turn 23, unless dependent qualifies as an overage dependent.

You should notify your Benefits Manager regarding any eligibility change such as adding or removing a dependent, address or name changes, or other family status change.

ID Cards

If your ID card is lost or you need a duplicate card, promptly notify your Benefits Manager to have a new ID card issued. If there is an emergency, and you need a prescription filled, call Benecard PBF Member Service toll-free at 1-877-723-6005 (TDD: 1-888-907-0020) and they will provide your pharmacist with the required information to facilitate processing the claim.

Member Resources at www.benecardpbf.com

Maximize your benefit with our online member service tools including the network pharmacy finder, mail service, your plan coverage details, comparison pricing tool, as well as view recent personal medication utilization history, including what you have paid and what the plan has paid on your behalf.

Coverage

Your prescription program covers most Medically Necessary, Federal Legend, State Restricted, and Compounded Medications which by law may not be dispensed without a prescription. Your pharmacist has online access to see which medications are covered under the benefit guidelines of your program. Alternatively, you can contact Member Services with questions about coverage details. Prescription medication programs do not cover any over-the-counter medications, medical supplies, or devices even if purchased at a pharmacy, and even if a prescription order is written. Prior authorization may be required before dispensing certain medications. Your program covers certain diabetic supplies, including insulin. Dispensing of male sexual dysfunction medications are limited to four pills, six injections or suppositories per month based on prior approval and appropriate medical diagnosis of non-psychological impotence.

Exclusions

A summary of the exclusions are as follows:

- Medications which do not require a prescription order, even if one is written.
- Medications which are not considered medically necessary for the care and treatment of an injury or sickness.
- Medications which are considered "off-label use" as they are not prescribed in accordance with FDA-approved utilization or are prescribed or dispensed in a manner contrary to normal medical practices.
- Medications administered by a physician or prescriber and those not dispensed at a pharmacy, including medications you receive at your doctor's office, in a hospital, clinic or other care facility.
- Medications for which the cost is recoverable under a government program, Workers' Compensation, occupational disease law, or medications for which no charge is made to you.
- Immunologicals, vaccines, allergy sera, biological sera, blood plasma and charges for the administration or injection of medications.
- Any medication labeled for "Investigational Use" or as experimental.

Therapeutic Categories of medications excluded from your program include:

- Medications prescribed for cosmetic purposes
- Hair loss medications
- Growth hormones
- Needles, syringes and injection devices, except with insulin
- Male sexual dysfunction medications are covered with restrictions
- Immune altering (HIV) medications

This brochure is only a general description of your prescription benefit program and it is not a contract. All benefits described herein are subject to the terms, conditions, and limitations of the group master contract and applicable law. All personal health information is kept strictly confidential, as required by the privacy rules of the Health Insurance Portability and Accountability Act.

11/1/2009

Section 3



**Group # 3250-01,06
Delta Dental PPOSM
plus Premier**

Delta Group Number: 3520

Plans: PPO Plus Premier
PPO Only

Policy Anniversary: January 1st

Delta contact number: 1-800-452-9310

Claims address: P.O. Box 222
Parsippany, NJ. 07054

Website: www.deltadentalnj.com

Preventive & Diagnostic
* Exams, Cleanings & Bitewing X-rays (each twice in a calendar year)
* Fluoride Treatment (children to age 19)

100%

Remaining Basic
* Fillings, Extractions
* Endodontics (root canal)
* Periodontics, Oral Surgery
* Sealants

50%

Crowns & Prosthodontics
* Crowns, Gold Restorations
* Bridgework
* Full & Partial Dentures

50%

Calendar Year Maximum (per patient)

\$1,500

Calendar Year Deductible (waived on Preventive & Diagnostic)

\$25
\$75

* Per Person

* Family Aggregate Deductible

Orthodontic Benefits (Adult & Child)

50%
\$2,500

* Lifetime Maximum (per patient)

Over 200,000 participating dental offices nationwide participate with the national Delta Dental system, although you may choose any fully licensed dentist to render necessary services. Participating dentists will be paid directly by Delta Dental to the extent that services are covered by the contract. Non-participating dentists will bill the patient directly, and Delta Dental will make payment directly to the member. **Maximum benefit may be derived by utilizing the services of a participating dentist.**

Where the eligible patient is treated by a Delta Dental PPOSM dentist, the fee for the covered service(s) will not exceed the Delta Dental PPO maximum allowable charge(s). Where the eligible patient is treated by a Delta Dental Premier[®] dentist who does not participate in Delta Dental PPO or by a *Participating Specialist*, the dentist has agreed not to charge eligible patients more than the dentist's filed fee or Delta Dental's established maximum plan allowance, and Delta Dental will pay such dentists based on the least of the actual fee, the filed fee, or Delta Dental's established maximum plan allowance for the procedure(s). Claims for services provided by dentists who are neither Delta Dental Premier, Delta Dental PPO dentists, or *Participating Specialists* are paid based on the lesser of the dentist's actual charge or the prevailing fee.

Visit your own dentist. If you do not have a dentist, there is a directory available with your plan administrator listing participating dentists. You may call 1-800-DELTA-OK and a list of participating dentists located in your area will be mailed directly to your home, or you may access our Website at www.deltadentalnj.com.

During your FIRST appointment, tell your dentist that you are covered under this program. Give him/her your Group's name, its Delta Dental Group Number and your Social Security number. Your dependents, if covered, should give YOUR SOCIAL SECURITY NUMBER.

If you have any questions regarding your benefits, you may contact our Customer Service Department Monday through Thursday, 8:00 a.m. to 6:30 p.m. EST and Friday, 8:00 a.m. to 5:00 p.m. EST, at 1-800-452-9310.

This overview contains a general description of your dental care program for your use as a convenient reference. Complete details of your program appear in the group contract between your plan sponsor and Delta Dental of New Jersey, Inc. which permits the benefits and operation of your program. The group contract would control if there should be any inconsistency or difference between its provisions and the information in this overview.



**Group # 3520-6001, 6006
Delta Dental PPOSM**

Preventive & Diagnostic	100%
* Exams, Cleanings & Bitewing X-rays (each twice in a calendar year)	
* Fluoride Treatment (children to age 19)	
Remaining Basic	50%
* Fillings, Extractions	
* Endodontics (root canal)	
* Periodontics, Oral Surgery	
* Sealants	
Crowns & Prosthodontics	50%
* Crowns, Gold Restorations	
* Bridgework	
* Full & Partial Dentures	
Calendar Year Maximum (per patient)	\$1,750
Calendar Year Deductible (waived on Preventive & Diagnostic)	
* Per Person	\$25
* Family Aggregate Deductible	\$75
Orthodontic Benefits (Adult & Child)	50%
* Lifetime Maximum (per patient)	\$2,500

This program is based upon a network of Delta Dental PPO dental offices, although you may choose any fully licensed dentist to render necessary services. Participating dentists will be paid directly by Delta Dental to the extent that services are covered by the contract. Non-participating dentists will bill the patient directly, and Delta Dental will make payment directly to the subscriber. Patients who select a non-Delta Dental PPO dentist have benefits paid on a Delta Dental PPO schedule of allowances and are responsible for any part of the dentist's fee which exceeds the allowance except that a Delta Dental participating dentist can only charge up to his/her filed fee or Delta Dental's maximum plan allowance, whichever is less. **Maximum benefit may be derived by utilizing the services of a participating Delta Dental PPO dentist.**

Visit a Delta Dental PPO dentist. If you do not have a Delta Dental PPO dentist, there is a directory available with your plan administrator listing Delta Dental PPO dentists. You may call 1-800-DELTA-OK and a list of participating dentists located in your area will be mailed directly to your home or you may access our Website at www.deltadentalnj.com.

During your FIRST appointment, tell your dentist that you are covered under this program. Give him/her your Group's name, its Delta Dental Group Number and your Social Security number. Your dependents, if covered, should give YOUR SOCIAL SECURITY NUMBER.

If you have any questions regarding your benefits, you may contact our Customer Service Department Monday through Thursday, 8:00 a.m. to 6:30 p.m. EST and Friday, 8:00 a.m. to 5:00 p.m. EST, at 1-800-452-9310.

This overview contains a general description of your dental care program for your use as a convenient reference. Complete details of your program appear in the group contract between your plan sponsor and Delta Dental of New Jersey, Inc. which governs the benefits and operation of your program. The group contract would control if there should be any inconsistency or difference between its provisions and the information in this overview.

Section 4

Vision Plan

VSP Group Number:

12185024

Policy Anniversary:

January 1st

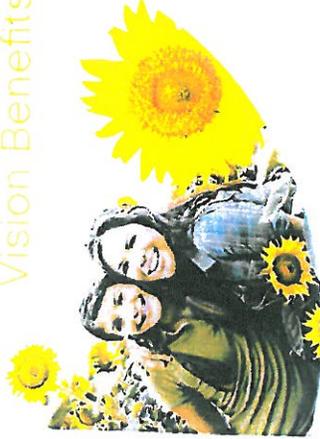
VSP contact number:

800-877-7195

Website:

www.vsp.com

Your VSP Vision Benefits



Welcome to VSP® Vision Care. We'll help keep you and your eyes healthy through personalized care from a doctor you can trust.

Your eyes say a lot about you and can even tell your VSP doctor about you. During your WellVision® Exam, your VSP doctor will look for vision problems and signs of health conditions too.

Getting started is a breeze.

- Find the right VSP doctor for you. You'll find plenty to choose from at vsp.com or by calling 800.877.7195.
- Already have a VSP doctor? Make an appointment and tell them you're a VSP member.
- Check out your coverage and savings. Visit vsp.com to see your benefits anytime and check out how much you saved with VSP after your appointment.

That's it! We'll handle the rest—no ID card necessary or claim forms to complete.



Keep your eyes healthy
and your vision clear.

Make your appointment today!

Contact VSP | vsp.com | 800.877.7195



Township of
Employees and VSP
provide you an affordable eyecare plan.

Your Coverage from a VSP Doctor

WellVision Exam® focuses on your eye health and overall wellness..... **every plan year**¹

Prescription Glasses Discounts & Allowances

Lenses Discount **every plan year**¹

- 20% discount when a complete pair of glasses is purchased plus a total allowance (for lens and frame) of \$200.00

Frame Discount **every plan year**¹

- 20% discount when a complete pair of glasses is purchased plus a total allowance of \$200.00 (for lenses and frame)

-OR-

Contact Lens Care **every plan year**¹

\$200.00 allowance applies to eye exam, contacts and contact lens exam (fitting and evaluation). The contact lens exam ensures proper fit of contacts.

Remaining balance may be used for additional services at a later date within the same eligibility period

Extra Discounts and Savings

Glasses and Sunglasses

- 20% off lens options like progressives and scratch-resistant and anti-reflective coatings
- 20% off additional glasses and sunglasses, including lens options

Contacts

- 15% off cost of contact lens exam (fitting and evaluation)

Laser Vision Correction

- Average 15% off the regular price or 5% off the promotional price from contracted facilities
- Available from any VSP doctor within 12 months of your last eye exam

You get the best value from your benefit when you see a VSP doctor. If you see a non-VSP provider, you'll typically pay more out-of-pocket. You'll pay the provider in full and have 6 months to submit a claim to VSP for partial reimbursement less copays. Before seeing a non-VSP provider, call us at 800.877.7195.

Out-of-Network Reimbursement Amounts:

\$200.00 allowance for exam, lenses, lens options frames and contacts.

Remaining balance may be used for additional services at a later date within the same eligibility period

VSP guarantees service from VSP doctors only. In the event of a conflict between this information and your organization's contract with VSP, the terms of the contract will prevail.

¹ Plan year begins in January.

How do members collect reimbursement after visiting a non-VSP provider?

When services and/or materials are obtained from a non-VSP provider, members should use the following procedure to receive the allowed reimbursement:

1. Pay the non-VSP provider the full amount of the bill and request an itemized copy of the bill. The bill should separately detail the charges for the eye exam and materials, including lens type.
2. Include the following information with the bill:
 - o The name, address and phone number of the non-VSP provider
 - o The covered member's ID number
 - o The covered member's name, address, and phone number
 - o The name of the group
 - o The patient's name, date of birth, address, and phone number
 - o The patient's relationship to the covered member (such as self, spouse, child, student, etc).

Members can write the information on the bill or use the printable form available when members sign on to view benefits information at vsp.com.

3. Send a copy of the itemized bill(s) with the above information to VSP at:

VSP P.O. Box 997105 Sacramento, CA 95899-7105

Please note that claims for reimbursement must be filed within six months of the date of service. Members will be reimbursed according to the out-of-network reimbursement schedule.

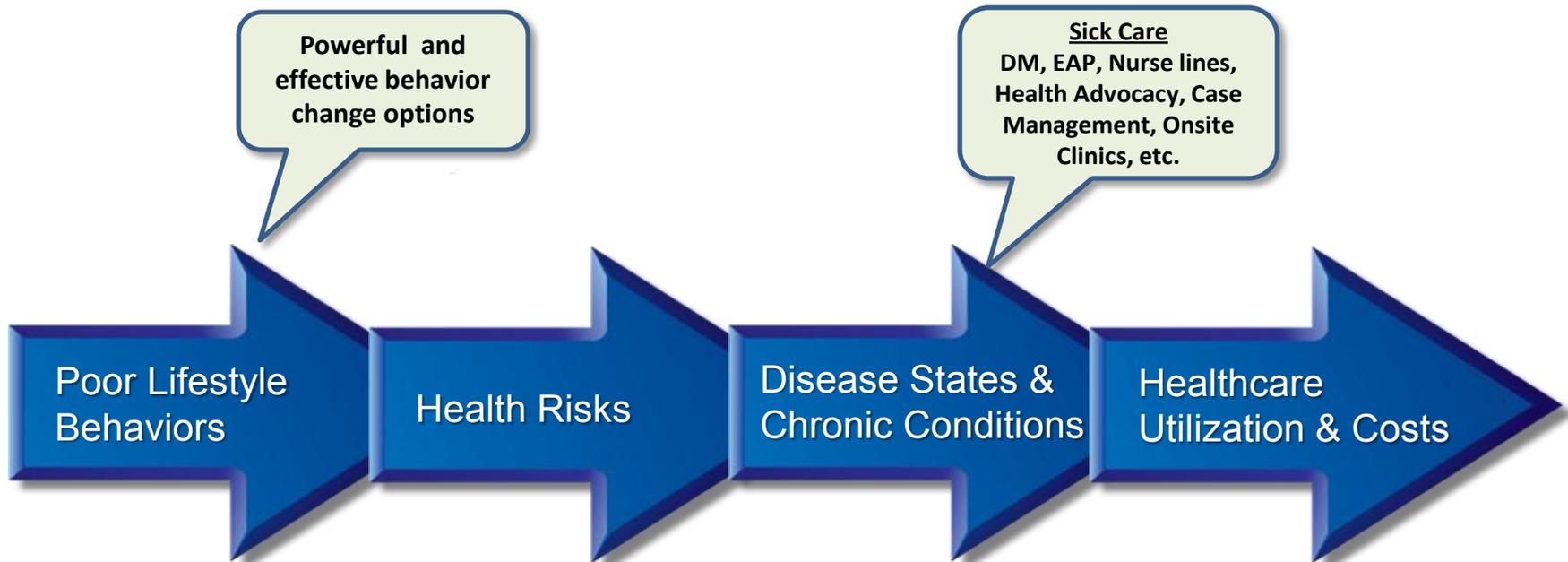


**Wellness
Coaches USA**

Improving health in the workplace...face to face

We're on an Unsustainable Path...

There are TWO places where a company can focus efforts to contain costs....
However at **ONLY ONE** can you truly begin to solve the problem. **We must stop the flow....**

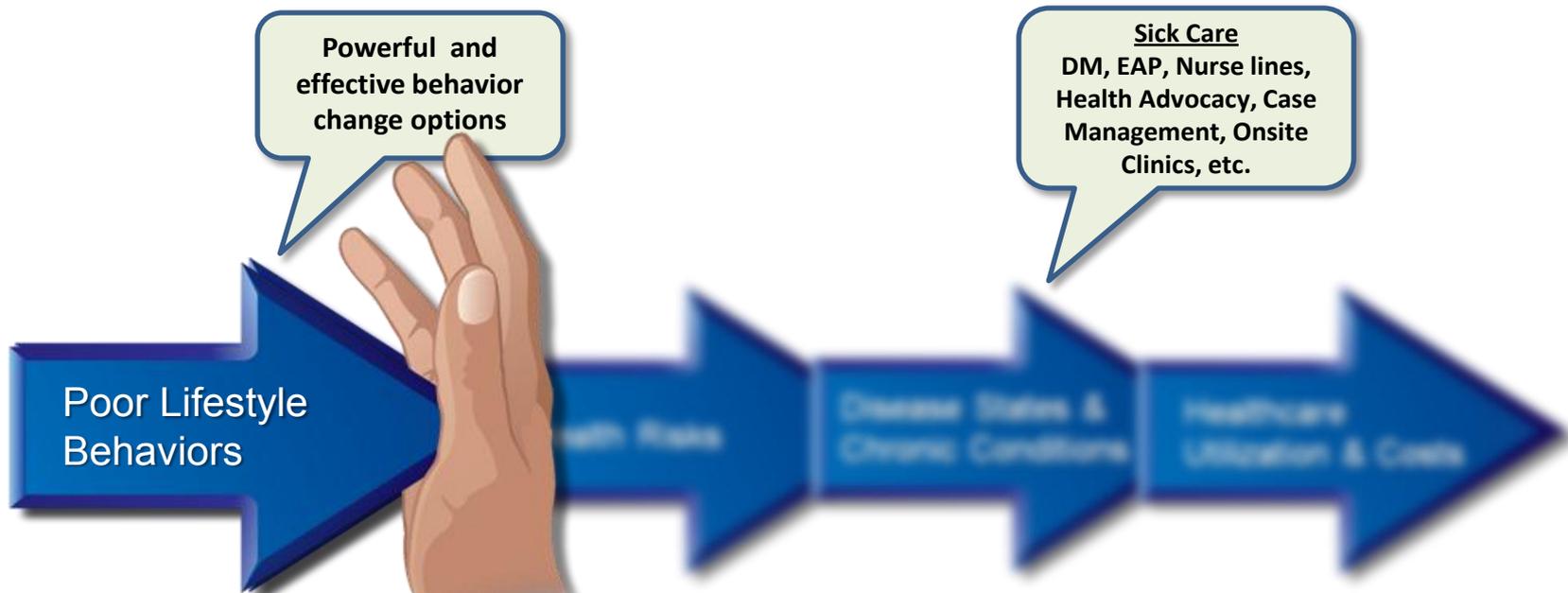


The research has proven that the cost of waiting for people to get sick far exceeds the cost of helping healthy people stay healthy.



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The research has proven that the cost of waiting for people to get sick far exceeds the cost of helping healthy people stay healthy.



Choosing the Right Behavior Change Option

Does the behavior change option meet the following 5 criteria:

- **“Total Population Engagement”** – Does it move virtually the entire workforce (90-100%) toward improving risky, or maintaining healthy, lifestyle behaviors?
- **State-of-the-Art Coaching** – Does it include a well-developed and state-of-the-art coaching option, delivered by highly trained health/wellness coaches, and is it based upon scientifically validated behavior change theory and practice?
- **Large Scale Health Risk Reductions** – Does it have a proven ability to produce large scale health risk reductions for the entire population?
- **Produce an ROI** – Has it shown an ability to produce an attractive ROI?
- **Cost Effective** – Can it be delivered cost effectively?



WCUSA Meets all 5 Requirements

Our unique and powerful **coach embedded** onsite model is the only behavior change model available in the wellness marketplace that simultaneously delivers:

1. Total Population Engagement
2. A highly developed, professional onsite, face-to-face coaching process
3. Larger scale health risk improvements than ever before possible
4. Very impressive ROI
5. Lowest possible cost per employee coached

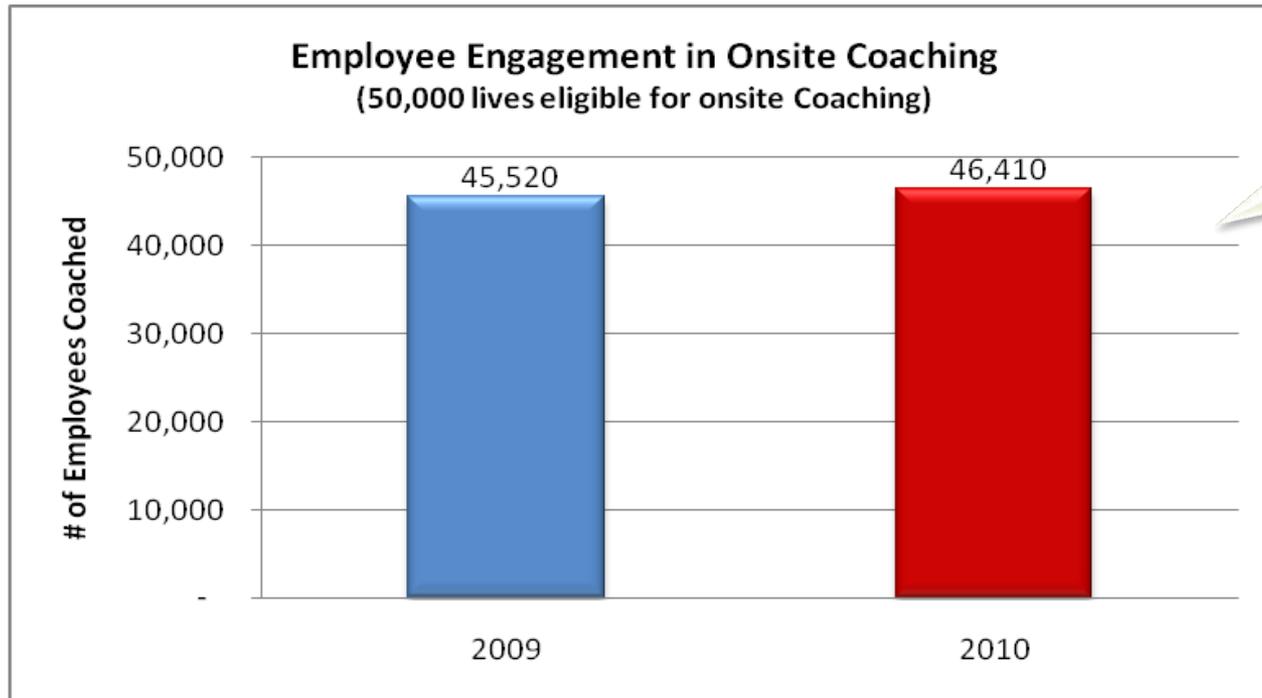


Improving health in the workplace . . .face to face



WCUSA Meets all 5 Requirements

1. "Total Population Engagement"



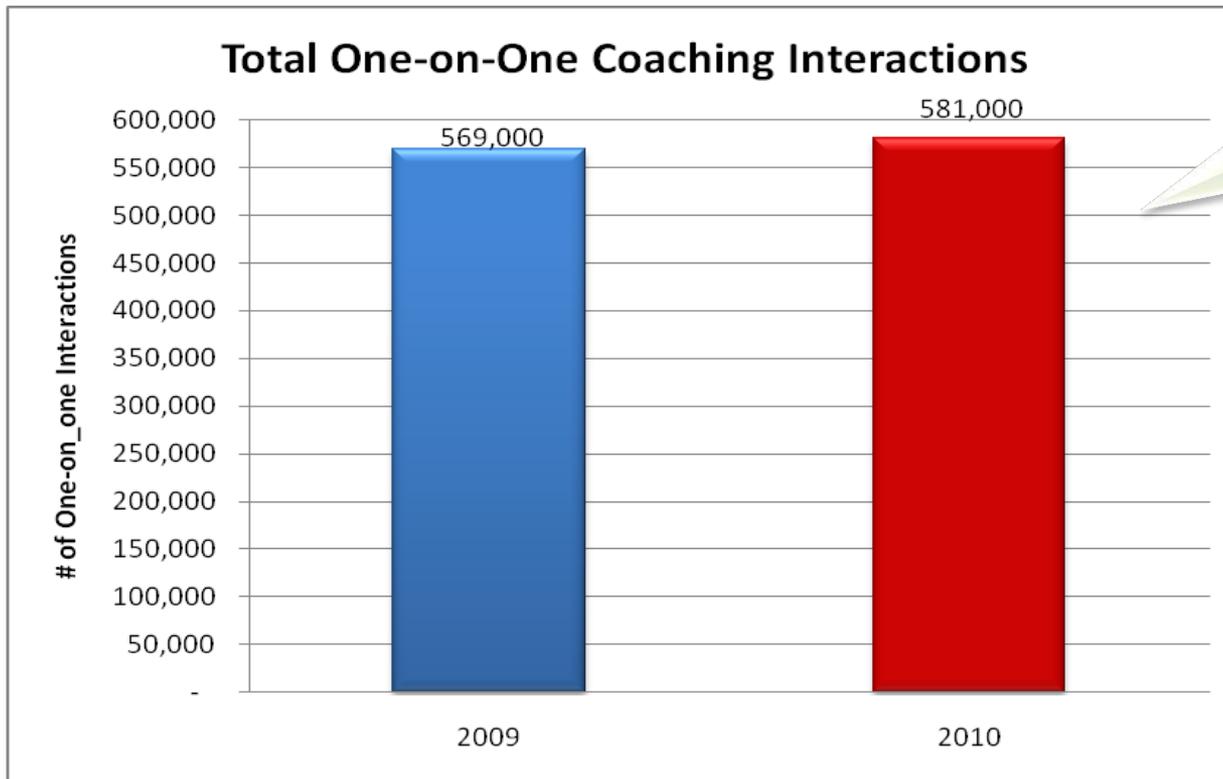
93% and 92% of all EE's eligible for onsite coaching were coached in 2010 & 2009, respectively.

Source: Data from WCUSA coaching software for all customers serviced in BOTH 2009 & 2010.



WCUSA Meets all 5 Requirements

1. "Total Population Engagement"



WCUSA averaged over 12 interactions per employee coached for both 2009 & 2010.

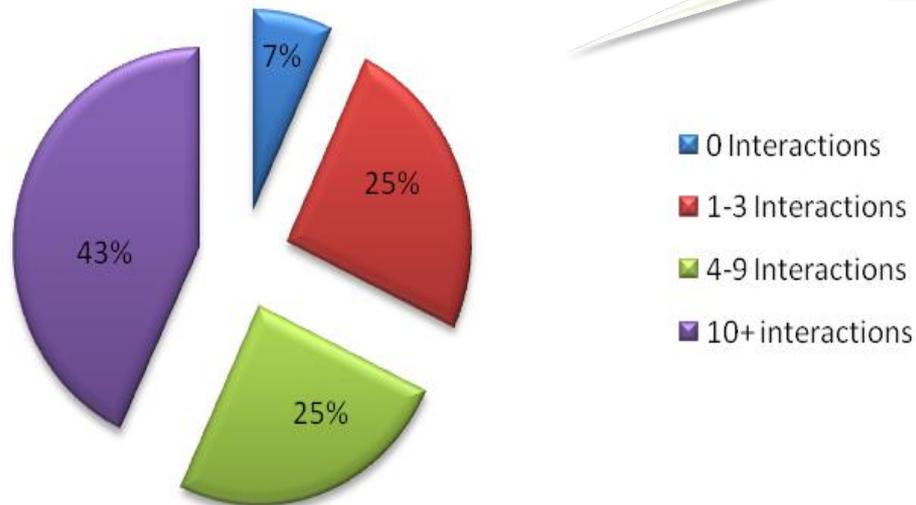
Source: Data from WCUSA coaching software for all customers serviced in BOTH 2009 & 2010.



WCUSA Meets all 5 Requirements

1. “Total Population Engagement”

Employee Engagement
(One-on-One Coaching Interactions per EE during 2010)



68% of all employees had 4 or more coaching interactions during 2010.

Source: Data from WCUSA coaching software for all customers serviced in BOTH 2009 & 2010.

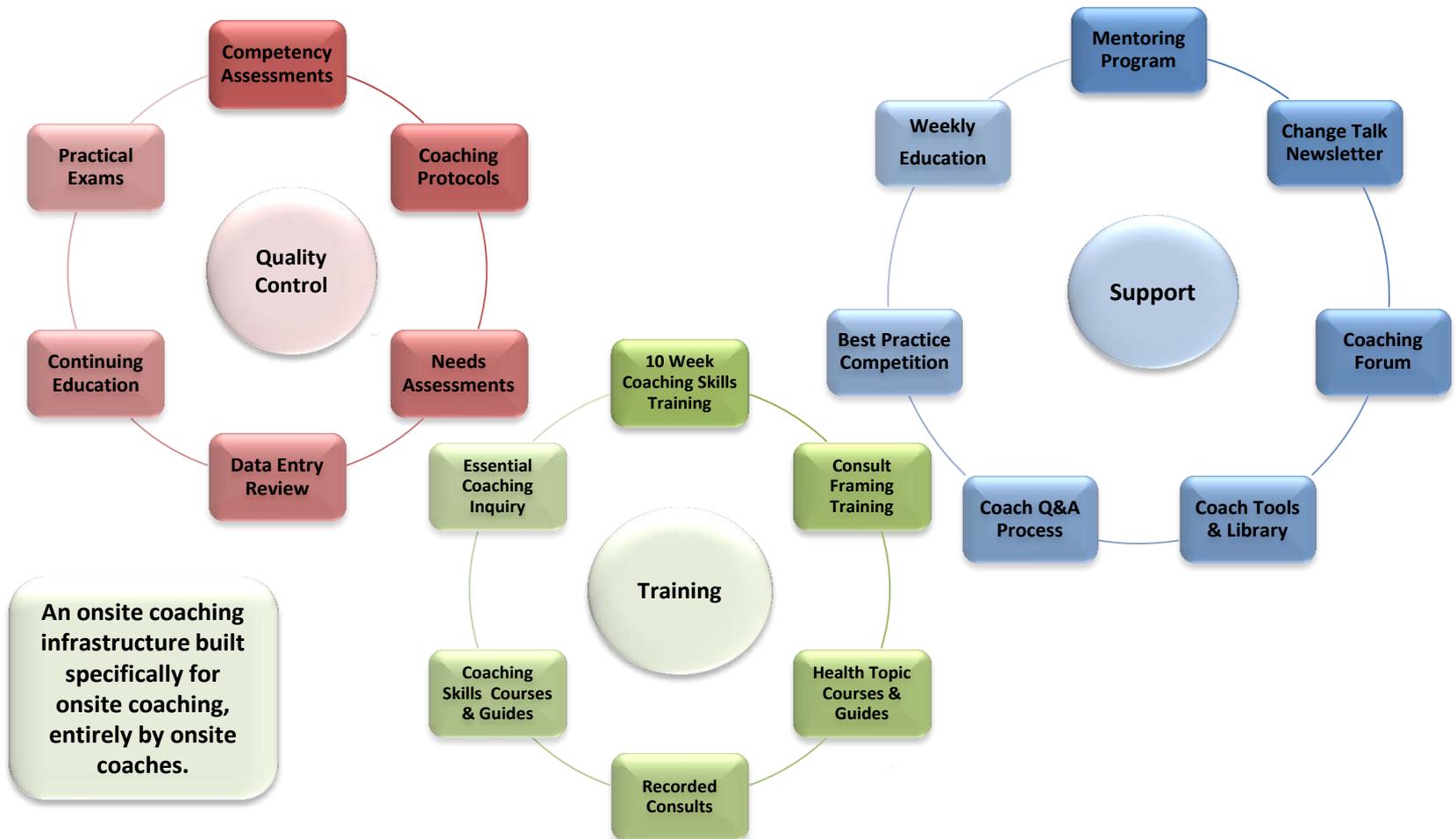


WCUSA Meets all 5 Requirements - 2. “State-of-the-Art Coaching”

- 🍏 Onsite coaching is now emerging as the most powerful approach to change behaviors.
- 🍏 WCUSA has been providing and refining our onsite coaching process for almost 10 years.
- 🍏 WCUSA provides the most high quality, highly developed, professional **onsite** wellness coaching process available in the industry.
- 🍏 We have developed an entire infrastructure to accommodate the onsite delivery of wellness coaching, including training, support and quality control features.

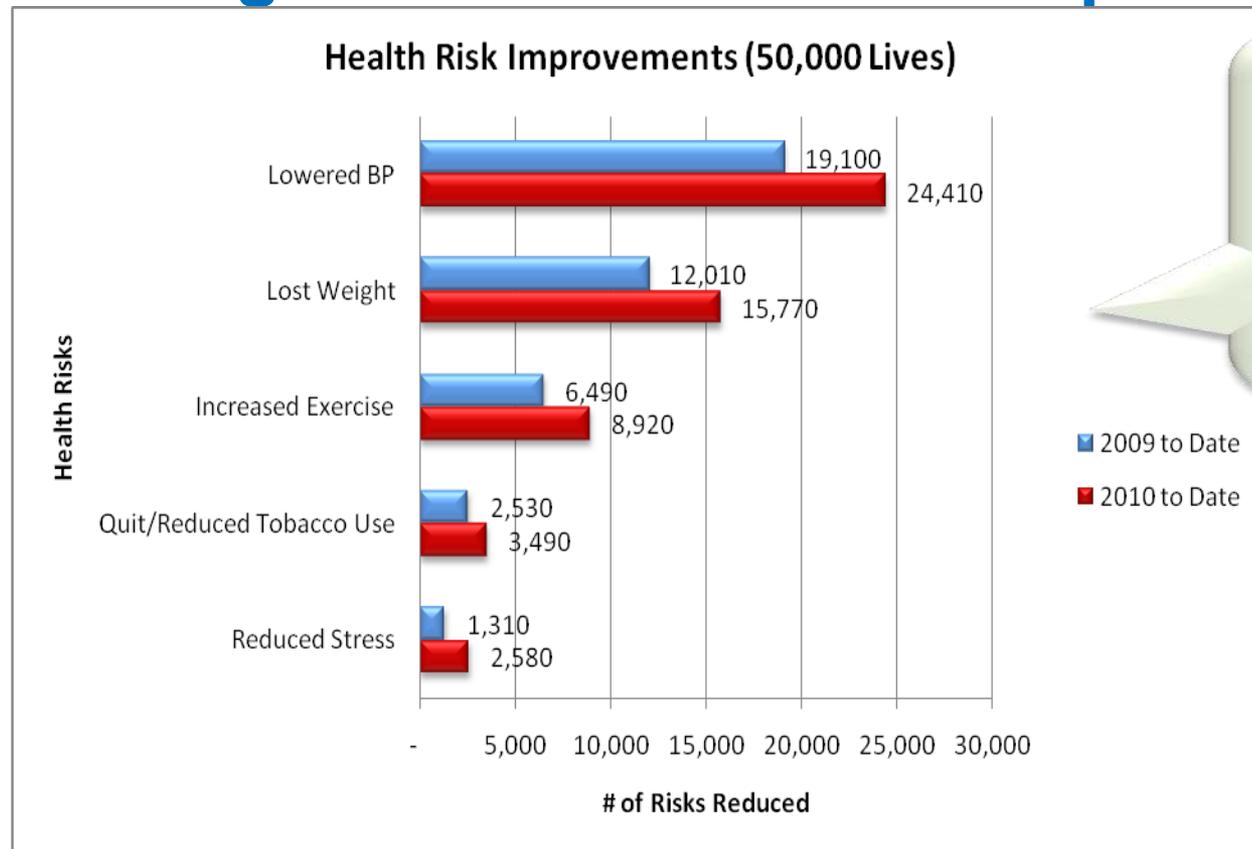


Here's what High Quality Coaching means to us....



WCUSA Meets all 5 Requirements

3. “Large Scale Health Risk Improvements”



Over 55,000 health risks have been improved as of the end of 2010 for the 46,000 EE's coached. An average of over 1 health risk improved per EE coached.

Source: Data from WCUSA coaching software for all customers serviced in BOTH 2009 & 2010.



WCUSA Meets all 5 Requirements -

4. “Impressive ROI”

- 🍎 **Example 1: Population Healthcare Costs**
 - ❑ City of Las Vegas World Congress Outcomes
- 🍎 **Example 2: Workers’ Compensation**
 - ❑ Large National Transportation Company
- 🍎 **Example 3: Health Risk Factor Valuation**
 - ❑ Thomson Healthcare Study

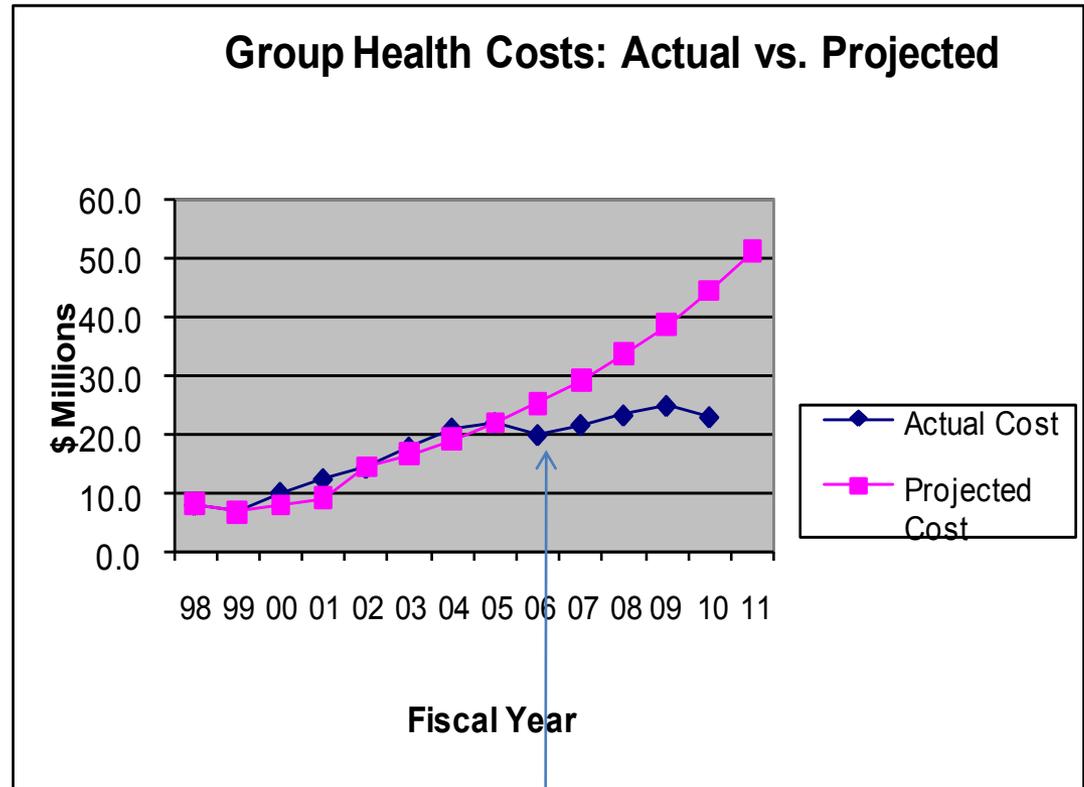


WCUSA Meets all 5 Requirements -

4. “Impressive ROI”

Example 1:

- City of Las Vegas @ World Congress
- Group Healthcare costs remain flat for past 5 years
- Current year total costs nearly \$20M less than previously projected in 2005.



WCUSA implemented services at City in 2006



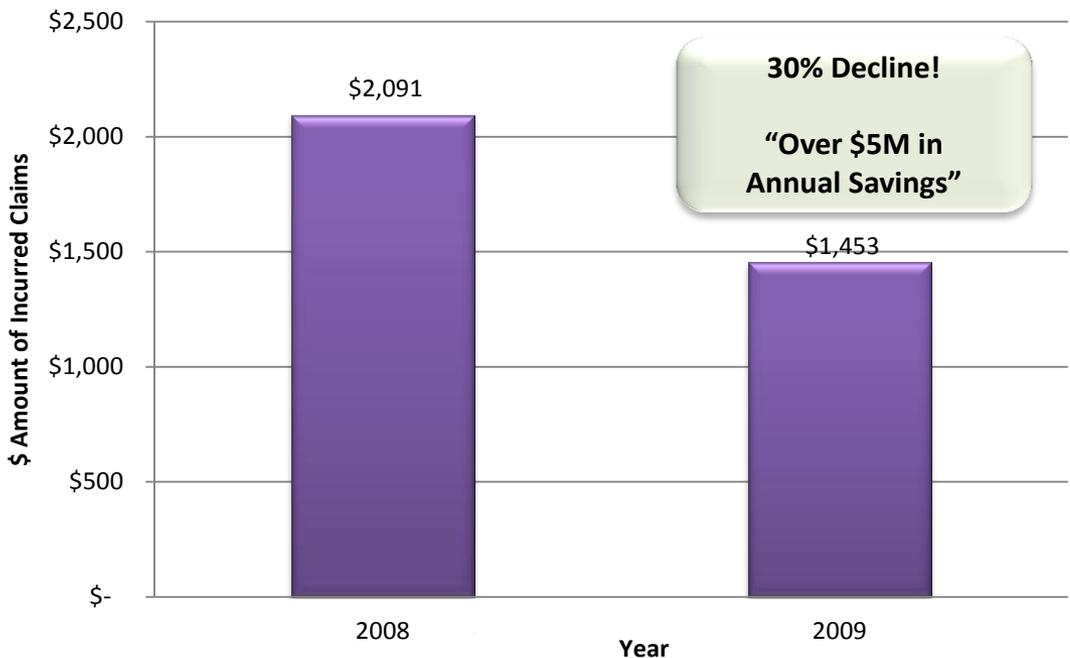
WCUSA Meets all 5 Requirements -

4. “Impressive ROI”

Example 2:

- 🍎 **Transportation Company with 8,500 lives in 20 states**
- 🍎 **Aggregate data is from all facilities in which our on-site coaching services had been in place for a 12 month period.**

Workers Comp Incurred Costs per Employee
(80 Locations - Total 8,500 lives)



WCUSA Meets all 5 Requirements

4. “Impressive ROI”

Example 3:

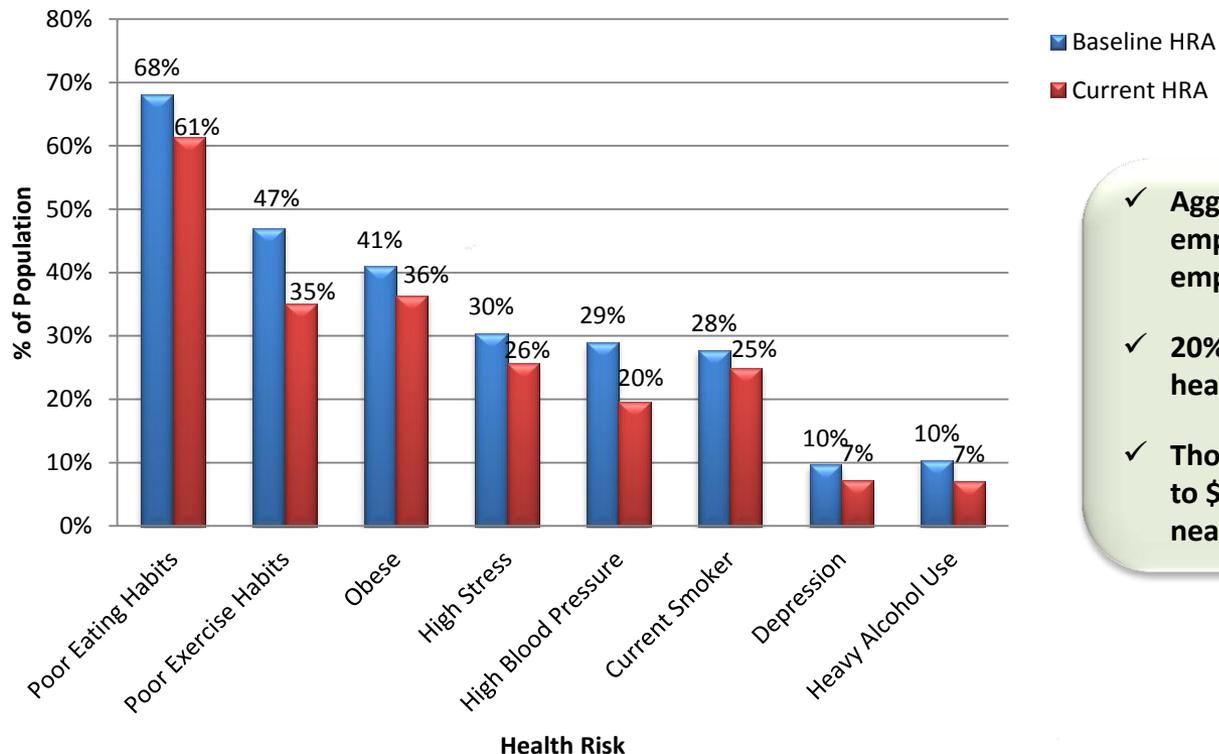
- Entered into licensing agreement with **Thomson Healthcare** to utilize their proprietary **Health & Productivity Management Return on Investment Tool**
- Purpose was to forecast expected returns associated with health risk reductions we have achieved for multiple employers.



WCUSA Meets all 5 Requirements

4. “Impressive ROI”

Changes in Population Health Risk Factor Prevalence Rate



- ✓ Aggregate HRA results from multi-employer group of 5,700 employees
- ✓ 20% average reduction across all health risks
- ✓ Thomson Study showed ROI of \$4 to \$1 or net annual savings of nearly \$700 per EE



WCUSA Meets all 5 Requirements

5. “Cost Effective Solution”

At 1st glance, onsite coaching may seem expensive when compared with traditional telephonic and online coaching.

But when you dig a little deeper, you may be shocked by what you’ll discover.

See below from actual proposal.

	Telephonic	Our Face-to-face
Eligible Lives	1,000	1,000
Annual Cost of Contract	\$9,750	\$105,000
% EE’s “Engaged”	4%	90%
# EE’s “Engaged”	40	900
Price/”Engaged” Employee*	\$245	\$115
Price to coach 90% of EE’s	\$220,500	\$105,000

Our onsite coaching is over 50% less expensive per person coached than telephonic.

* Industry average for annual cost per engaged employee in telephonic/web based coaching is \$225-\$325



Improving health in the workplace . . .face to face



WCUSA Meets all 5 Requirements

5. “Cost Effective Solution”

The Rub....telephonic & web coaching programs can't get anywhere near 90% engagement...even with expensive incentives (which will further create cost disparity)

PEPM Myth Buster

Many providers will try to mask true costs by proposing services on a PEPM basis. So, in this example, you may see someone propose \$.80 PEPM ($\$9,750/1,000/12$) vs. our PEPM cost of \$8.75.

Don't fall for this marketing rope a dope. No matter how they spin it, only 40 employees will be coached, and it will cost you twice as much to coach them.

	Telephonic	Our Face-to-face
Eligible Lives	1,000	1,000
Annual Cost of Contract	\$9,750	\$105,000
% EE's "Engaged"	4%	90%
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Average incentive nationwide was approx. \$175 in 2009. If the average incentive was used to drive engagement, it would nearly double the cost per engaged employee.

* Industry average for annual cost per engaged employee in telephonic/web based coaching is \$225-\$325



WCUSA Meets all 5 Requirements

5. “Cost Effective Solution”: The Missing “E” in PEPM

PEPM must be analyzed as P”E”EPM....Per “Engaged” Employee Per Month

	Telephonic	Our Face-to-face
Eligible Lives	1,000	1,000
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On a P”E”EPM basis, telephonic coaching would be \$20.40 compared to \$9.58 for our onsite coaching.

- The bottom line.... when compared to all other coaching alternatives, the cost for each person coached is at least 50% less expensive with our onsite coaching model....
- The only questions you need to ask are, (1) how much can I afford to spend on coaching, and/or, (2) how many people do I want to have coached.



Recap of Our Value Proposition and Distinctiveness

Total Population Engagement

- >90% of total population

High Quality, Professional Onsite Coaching

- Largest & most experienced onsite coaching provider (10 years)

Large Scale Health Risk Improvements

- Over 1 risk improved per employee coached in 2010

Impressive ROI

- Healthcare costs, workers' comp, health risk improvements

Most Cost Effective Coaching Option

- 50% less expensive than other coaching alternatives



Overview of Our Process

Mission

Achieve **large-scale improvement** in our customers' employee **population health risks**.

Strategy

Apply our embedded onsite face-to-face coaching delivery methodology to **“get entire employee populations”** continuously **“on the move”** to sustained improvement in population health risks.

Issues Addressed

All of the most common lifestyle issues like **tobacco use**, exercise, **weight loss**, nutrition, **blood pressure and stress**, and related chronic health conditions



Improving health in the workplace . . .face to face



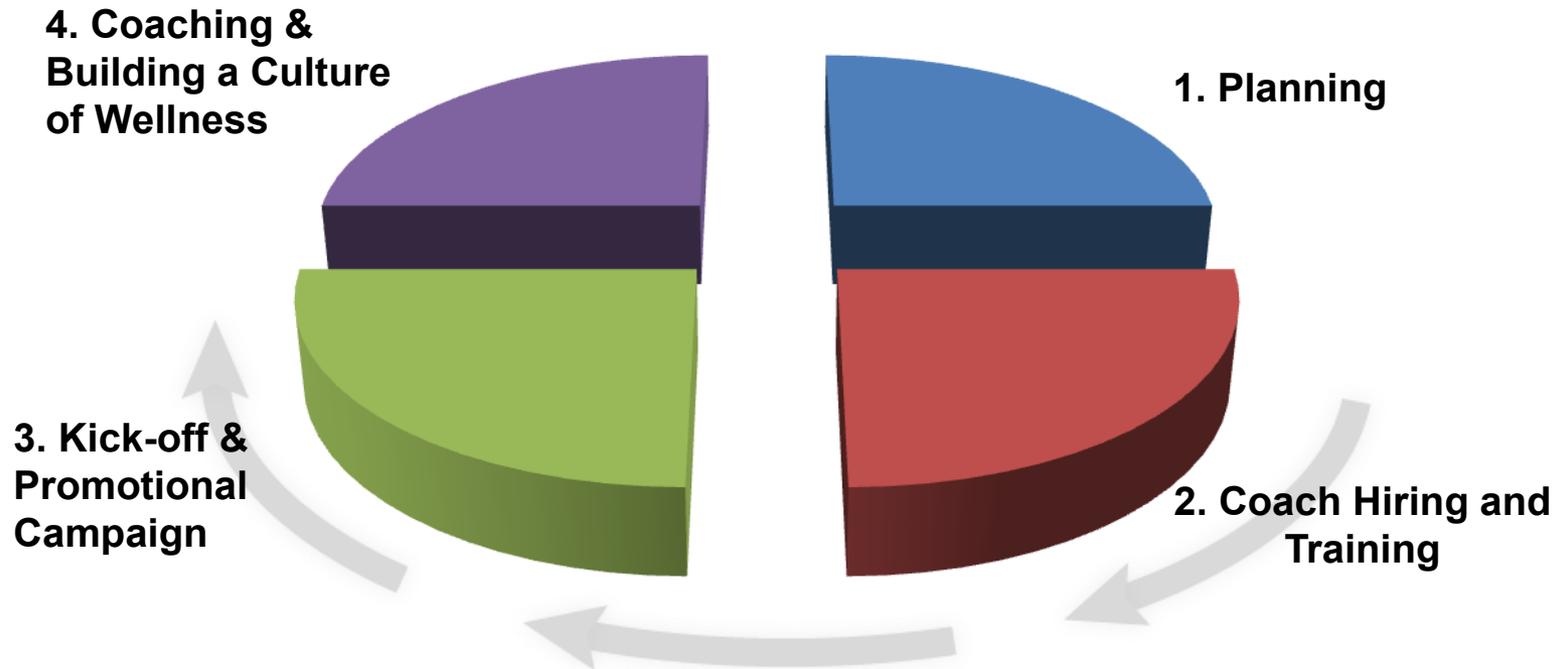
Overview of Our Process

Logistics

- 🍎 Wellness Coaches permanently assigned and deployed directly to our customers' facilities to **work with and among employees**
- 🍎 Always **highly visible** and **conveniently accessible**
- 🍎 Coaches interact regularly and frequently with them all – **all jobs, all departments, all health risk levels** – each coach conducting **30 to 40 interactions every day** – 6,000 to 8,000 per year
- 🍎 Coaches conduct their interactions during **regular, scheduled, systematic and rotating rounds** throughout the workplace.



Here's How Our Process Works!



Planning

- **Allocation of coach time** among facilities, departments, work groups and shifts
- Scheduling of **coach hours**
- Development of initial **customized health promotion programs**, i.e. walking program
- Development of **customized reporting package** and other data sharing needs
- Development and planning of **kick-off and promotional campaign**
- Development of **integration strategy**



Hiring & Training of Our Wellness Coaches

Hiring

- Typically, local residents
- Health care professionals
- “People” people

Training

- Classroom and workplace
- Coaching methodology and skill sets
- Existing programs and resources



Kickoff and Promotional Campaign

- **Developed during planning process**
- **Executed by Wellness Coaches and our Management Staff**
- **Includes some combination of seminars, small group gatherings, mailings, posters, emails, etc.**



Coaching & Building a Culture of Wellness

- Providing each employee with the coaching support needed to avoid the natural migration to, or improve, unhealthy and risky lifestyle behaviors
- Helping each employee, according to their own needs, achieve the health and wellness goals that are important to them in their own lives...
- Building employee trust and becoming part of their lives
- Developing employee interest in maintaining or improving their health
- Moving employees to a state of “readiness” or “commitment” to improve their health
- Converting employee commitment to “Action”
- Providing the support employees need to accomplish, and then sustain their health and wellness goals



Coaching & Building a Culture of Wellness

Coaching Components

- Educating through **personal distribution** and discussion of health and safety information
- **Building self-awareness** through blood pressure, BMI, weight, and heart rate testing
- Helping set **personal objectives** and strategies
- Building **confidence**, self responsibility and **self-efficacy**
- Building skills and **providing resources** to help accomplish objectives
- Helping overcome obstacles and **maintaining successes**
- Fostering **accountability**



Coaching & Building a Culture of Wellness

In addition to coaching, our Wellness Coaches work with our customers to promote, develop and/or implement company-wide wellness programs and activities, including:

- Structured **health promotion programs** (i.e. weight loss competitions, walking contests, etc.)
- Third party **health promotion offerings** (i.e. web sites, blood screenings, flu shots, health fairs, etc.)
- Administration of **HRA's** (either provided by us, the insurance carrier, or other independent vendor you select)
- Provision of **group educational sessions** (i.e. seminars, lunch and learns, etc.)
- Dissemination of **health information**
- Participation on **committees**



Sample of Coach led Activities at City of Las Vegas

- Health Fair
- Biggest Loser Program
- Tooty Fruity Tuesday
- Maintain Don't Gain
- Know Your Numbers (Bio-metrics)
- Thirsty Thursdays
- End of Summer Meltdown
- Cooking with a Celebrity Chef
- Race for the Cure
- Peer Fitness Training
- Fire Fighter Nutrition Classes
- Santa's 5k Run
- Mayor's Health Initiative Walk
- Corporate Fitness Challenge
- Stretch Programs
- Sun Safety Sunscreen Promotion
- Walks for Life Incentive Program
- Hygiene Awareness
- Flu Prevention
- Health Education for Shift workers
- CPR & First Aid Training
- Las Vegas Marathon
- ALA Freedom from Smoking Training
- Feel Great in 08' Event
- Holiday Wellness Challenge
- Croc-a-thon
- 21 Days to Make or Break a Habit
- National Night Out
- Executive Physical Sign-ups
- Summer Hydration Testing



Coaching for Remote Employees, Spouses and Retirees

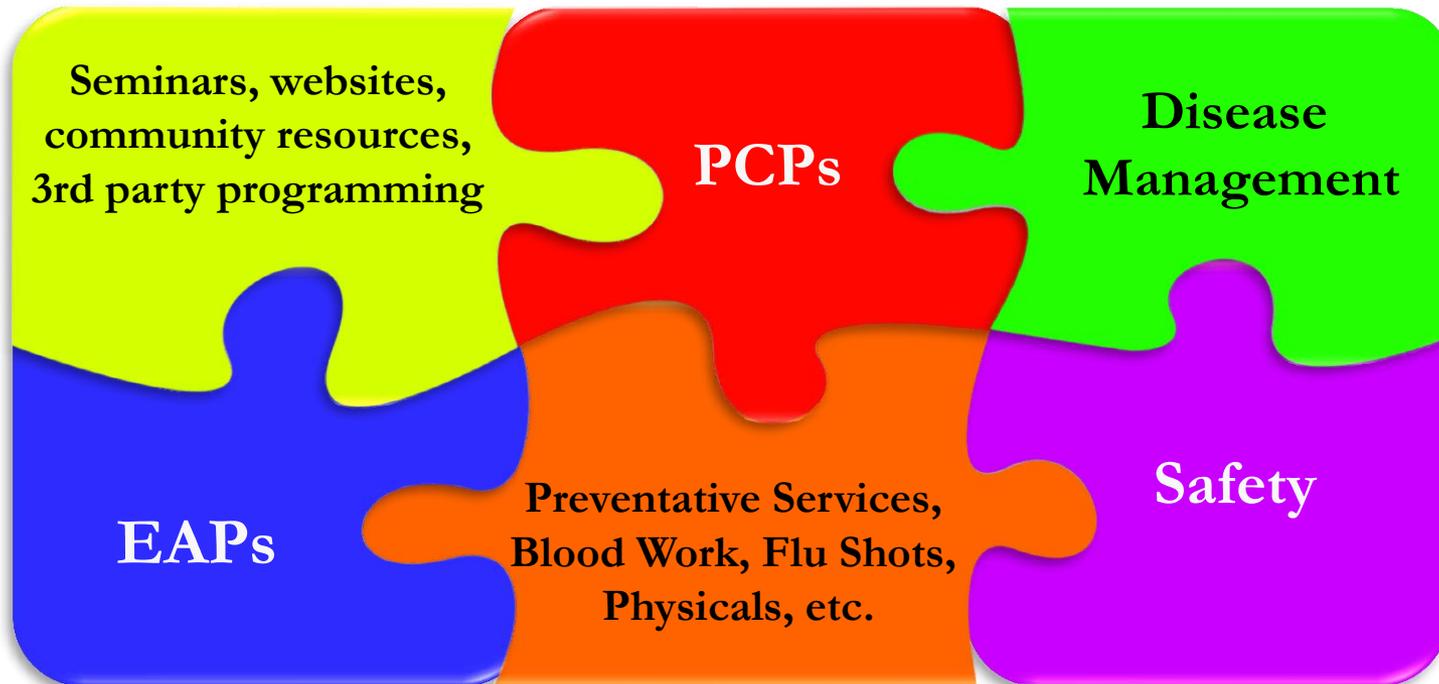
Integrated Technology Model –

Entered into licensing arrangement with Hummingbird Coaching Services to integrate their online coach communications and content technology platform with our onsite services.

- Expand our coaching reach (employees working at remote locations or from home, spouses, retirees, etc.)
- Three Coaching Methodologies...One Coach....
- Technology Coaching at an Onsite Coaching price....

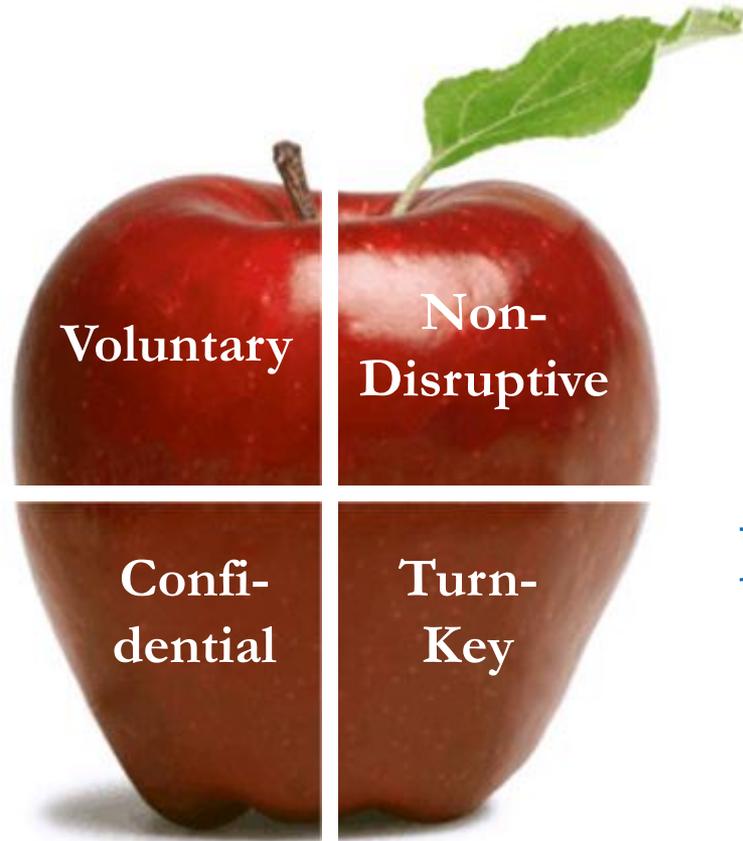


Integration



Key Process Commitments

**For
Employees**



**For
Employers**



Our Coaching Software

Proprietary and internally developed...
collects all employee/coach interactions daily,
including content, outcomes, and follow-up plans.

Used By

Our Coaches; to manage
and assess employee
progress through the
behavior change process

By Management; to manage and
assess coach performance and
quality, evaluate program
success; and for customer
reporting purposes.



Transcending dollars and cents...

“You saved my life”

“I wish my Coach was here 10 years ago”

“Our Coach has completely transformed our culture”

“This is the greatest program my company could have offered”

“Employee morale has never been higher”

“There’s no substitute for a Coach in the workplace”

“My Coach has become an important part of my life”

“I didn’t realize how much the company cared about me”



Wellness Works...Wellness Works Best With Wellness Coaches in the Workplace



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