

**A BUSY SEASON FOR NEW LEGISLATION:  
YEAR-END WRAP-UP AND GOING FORWARD**  
By Christopher J. Marren and Renée L. Rosenfeld, CEBS, SPHR

This year has been one of the most active for federal and state legislative activity specific to employer-sponsored benefit plans. With the flurry of laws passed in 2009, it has been a challenge keeping track of the new requirements, determining if they apply to you as an employer and an employee, what steps take in order to comply, what your insurer is requiring, and how long the new mandates will apply.

Now is a good time to look at the key changes that took place in 2009 and look ahead to 2010 and beyond.

**ARRA.** In 2009, perhaps the biggest challenge faced by employers subject to COBRA was the passage of the American Recovery and Reinvestment Act (ARRA) and the changes it brought to COBRA administration effective mid-March 2009.

The goal of the ARRA provision was to help subsidize COBRA continuation coverage for employees who lost their jobs during the economic recession. As with many new legislative mandates, there were some new acronyms for the Benefit and Human Resources worlds. ARRA brought with it “QB’s” who are “AEI’s.”

An AEI under ARRA is an Assistance Eligible Individual. Specifically, any employee (or spouse or dependent) who is or becomes a COBRA Qualified Beneficiary (QB) due to an employee’s “involuntary termination” between September 1, 2008 and December 31, 2009 is considered an AEI.

An AEI is eligible for the 65% COBRA premium subsidy, so would be responsible for only 35% of the COBRA premium for up to nine months from the initial COBRA eligibility date OR until the AEI is eligible for other group health plan coverage or Medicare.

The initial legislation called for the subsidy provision and eligibility guidelines to be in effect for any qualifying events that occur up to and through December 31, 2009, but it could potentially be extended.

**Mini-COBRA.** A similar development to ARRA was the Pennsylvania-specific law signed on June 10, 2009 by Governor Rendell which created a “Mini-COBRA” law. Similar to other mini-COBRA states such as New York, the law requires insurers to make COBRA-like continuation of health care coverage available under health plans maintained by employers normally not required to do so (fewer than 20 employees) under Federal COBRA guidelines.

Pennsylvania’s requirements apply to insured group plans (including HMO’s) maintained by employers with 2 to 19 employees. The employer’s size refers to the number of employees on a “typical business day” in the prior year.

Unlike Federal COBRA, PA mini-COBRA does not apply to dental and vision. Although qualifying events and classes of individuals who may continue coverage are the same under both, Federal COBRA considers individuals eligible if they were covered for only one day before the Qualifying Event, while PA mini-COBRA requires three months of continuous coverage prior to the event.

The maximum duration of coverage under PA mini-COBRA is 9 months (vs. 18 under Federal COBRA) and will end if the individual is eligible for Medicare or group coverage, whether or not he or she actually enrolls.

Similar to ARRA, the 65% coverage subsidy is available for nine months for individuals who lost group health coverage as a result of an involuntary termination. Non-subsidy eligible COBRA premiums are 105% of the ordinary rate.

**Dependent Coverage to Age 30.** Pennsylvania enacted a law (similar to New Jersey’s) requiring health insurance plans issued in the Commonwealth to make extended coverage **available** for adult dependent

children of insured employees through age 29. The law applies to new contracts and renewals on or after December 15, 2009.

In order to qualify for the coverage, the adult dependent must meet following criteria:

- Under age 30
- Not married
- No dependents of his or her own
- Pennsylvania resident or enrolled as a full-time student at an institution of higher education
- Not covered or eligible for other coverage including any government program.

This new law does not apply to individual policies, long-term care, dental, or vision plans.

The decision to extend coverage is ultimately the employer's and does not preclude an increase in premiums related to covering children for these additional years. While some carriers have outlined the means of election for this option and administration, others are still finalizing their communications and internal processes.

**Michelle's Law** (HR 2851) extends coverage under a parent's medical plan to a dependent who suffers from a serious illness or injury which results in the dependent's taking a medically necessary leave of absence from a post-secondary institution. Coverage will continue until the earlier of:

- One year after the first date of the medically necessary leave, or
- The date coverage would otherwise terminate under the plan

Three main criteria must also be met:

- Written certification from the treating physician
- Notice regarding maintaining coverage under Michelle's Law must be provided dependents along with any notices regarding verification of student status
- Benefits must remain the same as before the medically necessary leave except where changes in coverage (such as at renewal), insurance carrier, or funding take place.

Michelle's Law is effective for plan years beginning on or after October 9, 2009.

**The Americans with Disabilities Act** of 1990 (ADA) was expanded in January 2009 to clarify substantial limitations, expand the concept of major life activities, and change the "regarded as" prong of the definition of disability. Employees who can effectively mitigate their impairment through corrective measures are now protected under the ADA. The revised Act also directs courts to interpret the "substantially limits" requirement in favor of broad coverage, expands the categories of major life activities, and clarifies that to qualify as a disability under the ADA, an impairment limiting one major life activity need not limit any others. Finally, the Act continues to provide protection to those discriminated against based on a perceived disability, though no accommodations are required for that employee.

**The Lilly Ledbetter Fair Pay Act** of 2009 amends Title VII of the Civil rights Act of 1964, the ADA, the Rehabilitation Act of 1973, and the ADEA of 1967 by restarting the statute of limitations each time an employee receives a paycheck based on a discriminatory compensation decision. In other words, each paycheck that delivers discriminatory compensation is subject to correction, regardless of when the discrimination began. This Act is retroactive to 5/27/07.

**The National Defense Authorization Act** (NDAA), effective 1/1/09, provides FMLA directives regarding family military provisions. Under the NDAA, employees who must fulfill military duties or must care for family members in the military are entitled to up to 12 weeks of unpaid leave for qualifying "exigencies" and up to 26 weeks of unpaid leave in a 12-month period for military caregiver leave.

**The American Recovery and Reinvestment Act** of 2009 (ARRA) amended Internal Revenue Code Section 132(f) by adjusting the limits an employee may receive in van pool, transit pass, and parking benefits on a tax-free basis from his or her employer under their **Public Transit Benefits**. Employers may

adopt the new limits (\$120/month for aggregate van pool and transit pass benefits and \$230/month for parking benefits) by amending their plans. These limits are effective 3/1/09 through 12/31/10.

Under the **Worker, Retiree and Employer Recovery Act of 2008** (WRERA), minimum distribution requirements (RMDs) for calendar year 2009 are waived for IRAs and certain defined contribution plans, but not for defined benefit plans. WRERA also contains some technical corrections to the Pension Protection Act of 2006 that affect defined contribution plans. Amendments must be adopted on or before the last day of the plan year beginning on or after 1/1/11; for calendar year plans, the plan must be modified on or before 12/31/11.

As of 4/1/09, **The Children's Health Insurance Program Reauthorization Act** of 2009 (CHIPRA) requires that group health plans permit eligible employees and their dependents who are eligible for coverage, but not enrolled, to enroll outside the usual enrollment period if they request coverage within 60 days. Additional annual notices will be required effective with the first plan year after the model notices are issued. In addition, the Act requires that employers notify employees annually of any premium assistance available to them under a Medicaid or SCHIP plan with respect to coverage under the employer's group health plan.

**The Genetic Information Nondiscrimination Act** (GINA) bans group health plans and insurers from basing health care coverage on genetic information and from making eligibility determinations or adjusting premiums or contributions based on genetic information. It also prohibits health plans and insurers from requesting, requiring, or purchasing the results of genetic tests and from disclosing genetic information. Further, the Act forbids employers from discriminating against workers based on genetic information. GINA-health coverage is effective for the first plan year beginning after 5/21/09 and GINA- employment discrimination is effective 11/21/09.

Effective with the first plan year after 10/3/09, the **Paul Wellstone and Peter Domenici Mental Health Parity and Addiction Equity Act** of 2008 corrects the imbalance between benefits afforded for medical/surgical treatment and treatment for mental health and substance abuse. While the Act does not require that group health plans offer mental health or substance abuse disorder benefits, it does provide that group health plans that offer such benefits must do so in parity with medical/surgical benefits. Calendar year plans must comply with the Act by 1/1/10.

Much debate and discussion continues regarding health care reform and what exactly that will mean. We will no doubt have more to digest in the coming year. As with any legislative issues, you are encouraged to contact your benefit consultant/broker and/or legal counsel for further clarification or guidance regarding the impact to your organization and how to comply.

***Christopher J. Marren is an Account Executive at The Elite Group.***

***Renée L. Rosenfeld, CEBS, SPHR, is Assistant VP for Human Resources at Holy Family University.***

**FROM A STICK TO A CARROT  
DID AMERIGAS SAVE A LIFE?  
By Peter R. McClung**

With 71% of employers offering incentives to improve employees' health, many benefits professionals have discussed whether incentives work best as a carrot or a stick (Central New York Business Journal, *More employers offering wellness program incentives* by Eric Reinhardt, September 5, 2008). Some feel the stick approach harms employee relations, resulting in most employers' designing incentive programs based on positive reinforcers. AmeriGas Propane, Inc. took a unique approach to preventive testing.

***AmeriGas takes a stand***

Last year, AmeriGas gave employees an ultimatum. Get your preventive testing done, or you may not receive medical benefits in the future. The time for an optional or carrot-style wellness program had passed and the stick was out and ready.

As reported in the Wall Street Journal on July 12, 2009, although this was an unusual step, the decision was based on evidence of a significantly higher employee death rate than the national average. There was a **moral imperative** to engage with employees to have them live a healthier life, and a **business reason** to invest in the testing to get employees on the road towards health success.

***The results***

After measuring completion factors, implementing an extension period, and an exhaustive appeal process for employees, Operation Save-A-Life completed its first cycle in early 2009. At the end, just a handful of employees are losing benefits eligibility for the next period. After the program, AmeriGas conducted an employee survey and found that Operation Save-A-Life had not only an immediate impact on employees' lives, but that the whole effort was seen as positive by employees.

Carol Guinan, Benefits Director at AmeriGas, states, "We know of six women that found breast cancer at a much earlier stage, due the program, and several individuals found issues with their heart before they normally would have." In the survey, 40% of respondents stated that they did one or more of the following:

- Changed eating habits/started a diet
- Quit smoking
- Began an exercise regimen
- Now take medication
- See a doctor more frequently, now that a health condition has been diagnosed.

Carol said, "Several managers scheduled their employees for their tests all together," promoting health at the workplace. Since eliminating copayments for generic drugs based on disease state, "our diabetic drug utilization is up 8% and cholesterol medication is up over 13%. We know that this program has saved lives."

The most surprising outcome of the survey and the program is that 75% of employee respondents said they would recommend that other companies institute a similar program. This result can be attributed to the full suite of employee communication tools utilized by AmeriGas, including letters and DVDs, participation by their health vendor's (Aetna) Medical Director, and personal messages from their own employees and CEO.

While the results from the employee survey show success, there were several aspects of the original Operation Save-A-Life that needed to be tweaked as the program proceeded. In certain cases, codes for the specific tests could not be extracted from provider billing, which required liberalizing the program requirements to satisfy the total number of required tests. Also, additional communication on getting preventive services done at a primary care physician's office instead of more costly locations like an urgent care center or local hospital would have limited some of the medical expense. Both issues have been addressed for the next set of employees entering the program.

With employees receiving preventive screenings and subsequent medical care, the initial health care expense financials were expectedly higher. AmeriGas will monitor the longer term picture for lower long-term health care expenses based on the preventive screenings prescribed through Operation Save-A-Life. What first looked like a stick was perceived as a carrot by many employees.

***Peter R. McClung is VP, Client Management, National Accounts Aetna.***

## ARE YOU LINKED IN?

Join the movement today - more than **400** members of PEBA have already become associated with our **LinkedIn** group. You can find information on upcoming events, read about industry trends, and view local job opportunities. It's also a great place to post questions, provide comments, or just browse discussion threads on important topics of interest. PEBA's group is another avenue to support the professional development of our membership and to offer more opportunities for us to connect with local professionals in our field.

Use our **LinkedIn** group as an extension of **www.peba.org** to maximize your experience as a PEBA member.

*Note: PEBA members **Christine Stanton** and **Christopher Marren** are the co-chairs of our newly expanded **Communications Committee**, which now oversees both print and electronic communications and offers subject matter experts to assist members with questions on LinkedIn. If you would like to share ideas or join the committee, reach out to one or both of them on the **PEBA LinkedIn** site.*

## CONVERT TO A ROTH IRA? WHY NOW MAY BE THE RIGHT TIME

By Phil Zimmerman, CFP®

*Next year, the IRS lifts income restrictions for those converting traditional IRAs or 401(k)s to Roth IRAs. Is the opportunity right for you?*

Since its introduction in 1997, the Roth IRA has enjoyed great popularity. If eligible, Roth IRA owners can make after-tax contributions and withdraw them, tax-free, at any time if certain conditions are met. Once the account has been open and funded for five years, distributions will be income-tax- and penalty-free provided the account holder is at least age 59½ or meets one of the other circumstances for making a qualified distribution. In addition, Roth IRAs are not subject to required minimum distributions (RMDs) during the holder's lifetime.

One of the Roth's few drawbacks has been its income restriction for converting from a traditional IRA. Currently, anyone, whether married or single, who earns more than \$100,000 is not permitted to make a conversion. However, starting in 2010, the IRS is lifting this income restriction. If you're focused on saving for retirement, this is good news. But anyone considering converting to a Roth IRA needs to understand the less obvious effects of this decision. For instance, the conversion involves an up-front tax liability that may be worth assuming, depending on your circumstances and retirement income strategy.

Typically, it makes most sense to convert when:

- The balance of the traditional IRA you're converting is substantial
- You expect to occupy a higher tax bracket in retirement than you do now
- You expect your beneficiaries to move to a higher tax bracket after they inherit your IRA assets
- You can pay the taxes on the conversion from assets other than those being converted

Consider these questions when you speak with your financial advisor about Roth IRAs:

- How would I benefit during retirement from a Roth conversion now?
- What assets do I have available to cover any tax liability I incur from converting my IRA or 401(k)?
- How would converting my IRA or 401(k) to a Roth IRA affect my beneficiaries?

There are two other factors you may want to consider as you mull over the choice. First, recent market turbulence may have primed your IRA or 401(k) for conversion—a lower account balance generates a lower tax burden. Second, for conversions made in 2010, the IRS allows you to spread the tax payment over a two-year filing period.

Another way to potentially mitigate the taxable burden is to convert only a portion of your assets. However, it's wise to explore the ramifications beforehand. Converting a portion of IRA assets is more complex than it seems at first blush. Investors may be under the impression that it's possible to convert only after-tax IRA contributions to a Roth and thus avoid having to pay any taxes on the conversion. As nice as that would be, it's not possible because of the way the IRS views IRA assets. Even if you have after-tax money in your IRA, the IRS won't allow you to convert only those contributions. Instead, the IRS looks at all your IRA accounts together and prorates the taxes you owe based on both taxable and nontaxable assets.

Of course, all the earnings on your contributions are still subject to tax upon conversion. Taxes on earnings are not prorated—it doesn't matter whether those earnings came from deductible or nondeductible contributions.

In the right situation, converting to a Roth IRA can be extremely beneficial to your retirement plans. It's important to talk with your financial advisor. He or she can help you determine whether this brand-new opportunity can help you achieve your retirement savings goals.

*Merrill Lynch does not provide tax, accounting, or legal advice. Any tax statements contained herein were not intended or written to be used, and cannot be used for the purpose of avoiding U.S. federal, state or local tax penalties. Please consult your advisor as to any tax, accounting, or legal statements made herein.*

***Phil Zimmerman, CFP® is an Assistant Vice President and Wealth Management Advisor at Merrill Lynch.***

**HEALTHCARE POLICY: CAN REFORM BECOME REALITY?**  
**A DEBATE FROM DIFFERING PERSPECTIVES**  
By Peter R. McClung

Before the passage of the House bill, PEBA hosted a debate on healthcare from three different perspectives at its annual evening event on October 21, 2009. **Dr. David Nash**, Founding Dean of the Jefferson School of Public Health; **Dr. I. Steven Udvarhelyi**, Senior Vice President and Chief Medical Officer for Independence Blue Cross; and **Mr. David Wilderman**, Executive Director of the Pennsylvania Health Care Cost Containment Council, gave historical perspective and described how the future may and should look in Southeastern PA. The lively session, moderated by **Jane Von Bergen**, reporter with the Philadelphia Inquirer, grew in intensity with questions from the packed audience at **The National Liberty Museum**.

**Dr. Nash** answered the first question: "In this climate, what is the greatest opportunity?" "Improving health care quality and being focused on bringing about change. Cost, Quality and Access all need to all be addressed. The fear is that we will do a halfway job on quality." **Dr. Udvarhelyi** focused on the value being received by consumers of health care in the US versus those in other countries. "We are not getting the value," he voiced. He raised concerns about passing a bill that doesn't solve the core issues of cost and quality. "Congress and all the constituents have tried for decades to get to a solution and we are the closest to a reform bill now. But the migration away from true health reform to health insurance reform may miss opportunities to bring down costs and improve outcomes." **Mr. Wilderman** focused his response on medical error in the US as the fourth largest cause of death. "We need to tackle this."

**Ms. Von Bergen** questioned the panel about the potential for rationing under a national reform effort. **Dr. Udvarhelyi** discussed the potential for significant cost reduction (30%), especially in a high cost area like Philadelphia. **Mr. Wilderman** agreed that there is rationing now and felt that the only way to deliver effective care was through a single payer system. He stated that we need to deliver chronic care in a rational way, which is not occurring now, but he proposed that we can't get there until a change in the reimbursement system takes place. He felt that we can't just tell physicians to do the "right thing." **Dr. Nash** agreed that we ration care every day in today's system. The way to get costs down is to reduce waste in the system by applying evidence-based guidelines.

The formal questions concluded with, "What can employers do now?" The entire panel felt that employers/plan sponsors need to be at the table with their insurers and providers and "get into the game." The coordination of health care between providers, plan sponsors, and insurers is key. All agreed that merely pushing additional costs to members was not the answer to lower costs. Transparency in pricing and quality is necessary, along with significant improvement in chronic disease management programs.

The debate ended with questions from the filled room. Frustration regarding pooled pricing for smaller groups was the focus of the initial question. Improvements in health status had not lowered the rate of premium increases. Also, access to appropriate specialists that appeared to be restricted through lack of appointments was also raised. The panel highlighted the issue of trying to get more specialists through medical school and the fear that health care reform efforts in Washington could actually increase small employers' costs.

The panel was asked to comment on taxing for vices such as smoking. **Mr. Wilderman** felt that additional vice taxes would not systematically change the system enough to bend the cost curve. **Dr. Nash** felt that brokers and consultants weren't guiding their plan sponsors to value quality and total cost, but instead just discount rates. **Mr. Wilderman** reminded all that information on quality and access is available through PHC4, which had 5 million hits to its website.

After the debate concluded, PEBA honored Sharon E. Kazaras, President of Sharon E. Kazaras Consulting and winner of the 2009 Outstanding Achievement in Benefits and Compensation Award, for her many years of service to PEBA. A cocktail reception followed.

***Peter R. McClung is VP, Client Management, National Accounts Aetna.***

## **“MUCH A TWITTER...” - SOCIAL MEDIA AND EMPLOYMENT SCREENING**

**By Bobbi Butler**

As recently as 10 years ago, screening applicants and verifying employment required HR to pick up the phone and make a series of calls to check prior employment information and references. As more formal screening processes have evolved, outsourced verification services and electronic information sources have become more common. A new wave of employment screenings is evolving using social media, with employers checking Facebook, Twitter, MySpace, and other social networking sites as part of their applicant screening process. While employers can view prospective employees in a more personal light, as can be expected when processes change, there is a mixture of positive and negative reaction to using social media for this purpose.

First, let's look at how employers view social media in general. In a recent survey of US companies with 100 or more employees by Robert Half Technology, over 50% of Chief Information Officers said their company policies do not allow employees to visit social networking sites for any reason while at work. The main reasons for these restrictions: concerns that employees will be distracted during work hours and the potential for employees to damage the company's reputation (not to mention their own).

The survey concludes that as uses for social networking sites become refined and companies figure out ways to measure ROI with social media, they expect more companies to allow these sites to be used for business purposes.

With some employers allowing and others prohibiting use of social networking sites in the corporate environment, using these sites to screen candidates becomes a business issue with broader ramifications. In a recent Wall Street Journal article (*Graduates Alter Recruiters' Job* by Andrea Coombs, May 28, 2008), the Adler Group, a company that trains corporate recruiters on hiring practices, says people are "actively browsing social media sites and spending time on social networks, and even if they don't know it, they're passively looking for jobs. The smartest companies are taking advantage of this and creating a social media presence." These potential job candidates may stumble across an interesting blog, Facebook page, or Twitter profile that mentions a great company and they may take the time to find more about the organization. Now the tables are turning and eventually it is expected that "every company will need to create a large enough online presence so the right people will stumble on them." So while companies are beginning to use the social networking sites to gain a different perspective on potential new hires, job-seekers are using the same sites to research prospective employers.

With growing employer responsibility for the actions of their employees, employers need to know as much about prospective employees as possible. It makes sense that this information gathering and screening process cast as wide a net as possible, including using social networking sites. A recent article from *Management & Careers (IT security gets personal* by A. Snell, January 2007, Page 34) states, "With nearly 50% of resumes [containing] factual errors, it is understandable why employers are erring to the side of caution." In addition, "employee theft and fraud cost US retail businesses more than \$50 billion annually [and] the Bureau of Labor Statistics estimates that 1.2 million to 2 million incidents of work place violence occur each year." According to Joseph Vater, a partner at the law firm of Meyer, Unkovic & Scott LLP, "negligent hiring lawsuits against companies whose employees commit a violent act have been on the rise. This has increased the necessity for employers to perform background checks on job applicants, and many companies have turned to the internet to find all available information on their prospective employees." He notes that prospective employees also have a right to informational privacy. This situation creates a fine line between the company 's knowing as much as it can about a prospective employee and crossing the line into unethical behavior by relying too heavily on information found on the internet for make hiring decisions. Here is where using social networking sites for screening purposes becomes murky. How dependable is the information posted on the site? In many cases, information found online is more fiction than fact. Even factual information can be misinterpreted when taken out of context. Will the prospective employer be using inaccurate or irrelevant information to decide whether to extend a job offer? If this information can be used to make hiring decisions, will it limit an individual's ability for private self-expression? Can a company be accused of acting unethically if it denies an applicant the opportunity to interview for a job based on social

networking information that, whether correct or not, has little or no bearing on the ability to succeed at a given occupation?

*FYIscreening.com*, a website devoted to helping companies with employee screening processes, notes that “over the past few years, social networking websites such as MySpace, LinkedIn and Facebook have provided employers with an opportunity to look at potential employees in a different light. The beauty of social networks is they invite people to share their lives, thoughts and opinions...all in public. [They’ve] noticed social networks are blurring the line between “business” and “pleasure.” This can get tricky for employers. Federal and state laws prohibit employment discrimination based on age, race, color, religion, sex or disability. Employers need to be careful when using information from a social network in making a hiring decision.”

Although it appears from searches and articles on this subject that there are currently no outstanding lawsuits, there seems to be a consensus that it’s simply a matter of time until an employer is sued for using a social network to screen a candidate. So what should employers do? This technology is growing steadily and being used increasingly for business purposes. As you do with all new policies you put in place, you would be prudent to go back to basics, think through your corporate strategy, and document your policies for using social networking sites. Some suggestions for employers from the *FYI* site:

- With your legal counsel, develop and document your policies and procedures for using social networks to screen candidates.
- Ask job candidates for written consent allowing you to use social networking sites as part of your screening process. (Statutes already exist if a website is searched by a background screening firm on behalf of an employer to provide consent, and disclosure as required under the federal Fair Credit Reporting Act (FCRA). The *FYI* site suggests that the “safest approach is to perform a social network search after there is applicant consent and a job offer is made contingent upon completion of a satisfactory background check.”
- Be careful of the tactics you use as an employer to gain access to information on social networks (e.g., never use fake identities or engage in “pretexting”).

As one HR professional for a large company notes via blog on a social media site, "Social media is about transparency, honesty, and authenticity, among other things. These are definitely cultural characteristics that some companies have and have not yet succeeded in infusing into their organizations. Tech tools are like donated organs – the culture will either adapt and "take" the organ, or reject it!" As of today, social media is a tool that can either fit or not fit into a company culture.

***Bobbi Butler is Principal and Director of the Group Benefits Consulting Practice at The Savitz Organization, Inc.***

## MEET THE EXECUTIVE DIRECTOR....

By Christine Stanton

PEBA's Executive Director, **Susan Deminico**, joined PEBA in **March 2007**. Previously, Susan was the **Executive Director** of the **Princeton Review** office in Philadelphia. She graduated from **Boston University** with a degree in **International Relations and Gender Studies** and has an MBA from **Temple University**.

We recently caught up with Susan:

### **What has your experience at PEBA been like so far?**

It has been terrific. PEBA is a great organization...and our mission is vibrant. Our members have been very welcoming. They are passionate about their field and have reached out with new ideas and energy. We are working together to re-invent PEBA and everyone has been helpful, enthusiastic, and supportive.

### **What do you see as some of the hottest issues affecting Compensation and Benefits professionals today?**

First, I would say uncertainty with **healthcare** is a big issue. There is so much on the table right now. And long-term, new regulations affecting healthcare will likely have a big impact on the day-to-day benefits administrator.

Second, we are all looking to understand how **Executive Compensation** will be impacted by the economy and recent events. Restrictions were recently placed on the seven firms who owe TARP money. Is there potential for wider impact on other companies?

Third, I think we're all concerned about the **changing face of retirement**. How will the shift from pension plans to defined contribution plans affect the economy? What will the impact be on different generations? What will retirement look like in the future?

### **What are your goals for PEBA?**

One of our primary goals is to expand the programming to meet the needs of our members at different stages in their careers.

For those new to Compensation and Benefits, or in need of a refresher, we will be offering a new **Bootcamp** series covering basic concepts and various Compensation, Health/Welfare, and Retirement topics.

We are also expanding our **Webinar** series. Attendance has been terrific. We think offering flexible online educational opportunities makes sense, and our members seem to agree.

For seasoned professionals, we are offering our **Executive Lecture Series**. We're also working hard to expand networking opportunities for everyone, including sponsoring dedicated networking events and strengthening our presence on the professional networking site, **LinkedIn**.

Finally, we are continuing to offer our popular **Morning Programs** to help keep our members current on a whole range of issues affecting our field.

Our members can visit our website at [www.peba.org](http://www.peba.org) for detailed information on upcoming events.

### **How can PEBA members get the most from their membership?**

Get involved. Come to the events. Join a committee. PEBA is always looking for volunteers, and it's a great opportunity to meet other professionals in the field and to make a difference in the local professional community.

I also encourage all of our members to pick up the phone and give me a call. Or send me an email. Or drop by the office if you're in town. I love sharing ideas and regular interaction with our members helps me do my job better. Members can reach me at **(215) 735-9435** or [Deminico@peba.org](mailto:Deminico@peba.org).

#### **On my Reading List:**

*Super Freakonomics*

By Steven D. Levitt and Stephen J. Dubner

*Team of Rivals: The Political Genius of Abraham Lincoln*

By Doris Kearns Goodwin

#### **Something Very Few People Know About Me:**

*I was a pre-med student in college.*

**Favorite Place In Philly:** *Amada Restaurant (Spanish Tapas)*

**A Favorite Activity:** *Pilates*

Insert Susan's  
Picture

***Christine Stanton is a Human Resources Consultant and Owner of Stanton Consulting.***

## WITH YOUR HELP, PEBA IS GROWING

*Spread the word about PEBA!*

*We welcome the following member companies who joined in recent months:*

### **BDO Seidman, LLP**

*(Jamie L. Davis, Assurance Senior)*

BDO Seidman provides assurance, tax, financial advisory, and consulting services to a wide range of publicly traded and privately held companies and offers an array of services and the global capabilities of the world's fifth largest accounting and consulting network, combined with the personal attention of experienced professionals.

### **Cohen-Seltzer, Inc.**

*(Michael Braun, Benefits Consultant)*

A preeminent brokerage firm within their market area, Cohen-Seltzer, Inc., located in Fort Washington, specializes in risk management, insurance brokerage, consulting, alternate risk financing, loss control, and personal risk management.

### **Crown Cork & Seal**

*(Douglas T. McLaughlin, Sr. Manager, Organizational Development)*

Crown Cork & Seal is the leader in metal packaging technology. With operations in 41 countries employing over 21,000 people and net sales of \$8.3 billion, they provide global breadth as well as regional expertise.

### **eXude Benefits Group, Inc.**

*(Eileen Green, Chief Operating Officer)*

A Certified Minority Business Enterprise for the City of Philadelphia, eXude Benefits Group aims to provide exceptional service to their clients and the community in the areas of health and wellness benefits, retirement benefits, and HR consulting.

### **Humana Specialty Benefits**

*(Dan Gechter, Market President MidAtlantic)*

Humana Specialty Benefits offers ancillary and voluntary benefits that provide employers with an affordable way to build a more competitive and attractive benefits package.

### **ING Employee Benefits**

*(Joseph J. Kozak, Assistant Regional Manager)*

For more than 80 years, ING has offered traditional group insurance benefits as well as voluntary insurance products and retirement programs, all conveniently delivered at the worksite.

### **Lacher & Associates**

*(Mark G. Lacher, Partner)*

Family owned and operated, Lacher offers commercial insurance, workers' compensation insurance, life insurance, personal insurance, and employee benefits.

### **MPS Communication Graphics, Inc.**

*(Michael P. Sommar, President)*

MPS develops business and consumer communication programs that balance the competing demands for quality, scope, time, and cost. MPS guides clients through each core process to ensure maximum product accuracy and efficient utilization of resources.

### **Marsh Global Consumer**

*(David Campbell, Senior Vice President)*

Marsh Global Consumer designs, sells, implements, and administers insurance-related risk management and financial service programs that generate revenue, promote loyalty, reduce costs, and increase efficiency for sponsoring clients.

**Newspaper Support Services, Inc.**

*(Claudia Dunleavy, HRIS Team Leader)*

Newspaper Support Services, Inc., located in Wilmington, is a private company offering management and office administrative services.

**Niche Financial Consulting, LLC**

*(Happy V. Muir, Chief Marketing Officer)*

Niche Financial provides retirement plan services, including participant information sessions, investment counseling and related outsourcing services to plan sponsors and providers.

**Panasonic Corporation of North America**

*(Masaaki Fukazawa, HR Analyst)*

Panasonic Corporation of North America (PNA), based in Secaucus, NJ, is the principal North American subsidiary of Osaka, Japan-based Panasonic Corporation and the hub of its branding, marketing, sales, service, product development, and R&D operations in the U.S. and Canada. North American operations include R&D Centers, manufacturing bases, the Panasonic Customer Call Center in Chesapeake, VA, business-to-business and industrial solutions companies, and consumer products, sales and service networks throughout the U.S., Canada and Mexico.

**Public Health Management Corporation**

*(Celeste Collins, VP Human Resources)*

Formerly the Philadelphia Health Management Corporation, PHMC has served the Greater Philadelphia region since 1972 as a facilitator, developer, intermediary, manager, advocate, and innovator in the field of public health. With nearly 1,400 employees, 250 programs, nine subsidiaries, 70 sites, and 87,000 clients served annually, PHMC is one of the nation's largest and most comprehensive public health organizations.

**Reading Hospital**

*(Amy VanDerhai, Pension Analyst)*

Located in Berks County, The Reading Hospital and Medical Center and its subsidiaries employ approximately 5,900, including over 600 physicians in 50 clinical specialties. Several programs have been recognized by state and national healthcare organizations for clinical excellence and best practices, including stroke and cardiac care, patient safety, organ donation, women's health and maternity care, and peripheral vascular bypass.

**Strategic Distribution, Inc.**

*(Michelle Tunkara, Manager, Compensation & Benefits)*

Strategic Distribution, Inc. (SDI) is a leading provider of MRO (maintenance, repair, and operations) integrated supply chain management services in North America. SDI provides technology and supply chain solutions to increase productivity and reduce total costs, delivers on-site supply chain management expertise through its in plant store, and offers flexible custom and catalog solutions to address a variety of enterprise-wide demands.

**VSM**

*(Sally M. Waters, Director, HR Administration)*

With over 140 years of experience, VSM is a global leader in the abrasives market, providing customers with a worldwide partner to evaluate grinding processes and abrasives that can most effectively reduce finishing costs while increasing production efficiencies. With a core competence of coated abrasives, VSM offers products for applications ranging from metal grinding to wood finishing.

***Renée L. Rosenfeld, CEBS, SPHR, is Assistant VP for Human Resources at Holy Family University.***