

WELLNESS

SUPPORTING GOOD NUTRITION IN THE WORKPLACE

We know that poor dietary habits contribute significantly to preventable disease and premature death. We also know that healthful eating is critical in weight management and the prevention of obesity. As more and more employers seek to create a culture of health in their workplaces, they often ask, *“What can we do to promote healthful eating in our workplace?”* This article provides some innovative yet practical ways for companies to help their employees lead healthier lives.

Given the hours that most employees spend at work, they are eating even more meals away from home. It seems fitting, therefore, that employers interested in a worksite wellness program provide leadership to promote healthful eating in the workplace. The following strategies will help organizations facilitate that goal and encourage employees to select foods and beverages that are lower in fat and calories.

EDUCATE

- Offer a series of educational seminars on nutrition to support employees in making healthful eating decisions.
- Initiate a communication campaign via multiple channels, such as posters, email, bulletin boards and the intranet on a regular basis. Topics could include food labeling, portion distortion, nutrition myths, eating out, fad diets and so on.

MOTIVATE

- Promote fruit and vegetable consumption with a population-wide healthful eating challenge such as “5-a-Day for Better Health.”
- Display motivational posters and signs to promote the benefits of healthful eating.
- Share employee before-and-after weight-loss stories to inspire others in making changes.



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- Include employees' families/peers in education to provide increased support.
- Create incentives to reward employees who exhibit healthful eating behaviors.

PROVIDE TOOLS

- Host an onsite, interactive cooking demonstration of healthful food preparation techniques.
- Provide interactive events, such as food sampling or a food shopping tour.
- Create an employee library or information exchange of sound nutrition information.
- Provide access to resources or distribute nutrition-specific materials to guide employees in making better choices when eating out.
- Provide company-sponsored onsite weight reduction programs.

CHANGE YOUR ENVIRONMENT

- Increase healthful food choices in vending machines, snack bars and onsite food services.
- Post key nutrition information on all vending and onsite food services.
- Price food competitively, making healthier food more economical.
- Create company policies that support healthful food choices being offered at all company-sponsored meetings and events.
- Establish an approved catering list for all company-sponsored food brought onsite.
- Ask vendors or visitors to support the company by including healthful choices when food is brought onsite.
- Integrate healthful eating opportunities into existing company functions where food is served.
- For a change of pace, offer free fruit in your break room.
- Make kitchen area and equipment available to all employees.
- Provide filtered water.
- Post food pyramid charts in break room and cafeteria areas.

OTHER IDEAS

- Hold a recipe contest or recipe exchange.
- Plan an informal outing to a nearby restaurant for employees to practice new skills.
- Coordinate an onsite or nearby farmers market for employees to have access to fresh fruits and vegetables.

March has been designated National Nutrition Month[®] by the American Dietetic Association to promote nutrition education. The campaign focuses on the importance of making informed food choices and developing sound eating and physical activity habits. Capitalize on the national publicity to enhance your own healthful eating campaign or nutrition challenge.

For more information and resources, visit the following websites:

American Dietetic Association

CDC LEAN Works: A Workplace Obesity Prevention Program



NEWS

WILLIS RE-LAUNCHES WINNING WITH WILLIS

PUBLIC ACCESS RESOURCE CENTER DESIGNED TO IMPROVE EMPLOYEE HEALTH AND WELLBEING

Last year Willis added a splash of color in a seemingly black and white industry when we released the first phase of Winning With Willis: a public access resource center devoted to changing behavior on nutrition, exercise and smoking cessation and prevention. This month, we are very pleased to announce our content collaboration with the Centers for Disease Control and Prevention (CDC).

“This collaboration makes it easier than ever for our clients and their employees and families to access a wide range of information that will help them better understand what it takes to live their healthiest lives – and make a personal commitment to doing so,” said Michael Barton, Chairman of the Willis Human Capital Practice. “Willis believes that by creating resources such as these we can help solve one of the greatest problems of the century – health care demand.”

Winning With Willis is designed to provide, in one place, all the educational tools employees need to motivate and support behavioral change and help users make better decisions related to their overall health, nutrition and physical activity. The site features weekly Healthy Headlines, which are articles and health information from the CDC, interactive widgets and health challenges to educate employees and encouragement to make changes regarding better eating habits and exercise goals. Employees can still use the site to access our discounted pricing for the Jillian Michaels personalized diet and exercise program, the Biggest Loser League social networking community and the Willis Rewards employee discount program.



Click here to read the press release.

Click here to see an interactive demo.

Should you have questions about Winning With Willis, please contact your local Willis representative.

HR CORNER

OBAMA AIMS TO BOOST PAID FAMILY LEAVE PROGRAMS

President Barack Obama's budget proposal for fiscal year 2011 includes \$50 million in grants for states that choose to launch paid family leave programs.

Obama wants to create a fund within the Department of Labor to help states launch paid-leave programs and cover their start-up costs. Obama argues that while the Family and Medical Leave Act allows workers to take job-protected time off unpaid, many families can't afford to lose that paycheck.

A few states have already approved paid family leave programs, including California, New Jersey, and Washington.

The paid family leave program in Washington was scheduled to go in effect in 2009 but was delayed until 2012 because of a budget shortfall. In New Jersey, workers started collecting paid family leave benefits in July 2009. California's paid family leave program began in 2004. The programs provide wage replacement for a set number of weeks and are funded by workers' contributions.

This article provided by BLR.

LEGAL & COMPLIANCE

HEALTH CARE REFORM: WHERE ARE WE NOW?

House Speaker Nancy Pelosi (D-CA) publicly acknowledged that she is unable to secure sufficient House votes to pass the Senate version of Health Care Reform. This admission follows Republican State Senator Scott Brown's upset win over Democratic Attorney General Martha Coakley for the Massachusetts Senate seat. With the loss of this seat formerly occupied by the late Senator Ted Kennedy, many political pundits rushed to declare health care reform dead. However, the Obama administration and other Democratic proponents of health care reform have tried to make the case that the reports of its death have been greatly exaggerated.

Whether the Democrats have the political will to continue pushing health care reform remains to be seen. In fact, Senator Chris Dodd (D-CT) suggested that it may be wise for Democrats to suspend health care consideration for a month or longer, while more moderate Democratic members of Congress and Senators are urging party leadership to direct their efforts toward jobs and economic stimulus rather than health care for the near term.

Meanwhile, the Obama administration indicates that it will continue pushing health care reform – or at least its core elements. Some legislative experts believe that some provisions that are modest enough, or that have a sufficient consensus of support, might still be part of a health care reform bill. These provisions include the following measures that could affect employer plans.

- Reforming the individual market
 - Dependent coverage mandate up to age 26
 - Prohibition of rescission
- Developing a national or state insurance exchange of some type to provide more access to the insurance market
- Extending COBRA coverage (but not the subsidy) until those exchanges are developed
- State waivers for ERISA preemption provisions
- Increasing liability for unjustified claim denials
- Additional incentives for wellness plan participation
- Equalizing the tax treatment of benefits for domestic partners and other dependents so that they are the same as those for spouses
- Adding tax credit incentives for small businesses to offer group coverage
- Additional appeals process added to ERISA requirements

The measures on which there is more agreement that they should be dropped include:

- The individual and employer mandates (including any employer plan vouchers)
- Subsidies for low and moderate income individuals (or at least scaling them back in a major way)
- Reducing the large expansion of Medicaid (to the relief of many governors)
- Eliminating the excise tax on “Cadillac” plans (not a popular item in the House)

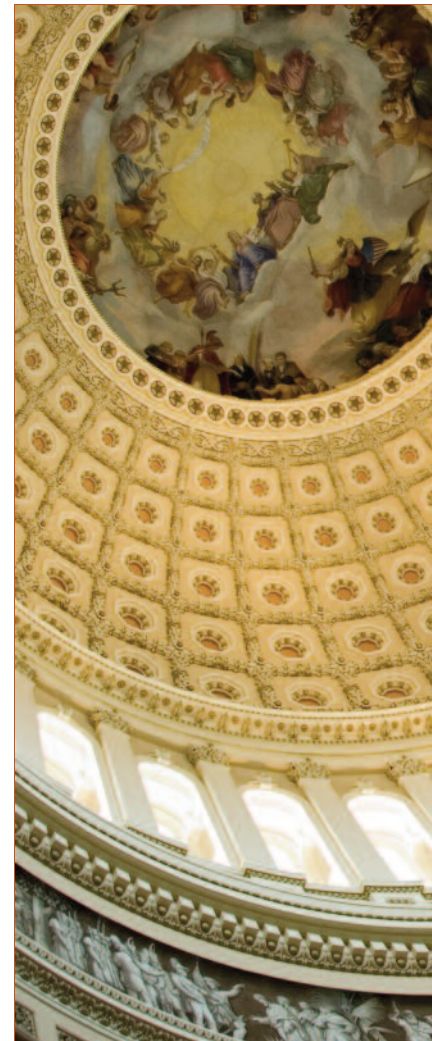
DEMOCRATIC OPTIONS

Despite polling data which shows the public losing interest in the issue, some Democrats remain vocal and insistent about many reform options because they see health care reform as a signature issue and want to deliver on it, so debate is likely to continue on those items.

Perhaps the most widely discussed option is to use the budget reconciliation process to enact reform – as that process only requires 51 votes to pass in the Senate. However, only legislation affecting federal spending or revenue is eligible, and the most important parts of the health care reform provisions really have little to do with spending (except to pay for the additional expenditures and raise taxes). Also, if budget reconciliation is utilized, it will take time to get the bill through committee again, and many legislative experts note that, ultimately, the budget reconciliation process will not achieve the desired results.

Another option is for Democrats to start over with an entirely new bill that is scaled down or includes some of those provisions in other legislation (such as the Jobs for Main Street Act already passed by the House). Of course, the scaled back provisions that could gain Republican support might not satisfy the liberal wing of the Democratic Party. Moreover, as noted above, some moderate Democrats are hoping to move past health care issues entirely and concentrate instead on economic relief measures.

Willis will continue to keep you informed of changes that would impact employer plans.



Despite obvious momentum loss, the Senate health care bill has been approved and the House could still act on it. The possibility still exists, therefore, that until this Congress ends (at the end of the year) that an agreement could be reached to move forward with the current Senate proposal. Other options under consideration include more modest changes that can garner bi-partisan support.

COBRA SUBSIDY EXTENSION NOTICES: WHO GETS WHAT

The Department of Labor (DOL) has posted model notices for explaining the COBRA subsidy extension on its website. Employers, eager to use the model notices now that they are available, are sometimes confused by the DOL's directions on who must receive what notice. In addition, the DOL's model notices may not work well for many employers, so Willis' National Legal & Research Group has prepared sample notices which are based, in part, on the DOL model notices.

BACKGROUND

An extension of the COBRA subsidy, enacted on December 19, 2009, made the following major changes to the COBRA subsidy:

- Extended subsidy eligibility to February 28, 2010 (previously December 31, 2009)
- Extended the maximum period for an individual to receive the subsidy by six months, so an individual who meets the requirements may receive the subsidy for up to 15 months (previously nine months)
- Fixed a glitch that made the subsidy unavailable to someone who otherwise qualified for it, if that individual's COBRA coverage did not begin by the last eligibility date (now February 28, 2010, previously December 31, 2009)

Transition provisions in the extension legislation permit retroactive payment of certain COBRA premiums by assistance-eligible individuals (AEIs) whose maximum nine-month subsidy period has expired.

The legislation also requires notification regarding the extension and transition provisions. (The DOL's model notices are intended to fulfill those notification requirements.) For most current COBRA subsidy recipients, notice must be provided no later than February 17, 2010. For those who are entitled to make retroactive premium payments, however, notices regarding the transition provisions may be required earlier. In the case of a plan that administers COBRA on a calendar-month basis, for example, some notices will be required by February 1, 2010.

THE DOL'S MODEL NOTICES

There are two DOL model notices that are intended for use by employers: an *updated general notice* and a *premium assistance extension notice*. (A third notice – an updated alternative notice – is for use by health insurance issuers that provide continuation coverage pursuant to state law.) Each of these two model notices raises issues for employers and, for most, are not usable unless significantly modified.

UPDATED GENERAL NOTICE In addition to explaining the COBRA subsidy as it is now in effect, this model notice offers the recipient an opportunity to elect COBRA coverage. It states that it is intended “for qualified beneficiaries who have not yet received an election notice and with qualifying events occurring during the period that begins with September 1, 2008 and ends with February 28, 2010.” This sounds to many employers like they will be offering a second chance to elect COBRA to everyone who has had a qualifying event since September 1, 2008. The DOL, however, puts a lot of emphasis on the words “have not yet received an election notice.”

- Prospectively, an employer would provide this notice to all qualified beneficiaries who had not yet been offered COBRA through any election notice. This notice would be provided at the time that the individual's election notice was due. Like previous COBRA subsidy notices, it would go to all qualified beneficiaries, including those who were not covered employees and those whose qualifying event was not termination of employment.
- An employer would also provide this notice to individuals who previously were sent an election notice but may have been affected by the “last day glitch” described above. This group generally

includes individuals who had a termination of employment qualifying event on or before December 31, 2009, but whose active coverage continued through December 31, 2009 or later (e.g., employment terminated on December 10, 2009 but the plan provides for coverage to end on the last day of the month). The DOL reasons that these individuals' original election notices would have described the COBRA subsidy as it was in effect before December 19, 2009, indicating that they could not receive the subsidy. For these individuals, the employer is required to provide a new election notice and allow a new 60-day election period. These notices should be provided as soon as possible.

WILLIS' SAMPLE NOTICE FOR NEW QUALIFIED BENEFICIARIES The DOL's updated general notice is a revision of the "General Notice (full version)" that the DOL issued in April 2009 in connection with initial implementation of the COBRA subsidy, and it has substantially the same issues as that earlier model notice. (The issues raised by the model notices that the DOL issued last April are discussed in Willis' *Employee Benefits Alert, Vol. 2, No. 5, "COBRA Subsidy Guidance – More Clarity, More Complexity."* To assist employers in addressing these issues, Willis' NLRG has prepared a sample "snap-on" notice for employers to use with their regular COBRA election notice. Willis' "Sample Premium Reduction Supplement to Election Notices for New Qualified Beneficiaries" snaps onto an employer's normal (pre-COBRA subsidy) election notice and explains how the COBRA subsidy and the extension change the information in the election notice. An employer can use this sample snap-on together with the employer's normal election notice in place of the DOL's updated general notice.

The sample notice explains the required addressees and timing, but generally should only be used for qualified beneficiaries who were not provided any election notice previously. The second group identified above as addressees for the DOL's updated general notice are NOT appropriate recipients of Willis' "Sample Premium Reduction Supplement to Election Notices for New Qualified Beneficiaries."

PREMIUM ASSISTANCE EXTENSION NOTICE As with the updated general notice, this DOL model notice explains the COBRA subsidy as it is now in effect. It also explains which individuals are entitled to an extended grace period to pay premiums that became due during a transition period. The DOL intends this notice for several groups affected by the extension, including many who do not qualify for the extended grace period.

- The premium assistance extension notice should go to those "who were receiving premium assistance as of October 31, 2009." The DOL notes that this group includes "individuals who have received the full nine months of premium assistance...and either did not make any payment for subsequent periods of coverage, made payment of the 35% (or some other amount that is less than the full premium), or made payment of the full premium otherwise required to maintain coverage absent the subsidy."
- Those "who became Assistance Eligible Individuals...on or after October 31, 2009." This group includes an individual who was involuntarily terminated on October 15, 2009 and whose coverage continued through the end of the month, with COBRA coverage beginning on November 1, 2009.
- Those who "experienced a qualifying event that was the termination of a covered employee's employment on or after October 31, 2009 but who were not provided a notice that included [information about the COBRA subsidy and the extension]."

There is some overlap among these groups and the recipients of the updated general notice. For those who qualify to receive both notices, only the updated general notice (or its equivalent) should be provided. For all of these groups, the deadline for providing the premium assistance extension notice is February 17, 2010. EXCEPTION: For those who are entitled to make retroactive premium payments for periods of coverage beginning in 2009, the notice may be required earlier. In the case of a plan that administers COBRA on a

calendar-month basis, this notice will be required by February 1, 2010 for those who reached the end of the maximum nine-month COBRA subsidy period on November 30, 2009.

WILLIS' SAMPLE NOTICE FOR EXISTING QUALIFIED BENEFICIARIES As with the updated general notices, the premium assistance extension notice raises several issues for employers. Among other things, the notice does not clearly state that, except for the modifications noted, the terms of the election notice previously provided to the individual continue to apply to the individual's COBRA coverage. It also does not explain that those who have overpaid premiums during a transition period will receive a credit or refund. To assist employers in addressing these and other issues, Willis' NLRG has prepared a sample notice to use instead of the DOL's model premium assistance extension notice. The "Sample Premium Reduction Supplement to Election Notices for Existing Qualified Beneficiaries" explains the required addressees (including those who must be given a new election period as described above) and timing.

DISTRIBUTION OF NOTICES

Whatever notices an employer elects to use, distributing them by acceptable and documented means is crucial. The appropriate distribution measures for COBRA notices are discussed in Willis' *Employee Benefits Alert, Vol. 2, No. 5, "COBRA Subsidy Guidance – More Clarity, More Complexity"* and in Chapter 2 of the Willis online *Compliance Manual*.

MENTAL HEALTH PARITY REGULATIONS RELEASED

Highly anticipated regulatory guidance explaining the "Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008" (MHPA) has finally been published. Three federal agencies jointly issued interim final regulations, available at the following link: <http://edocket.access.gpo.gov/2010/pdf/2010-2167.pdf>

Major amendments to the MHPA were enacted in 2008 and are effective for plan years starting on or after October 3, 2009. Those MHPA changes – and some open issues requiring regulatory guidance – are described in Willis' *HR Focus*, Issue 14, "Mental Health Parity Act." It was hoped that regulations would be issued in time for employers to amend their plans before the amendments became effective, but the amendments are already effective for many employer-sponsored group health plans. This means that employers who made required plan changes to comply with the amendments this year may need to make another round of plan changes to implement the regulations. These new DOL regulations generally apply to group health plans for plan years beginning on or after July 1, 2010, so employers have some time to consider the rules and any required changes.

Willis' National Legal & Research Group is reviewing the new regulations and will provide analysis and suggested compliance strategies in a future publication.



IRS RELEASES HEART ACT GUIDANCE

Last month the IRS published Notice 2010-15, providing guidance on some provisions of the Heroes Earnings Assistance and Relief Tax (HEART) Act. (HEART legislation offered targeted tax relief for those in military service. We offer detailed analysis of the law in *HR FOCUS*, Issue 9, August 7, 2008.) The HEART Act provides tax and savings assistance for military veterans and their families and includes a number of other provisions affecting employer-sponsored benefits plans.

This guidance addresses, in question-and-answer format:

- Section 104 of the act, relating to survivor and disability payments with respect to qualified military service
- Section 105, relating to treatment of differential military pay as wages
- Section 107, relating to distributions from retirement plans to individuals called to active duty
- Section 109, relating to contributions of military death gratuities to Roth IRAs and Coverdell education savings accounts
- Section 111, relating to an employer credit for differential wage payments to employees who are active duty members of the uniformed services

The IRS has already provided guidance on the tax treatment of expatriates and guidance on flexible spending accounts under the HEART Act. The notice states that the IRS is considering issuing additional guidance related to the HEART Act and requests comments on such possible guidance before April 9, 2010.



DOL ISSUES MODEL EMPLOYER CHIP NOTICE

The Department of Labor recently published a model notice for employers to use to inform employees of potential opportunities for premium assistance for group health plan coverage in states in which they reside. The model can be used to satisfy the content requirements of the notice provisions of the Children's Health Insurance Program Reauthorization Act of 2009 (CHIPRA). (A detailed explanation of the new CHIPRA requirements was communicated in *HR FOCUS, Issue 22, April 2009*.)

Two of CHIPRA's key aims were 1) promoting the availability of health coverage for children and 2) maximizing government efficiency in funding those expenses through cost shifting. The government learned long ago that financial obligations for health coverage through Medicaid-type programs could be lessened by cost shifting to private sector plans where coverage is available. In some cases, it is significantly less expensive for the government to fund contributions to a private health plan than actually pay for someone's health coverage through a public program.

As a result, under CHIPRA, employers are required to notify each employee of potential opportunities available in their state of residence for premium assistance under Medicaid and the Children's Health Insurance Program (CHIP) for health coverage of the employee or the employee's dependents. Employers are required to inform employees of these potential opportunities beginning with the first plan year that begins after the date on which the initial model notices are first issued. According to the DOL, an employer may provide the Employer CHIP Notice as follows:

- Concurrent with the furnishing of materials notifying the employee of health plan eligibility
- Concurrent with materials provided to the employee in connection with open season (or other coverage election process under the plan)
- Concurrent with the furnishing of the Summary Plan Description (SPD) provided under ERISA

In addition to the Employer CHIP Notice requirement, CHIPRA also provides that, in order for states to evaluate an employment-based plan to determine whether premium assistance is a cost-effective way to provide medical or child health assistance to an individual, group health plans are required to provide, upon request, information about their benefits to state Medicaid or CHIP programs. The DOL also indicates that it is developing a model coverage coordination disclosure form that will be issued in the future. States may begin requesting this information from plans beginning with the first plan year after this model form is issued.

The deadline for comments on the model notice is April 5, 2010. The DOL is also requesting comments regarding compliance with the Employer CHIP Notice requirement for use in the development of future compliance assistance materials and regulations.

SINCE YOU ASKED:

CAFETERIA PLAN RULES AND A MISCARRIAGE

Willis received a cafeteria plan question concerning important aspects of the IRS's "irrevocable election" requirement. An employee was pregnant during the open enrollment period for the 2010 plan year. She made her cafeteria plan elections for 2010 assuming that she would have an additional child. Unfortunately, she miscarried (before 2010) and now wanted to change her cafeteria plan elections. Since open enrollment had closed, her employer was concerned about permitting the change to the elections under the cafeteria plan rules.

DISCUSSION

There are two issues here. First, a miscarriage is not a change in status that would permit a change in elections under a cafeteria plan. Although birth is a change-in-status event, a miscarriage is not. In hindsight, the employee should have waited until the birth of the child and THEN made changes. Not only would those changes be permitted, but, since a birth is a HIPAA special enrollment event, the employer would be required to permit the employee to change her elections.

A secondary issue relates to the assumption that, because the open enrollment period closed, the §125 plan rules would require a change in status in order to change the cafeteria plan election. That is not exactly the case.

The rules under §125 of the Code require that the elections be made and be irrevocable *before the beginning of the plan year*. The open enrollment period coincides with the beginning of the year, but not exactly. Just because the administrator of the plan "closed" the election period does not mean that the cafeteria plan rules make the elections irrevocable. The rules under §125 plan do not prohibit making changes in elections as long as the changes are made before the beginning of the year. Therefore, since the year had not yet started, even though the open enrollment period had closed, the plan could permit changes to elections during the time before the beginning of the year. In fact, many plans do permit changes during that period just to avoid potential problems after the commencement of the plan year.

We assumed in responding to this question that the open enrollment period was not actually set out in the plan document (they are not typically), so this ends up being more of an administrative matter. However, the IRS would not object to changing elections post open enrollment, but prior to the start of the plan year.

Although birth is a change-in-status event, a miscarriage is not. In hindsight, the employee should have waited until the birth of the child and THEN made changes. Not only would those changes be permitted, but, since a birth is a HIPAA special enrollment event, the employer would be required to permit the employee to change her elections.

WEBCASTS

2009 WELLNESS SURVEY FINDINGS

MARCH 16, 2010
2:00 PM EASTERN TIME

Presented by
Cheryl Mealey, CHES, Wellness Consulting National Practice Leader and Leah Fidler, MHPE, CHES Wellness Consultant

The 2009 Health and Productivity Survey was completed by more than 1,600 respondents representing a wide array of company size and industry segments. Join us for this informative webcast that will assist you in benchmarking your wellness initiatives against those of other organizations. Topics covered include:

- Building a culture of health
- Senior leadership support
- Use of incentives
- Measuring return-on-investment
- Program components
- and more...discover “lessons learned” and best practices that you can apply to your own program

Participant Access

Advance reservations are required to participate. [Click here](#) to RSVP for this call.

EFFECTIVELY COMMUNICATING WELLNESS PROGRAMS

APRIL 20, 2010
2:00 PM EASTERN TIME

Presented by
Ame McClune, Director, Marketing and Client Communications

So you’ve finally got a budget to create a wellness program. Now what? How do you communicate the program? How do you engage employees and make them want to participate?

Join us for this webcast as we uncover the most effective ways to communicate your wellness program. We’ll discuss strategies to entice your employees and ramp up participation in your wellness program. Communicating your wellness program may be easier than you think, but it does require consistency, branding and accurate information. Some of the topics we will cover include:

- Developing a cohesive branded look for your wellness program
- Maintaining consistent messaging
- What an effective year-round communication strategy looks like
- Ways to effectively integrate different communication mediums

Participant Access

Advance reservations are required to participate. [Click here](#) to RSVP for this call.



KEY CONTACTS

US BENEFITS OFFICE LOCATIONS

NEW ENGLAND

Auburn, ME
207 783 2211

Bangor, ME
207 942 4671

Boston, MA
617 437 6900

Hartford, CT
860 756 7365

Manchester, NH
603 627 9583

Portland, ME
207 553 2131

Shelton, CT
203 924 2994

NORTHEAST

Buffalo, NY
716 856 1100

Cranford, NJ
908 931 3005

Florham Park, NJ
973 410 4622

Morristown, NJ
973 829 6374
973 829 6465

New York, NY
212 915 8802

Norwalk, CT
203 523 0501

Philadelphia, PA
610 260 4351

Radnor, PA
610 254 7289

Wilmington, DE
302 397 0171

ATLANTIC

Baltimore, MD
410 584 7528

Bethesda, MD
301 581 4261

Knoxville, TN
865 588 8101

Memphis, TN
901 248 3103

Nashville, TN
615 872 3716

Norfolk, VA
757 628 2303

Reston, VA
703 435 7078

Richmond, VA
804 527 2343

Rockville, MD
301 692 3025

SOUTHEAST

Atlanta, GA
404 224 5000

Birmingham, AL
205 871 3300

Charlotte, NC
704 344 4856

Gainesville, FL
352 378 2511

Greenville, SC
704 344 4856

Jacksonville, FL
904 355 4600

Marietta, GA
770 425 6700

Miami, FL
305 421 6208

Mobile, AL
251 544 0212

Orlando, FL
352 378 2511

Raleigh, NC
704 344 4856

Savannah, GA
912 239 9047

Tallahassee, FL
850 385 3636

Tampa, FL
813 490 6808
813 289 7996

Vero Beach, FL
772 469 2842

MIDWEST

Appleton, WI
414 259 8837

Chicago, IL
312 527 6482
312 621 4843
312 621 4704

Cleveland, OH
216 357 5921

Columbus, OH
614 326 4788

East Lansing, MI
517 349 3226

Grand Rapids, MI
248 735 7249

Green Bay, WI
414 259 8837

Milwaukee, WI
414 203 5248
414 259 8837

Minneapolis, MN
763 302 7131
763 302 7209

Moline, IL
309 764 9666

Pittsburgh, PA
412 645 8537
412 586 3524

Schaumburg, IL
847 517 3469

SOUTH CENTRAL

Amarillo, TX
806 376 4761

Austin, TX
512 651 1660

Dallas, TX
972 715 2194
972 715 6272

Denver, CO
303 765 1564
303 773 1373

Houston, TX
281 584 1672
281 584 1676
713 625 1017

McAllen, TX
956 682 9423

Mills, WY
307 266 6568

New Orleans, LA
504 581 6151

Oklahoma City, OK
405 232 0651

Overland Park, KS
913 339 0800

San Antonio, TX
210 979 7470

Wichita, KS
316 263 3211

WESTERN

Fresno, CA
559 256 6212

Irvine, CA
949 885 1200

Las Vegas, NV
602 787 6235
602 787 6078

Los Angeles, CA
213 607 6300

Novato, CA
415 493 5210

Phoenix, AZ
602 787 6235
602 787 6078

Portland, OR
503 274 6224

Rancho/Irvine, CA
562 435 2259

San Diego, CA
858 535 1800
858 678 2130

San Francisco, CA
415 291 1567

San Jose, CA
408 436 7000

Seattle, WA
800 456 1415

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