

Simsbury Public Schools Open Enrollment Information 2021



L O C K T O N C O M P A N I E S

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Agenda

- Annual Open Enrollment Period
- Summary of Enrollments
- ✤ Overview of 2021-2022 Allocation Rates
- Employee Cost Share Review
- High Deductible Health Plan/Health Savings Plan (HDHP / HSA) Outline
- Health Reimbursement Arrangement (HRA's)
- Resources
- Summary



COVID-19: Reminders

CIGNA COVERAGE & INFORMATION

- Customers who visit an in-network doctor or those accessing telehealth services for a COVID-19 test-related screening will be covered at no cost to the customer through July 31, 2021.
- Cigna also eliminated patient out-of-pocket costs for the diagnostic testing, when it's recommended by a physician.
- For questions about benefits and coverage, customers should visit <u>my.cigna.com</u> or call the toll-free number on the back of their insurance card for one-on-one direct access to assistance any time day or night.
- Through July 31, 2020, Cigna covers COVID-19 test-related screenings with telehealth services at no cost to the customer for screening of COVID-19 symptoms. To access telehealth options online, visit <u>my.cigna.com</u> and select the "Connect Now" button on the home page.
- Cigna is providing resources free of charge for all customers, clients, and communities to support resiliency during times of high stress and anxiety. The company opened a COVID-19
 Support Line 855.287.8400 to connect people directly with qualified clinicians who can provide support and guidance.



If you have additional questions about COVID-19, please visit the <u>CDC website</u> for the most up-to-date information

MYCIGNA.COM

Your online home for assessment tools, plan management, medical updates and much more

- Find in-network doctors and medical services.
- View ID card information and review your coverage.
- Track your account balances and deductibles.
- Order refills or talk with a pharmacist at Express Scripts PharmacySM.
- Use our Prescription Drug Price Quote tool to compare real-time drug pricing specific to your plan.
- Compare cost and quality information for doctors and hospitals.
- Access a variety of health and wellness tools and resources.



Download the myCignaSM app and access your account with just a fingerprint on any compatible device.*



*Please refer to your phone's manufacturer for your phone's specific capabilities. The downloading and use of the myCigna app is subject to the terms and conditions of the App and the online stores from which it is downloaded. Standard mobile phone carrier and data usage charges apply. Actual myCigna features may vary depending on your plan and individual security profile.



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VIRTUAL CARE Makes it simple.

EASY ACCESS

When 24/7/365, including holidays and weekends for medical. Appointments scheduled in minutes for behavioral care.

Where at home, at work or on the go.

How via video or phone.

Who adult and pediatric care for medical. Adults 18+ for behavioral.

Why care for minor medical conditions and behavioral/mental health needs.

QUALITY

Board certified doctors, pediatricians and licensed therapists and psychiatrists.

COST EFFECTIVE

Medical virtual care for minor conditions costs less than an ER or urgent care center visit, and maybe even less than an in office primary care provider visit.

CONVENIENT Prescriptions sent directly to a local pharmacy, if appropriate.

*Provided by MDLIVE

Provided by MDLIVE. *Costs vary based on plan design and are subject to mental health parity.

EASY-TO-ACCESS SERVICE OPTIONS.

Get an appointment on demand or schedule one online at myCigna.com

Or contact MDLIVE[®] by phone at 888.726.3171*

Also still available:

Virtual medical visits through Cigna's in-network providers and virtual counseling through Cigna Behavioral Health network

- MDLIVE Virtual Care contract rate is \$55**
- Cigna Behavioral Health provider's rate are based on contracted fees and may vary based on provider.

*Cigna provides access to virtual care through national telehealth providers as part of your plan. Providers are solely responsible for any treatment provided to their patients. Video chat may not be available in all areas or with all providers. This service is separate from your health plan's network and may not be available in all areas. A primary care provider referral is not required for this service.

**Rates subject to change year over year.

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CONDITIONS TREATED BY LICENSED AND CERTIFIED PROVIDERS.

VIRTUAL MINOR MEDICAL CARE

- Acne
- Allergies
- Asthma
- Bronchitis
- Cold and flu
- Constipation
- Diarrhea
- Earaches
- Fever
- Headaches

- Infections
- Insect bites
- Joint aches
- Nausea
- Pink eye
- Rashes
- Respiratory infections
- Shingles
- Sinus infections
 Skin infections

- infe
- Sore throats

Urinary tract infections

VIRTUAL BEHAVIORAL CARE

- Addictions
- Bipolar disorders Eating
- Child/Adolescent
 issues
- Depression Eating
- disorders

 Grief/Loss
- Life changes
- Men's issues
- Panic
 - disorders
- Parenting issues

- Postpartum depression
- Relationship and marriage issues
- Stress
- Trauma/PTSD
- Women's issues

VIRTUAL WELLNESS SCREENINGS



WHEN LEAVING THE HOUSE IS EASIER SAID THAN DONE.

Get care whenever and wherever with medical and behavioral/mental health virtual care.

Life is demanding. It's hard to find time to take care of yourself and your family members as it is, never mind when one of you isn't feeling well. That's why your health plan through Cigna includes access to medical and behavioral/ mental health virtual care.

Whether it's late at night and your doctor or therapist isn't available, or you just don't have the time or energy to leave the house, you can:

- > Access care from anywhere via video or phone.
- Get medical virtual care 24/7/365 even on weekends and holidays.
- Schedule a behavioral/mental health virtual care appointment online in minutes.
- Connect with quality board-certified doctors and pediatricians, as well as licensed counselors and psychiatrists.
- Have a prescription sent directly to your local pharmacy, if appropriate.

Convenient? Yes. Costly? No.

Medical virtual care for minor conditions costs less than ER or urgent care center visits, and maybe even less than an in-office primary care provider visit.

Medical virtual care

Board-certified doctors and pediatricians can diagnose, treat and prescribe most medications for minor medical conditions, such as:

Joint aches

Respiratory

Infections

Sinus infections

> Skin infections

> Sore throats

Urinary tract.

infections

Nausea

Pink eve

Shingles

> Rashes

- Acne
- Allergies
- Asthma
- Bronchitis

3

- Cold and flu
- Constipation
- Diarrhea
 Earaches
- Fever
- Headache
- Infections
- Insect bites

You have options.

MDLIVE - medical and behavioral/mental health virtual care. 888.726.3171

Cigna Behavioral Health also provides access to video-based counseling through Cigna's network of providers. To find a provider:

- Visit myCigna.com, go to "Find Care & Costs" and enter "Virtual counselor" under "Doctor by Type"
- Call the number on the back of your Cigna ID card 24/7

Behavioral/mental health virtual care

Licensed counselors and psychiatrists can diagnose, treat and prescribe most medications for nonemergency behavioral/mental health conditions, such as:

> Addictions

Child/adolescent

Eating disorders

Issues

> Depression

> Grief/loss

Life changes

> Men's issues

> Panic disorders

Parenting Issues

- > Bipolar disorders depression
 - Relationship and marriage issues

Postpartum

- Stress
- Trauma/PTSD
- Women's Issues

To talk to a doctor, or schedule an appointment online, go to myCigna.com.



CIGNA'S YOUR HEALTH FIRST® PROGRAM PROVIDES WHOLE PERSON SUPPORT – BODY AND MIND.

Cigna health coaches can help you navigate the challenges of living with chronic conditions

Coaches are trained to support 16 common conditions that can be impacted by behavioral change

- Asthma
- Coronary artery disease (CAD), angina, acute myocardial infarction (AMI), heart disease
- Heart failure
- Chronic obstructive pulmonary disease (COPD)
- Diabetes I and II
- Metabolic syndrome
- Peripheral arterial disease
- Low back pain
- Osteoarthritis
- Depression, anxiety, bipolar disorder

Cigna chronic care coaches are trained to:

- Provide support for co-occurring conditions
- Engage and educate through a range of online tools and evidence-based resources

Evidence-based health coaching

Helps you:

- Create plans to achieve your goals
- Maintain compliance with your plan
- Adhere to medications as needed



Important changes you need to know about.

- > Use the new ID card you'll get in the mail. It has important information on it the pharmacy needs to access your benefits and process your prescription.
- > Your next refill date may be different from what's listed on your current pill bottle. The date will now be based on the timing of your last few fills.
- Accredo is our new specialty pharmacy for those managing a complex medical condition that requires a specialty medication.

Express Scripts Pharmacy is our new home delivery pharmacy.

- See "Express Scripts" on your pill bottles/order materials.
- Express Scripts Pharmacy will contact you (phone calls, emails and texts*) about your order.
- > You'll need to update your payment information.
- Continue to use myCigna app or website to manage your home delivery prescriptions – you'll be connected to Express Scripts' website.
- > Sign up for automatic refills and/or auto renewals.
- You can't order home delivery prescriptions online or by phone on July 1 <u>only</u>.

* You can sign up to get emails and/or texts from Express Scripts Pharmacy. To get text messages, you'll have to sign up for Express Scripts' texting service. You can do this online or when you call 800.835.3784 to refill your prescription. Once you sign up, simply reply to their welcome text to get started. Standard text messaging rates apply.

Vision

• New! Effective 7/1/21 a voluntary vision plan will be offered through EyeMed.

EyeMed Plan Design Highlights	In Network Member Cost	Out of Network Member Reimbursement
Exam	\$10 copay	Up to \$40
Frame	20% of balance over \$130 allowance	Up to \$91
Contact Lenses: Disposable	100% of balance over \$130 allowance	Up to \$91
Contact Lenses: Medically Necessary	\$0 copay; paid-in-full	Up to \$210
Single Vision	\$20 copay	Up to \$30
Bifocal	\$20 copay	Up to \$50
Trifocal	\$20 copay	Up to \$70

Vision

- Participants enrolled in HDHP plans will now be enrolled in an Exam Only Plan through Cigna effective 7/1/21.
- Members enrolled in the Exam Only Plan will receive a new vision ID card from Cigna.

Coverage	Benefit	Frequency Period
Exam Copay (once per frequency period)	\$0	12 Months**
** Your Frequency Period begins on the 1st of your plan renewal month (Contract year basis)		
If you use other discounts and/or promotions instead of this vision coverage, or go to an out-of-network eye care professional, you may file an out-of-network claim to be reimbursed for allowable expenses.		

In-Network Coverage Includes***:

One vision and eye health evaluation including but not limited to eye health examination, dilation, refraction, and prescription for glasses.

*** Coverage may vary at participating discount retail and membership club optical locations, please contact Customer Service for specific coverage information.



Open Enrollment

May 10th through May 28th

- All Open Enrollment Change forms must be submitted to BOE Benefits Office by June 1st
- Effective Date for all changes is July 1, 2021
- SEA employees that are currently in the HDHP plan cannot switch to another plan as per contract language
- Employees may add family members to their plan that were not previously covered
- Other union and non-union employees may switch between plan options as per associated agreement allows
- Enrollment forms are located on SPS website
 - http://www.simsbury.k12.ct.us/district/human-resources/employee-benefits
- Employees that are not making a change do not need to complete an Enrollment/Change form



Overview of 2021 – 2022 Allocation Rates

- Allocation rates remained the same from 2020-2021
 - ► PPO 0% Increase
 - > HMO 0% Increase
 - >HDHP 0% Increase
- MetLife Dental Plan design remains the same and an overall 1.9% increase in dental plan allocation rates
- Allocation Rate Sheets are available during the informational sessions and are also listed on our website
 - http://www.simsbury.k12.ct.us/district/human-resources/employee-benefits



Annual BOE / Employee Cost Share Agreement

- In some plans / agreements there is a fixed percentage Cost-Share split between BOE and Employee for the cost of insurance.
- Groups that have a "Buy-Up" Option for the HMO and PPO plans, the Cost Share is different
 - **BOE** Annual Cost is Fixed across all 3 Plan Options
 - **BOE** Annual Cost is equal to the BOE Percentage Cost-Share of the HDHP
 Plus the BOE deposit to the HSA
 - Employee Annual Cost is the Balance that remains after the BOE Fixed amount is applied
- Employees pay more to "Buy-up" when they choose the HMO or PPO plan options



High Deductible Health Plan (HDHP) with Health Savings Account (HSA) Overview

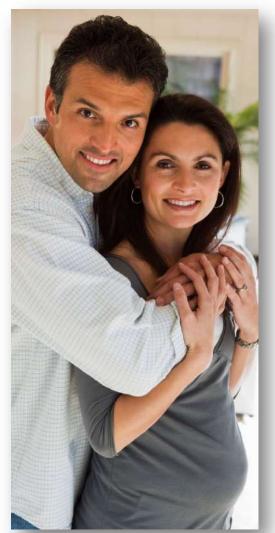
- A medical/prescription plan with an up-front deductible that is applicable to all eligible medical and pharmacy expenses with the exception of preventive care. Preventive care is always covered at 100% in network.
- High deductible health plans (HDHPs) can be combined with a Health Savings Account (HSA) if you meet the eligibility requirements.
- The HDHP/HSA administered by Cigna uses the same network as the PPO Plan and covers all the same services.





How Does a High Deductible Health Plan Work??

- You pay first-dollar "up front" costs for all medical services and prescriptions until you meet your annual deductible.
- Once the deductible is met, medical expenses are covered at 100% in-network (80% of R&C out-of-network) and pharmacy expenses require applicable copays, until you reach your annual Out of Pocket Maximum, after which the plan pays 100% of eligible expenses.
- Preventive care is always covered at 100% in-network.
- Utilizes the same Cigna National Network.
- Employees who enroll in this plan are eligible to participate in a Health Savings Account (HSA)
 - Certain exceptions may apply





What is the deductible amount under the HDHP?

Individual	Family
\$2,000	\$4,000

- The deductible is the annual amount that each individual, two-person or family must meet for medical and pharmacy expenses.
- Family deductible is defined employee plus one or more dependents covered under the medical plan.
- ✤ The deductible resets every July 1^{st} .





What is a Health Savings Account (HSA)?

- A savings account used in conjunction with a high-deductible health insurance policy that allows users to save money <u>tax-free</u> against qualified out of pocket medical/dental/vision expenses.
- A tax-favored individual bank account that <u>you</u> own.





How much of the deductible am I responsible for?

The Board of Education will make a deposit into your Health Savings Account (HSA) as follows:

Individual	Family
\$1,000	\$2,000

- ✤ The BOE will deposit 50% in July and 50% in January
- Additional tax free deposits can be made into the HSA through a voluntary payroll deduction.
- Premium contribution amounts for the HDHP will be lower, increasing take home pay



What happens after the deductible is met?

- Once your deductible has been met:
- Medical services are covered 100% by the plan in network.
- Prescription drugs will have a 3-tier copay structure apply
 - > Generic: \$5
 - > Preferred brand: \$30
 - > Non-preferred brand: \$45
 - > Mail order: 2x retail
- ✤ Some groups are still under negotiation





2021 High Deductible Health Plan Summary

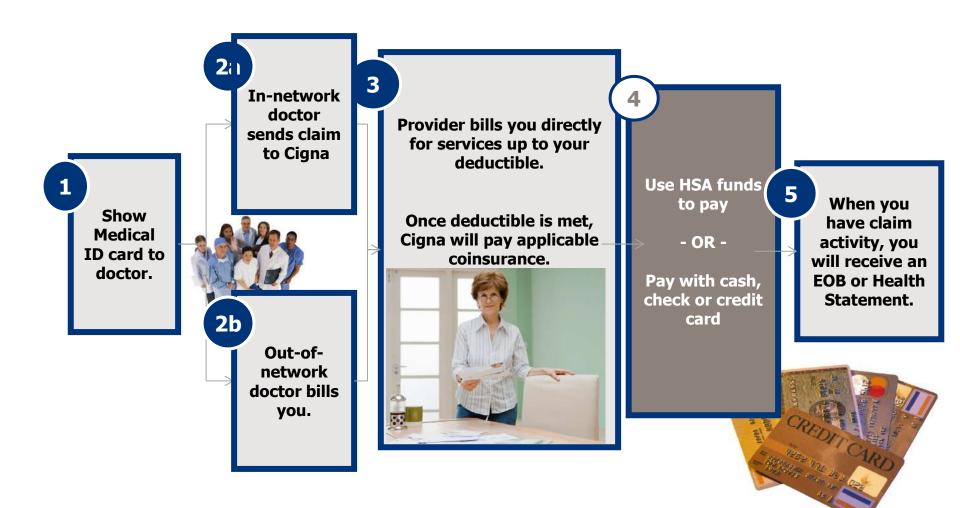
Benefit Provision	Member 's Responsibility
Annual Deductible	\$2,000/\$4,000 (Combined In and Out-of-Network)
Employer HSA Deposit	(\$1,000/\$2,000)
Employee Net Deductible Responsibility	\$1,000/\$2,000
Annual Out-of-Pocket Maximum	\$3,000/\$6,000 (In-Network)
In-Network Benefits:	
Preventive Care Visit	No charge
Primary Care Office Visit Copay	0% after deductible
Specialist Office Visit Copay	0% after deductible
Urgent Care Copay	0% after deductible
Emergency Room Copay	0% after deductible
Inpatient Admission Copay	0% after deductible
Out-of-Network Benefits	20% after deductible
Prescription Drugs: Retail (30 days)	\$5/\$30/\$45 after deductible
Prescription Drugs: Mail Order (90 days)	\$10/\$60/\$90 after deductible



How does the HSA work?

- Employee decides how and when to use the money.
- You may reimburse yourself for any qualified expenses incurred <u>after</u> the date you open your account.
- You are responsible for ownership and administration of an HSA
 - Any money deposited by the Board on your behalf becomes yours as soon as it is placed in the account
- Record Keeping is important to avoid potential penalties
 - Hold on to all explanation of benefits and receipts as documentation for any monies withdrawn from the account
 - > Avoids penalties of ordinary income tax and 20% excise penalty if audited by IRS
 - Over age 65; excise penalty goes away and only ordinary income tax penalty would apply

What Happens When I Go to a Doctor or Facility?





What Happens When I Go to the Pharmacy?





What are the advantages of a Health Savings Account?

- You own the account not your employer
- Your HSA is PORTABLE and follows you if you retire or change employers.
- HSA Account Rollover/Fund Maximum
 - > Both the contributions and earnings in an HSA carry over from year to year
 - > No "use it or lose it" feature
 - > No overall fund maximum
- HSA Tax Savings Features:
 - > Pre-tax contributions along with tax-free growth of earnings
 - > Payment for services made with pre-tax dollars
 - Note: Withdrawals for non-qualified expenses taxed as ordinary income and subject to 20% excise penalty (no penalty starting at age 65)
- You can only contribute to an HSA if you are enrolled in a qualifying HDHP.



What is the maximum I can contribute annually to the HSA?

The IRS has set the following limits for 2021:

- > Under age 55 and not enrolled in Medicare
 - ♦ Up to \$3,600 for individual coverage
 - Up to \$7,200 for family coverage
- > Age 55 or older:
 - Allowed a \$1,000 "catch-up" contribution
 - Up to \$4,600 for individual coverage
 - Up to \$8,200 for family coverage

These limitations include any and all sources of contribution. Deposits made by the Board of Education will lower these limitations by \$1,000 for individual coverage and \$2,000 for family coverage.



Am I Eligible to Open an HSA?

- You are eligible to open an HSA as long as:
 - > You are not covered by other health insurance
 - Your spouse is not enrolled in a non-tax-qualified medical plan, FSA or HRA
 - > You are not enrolled in the FSA
 - > You are not enrolled in Medicare
 - You cannot be claimed as a dependent on someone else's tax return
 - Important: If you open an HSA, you are **NOT** eligible to participate in the Medical Flexible Spending Account (FSA) program. (You can still be enrolled in the Flexible Dependent Care Account.)





What Can I Spend My HSA Funds On?

- HSA Funds can be used for qualified and non-qualified medical expenses.
- Funds you withdraw for nonqualified expenses are included as income and are subject to income taxes and an additional 20% penalty.
- A list of these expenses is available on the IRS Web site, www.irs.gov in IRS Publication 502, "Medical and Dental Expenses."



Publication 502

Medical and Dental Expenses

(Including the Health Coverage Tax Credit)

For use in preparing 2019 Returns



Jan 21, 2020

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Future Developments

For the latest information about developments related to Pub. 502, such as legislation enacted after it was published, go to <u>IRS.gov/Pub502</u>.

What's New

Standard mileage rate. The standard mileage rate allowed for operating expenses for a car when you use it for medical reasons is 20 cents a mile. See <u>Transportation</u> under What Medical Expenses Are Includible, later.

Reminders

Photographs of missing children. The IRS is a proud partner with the National Center for Missing & Exploited Children@ (NCMEC). Photographs of missing children selected by the Center may appear in this publication on pages that would otherwise be blank. You can help bring these children home by looking at the photographs and calling 800-THE-LOST (800-843-5678) if you recognize a child.



Qualified Medical Expenses

You can use your HSA to pay for qualified medical expenses for you, your spouse and your dependents.

IRS Publication 969 explains that qualified medical expenses are those that would generally qualify for the medical and dental expenses deduction, as listed in IRS Publication 502. Examples are listed below.

 Doctor's office visits (non-preventive care) Dental care and braces Eyeglasses, contacts and LASIK surgery Prescription medications Acupuncture Chiropractic services 	 Hearing aids (including batteries) Long-term care medical expenses and insurance premiums Stop-smoking programs Physical therapy Psychiatric care Psychological counseling Nursing home care
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Examples of Nonqualified Medical Expenses If you use your HSA to pay for nonqualified expenses, you'll have to pay income taxes on those funds. You will also be assessed a 20% penalty. Following are examples:

•Over-the-counter drugs (unless prescribed by a doctor) •Premiums (in most situations; see exceptions below)	•Child care for a healthy baby •Funeral expenses
•Advance payment for future medical care	•Health club dues
• •	
 Amounts reimbursed from another source, such as a 	Maternity clothes
health plan or FSA	•Toiletries
 Cosmetic surgery (unless due to trauma or disease) 	•Swimming lessons
	•Weight loss programs not prescribed to treat a specific
	disease

Exceptions Generally, you can't use your HSA to pay for health insurance premiums. But there are exceptions. You can use your HSA for health plan premiums if: You are receiving federal or state unemployment benefits. You have COBRA continuation coverage. You have eligible long-term care insurance. You are enrolled in Medicare.

Filing Taxes with a Health Savings Account

Tax Forms for HSA

- IRS Form 8889, downloaded from <u>www.irs.gov</u>, should be attached to your Form 1040. Employers report all contributions to the Health Savings Account in Box 12 of Form W-2 with Code W. Employee contributions made via payroll are also included in Box 12, Code W.
- To complete Form 8889, employees use their W-2, and their annual HSA contribution totals from their last paystub of the year.

The HSA Bank will send additional records to you and the IRS:

- If you used any HSA funds during the year, IRS Form 1099-SA will be mailed to your home address by the Bank by January 31st (Details annual <u>distributions</u>)
- IRS Form 5498-SA, mailed by the Bank by May 31st (Details annual contributions).

Note: Form 5498-SA encompasses all contributions made for the prior calendar year until the tax filing deadline. It is always sent to employees after the filing deadline has already passed .



Health Reimbursement Arrangement

Health Reimbursement Arrangement (HRA) is available to Employees Enrolled in the HDHP who may not participate in the HSA (example – employees enrolled in Medicare)

□ HRA (Arrangement) – Promise to Pay

- No physical Account created
- No deposits by Plan Sponsor <u>or</u> Member
- Not Portable
- May be used for <u>Covered</u> Medical Expenses
- Provider payments are part of Claim Payment System
- HSA Account Actual Bank Account
 - Owned by Member
 - Deposits made by Plan Sponsor/Member
 - Balances are Portable
 - May be used for <u>Qualified</u> Medical Expenses
 - Provider payments managed by Member



What resources are available to me?

- When covered under an HDHP, the upfront deductible places more financially responsibility on you as the consumer.
- ✤ Cigna's member portal
 - Cost Estimator Tools
 - > Find a network provider/facility
 - > Explanations of Benefits & Claim History
 - Deductible & Out of Pocket Tracking
 - Manage your prescriptions
- Nurseline
- Talk with your doctor
 - Alternative treatment options that may be less costly (i.e. would an x-ray be just as effective as an MRI)
 - > Discussion of generic versus brand medications



How Can I Make The Most of My Money?

- Stay within the local or national network to reduce out-of-pocket costs:
 - Take advantage of your health plan's pre-negotiated discounts by choosing providers who participate in your plan's network. When going to the pharmacy, choose a network pharmacy.
- ✤ Get informed:
 - Review your explanation of benefits (EOB)
 - Research costs

> www.goodrx.com

- Look for less expensive care (i.e. CVS Minute Clinics, Walmart or Target drug discount programs)
- Buy generic:
 - > Many commonly prescribed medications have generic equivalents
- Shop by mail:
 - > Save money by ordering your prescription through a mail-order program.



Summary

- ✤ Open Enrollment Period May 10th May 28th
 - > All Change Forms need to be sent to Benefits Office by June 1st
 - > Effective date for changes is July 1st
 - > No forms submitted if not making any changes.
- Allocation Rates
 - > Rates Sheets and Enrollment Forms can be found on our website
- Employee Cost Share & Benefit Changes
- ✤ HDHP/HSA BOE deposit for 2021-22 will be:
 - > \$1,000 for Individual Coverage
 - > \$2,000 for Family Coverage
 - Made in 2 deposits (July & January)
- HRA Option available for Medicare enrolled employees
- Contact Terri Heintz or Jennifer Murphy for additional information or questions
 <u>theintz@simsburyschools.net</u> or <u>jmurphy@simsburyschools</u>.net



Our Mission

To be the worldwide value and service leader in insurance brokerage, employee benefits, and risk management

Our Goal

To be the best place to do business and to work



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