



2009 ANNUAL REPORT



**BUILDING** on Success

COMING  
FACE TO FACE  
WITH  
TODAY'S ISSUES

**POSITIONING** for the Future

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## WHO IS PITTSBURGH BUSINESS GROUP ON HEALTH?

The Pittsburgh Business Group on Health (PBGH) is a non-profit, employer-led coalition of large, mid-size and small employers representing various business segments including private, public and academia.

Together, PBGH members represent more than 60 organizations; more than 800,000 employees, dependents and retirees; and more than \$4 billion in health care costs.

PBGH and its members advocate value and innovation in health care with a focus on delivery, cost and quality. To do this, PBGH implements and supports quality initiatives, analyzes health care data and resources, and provides forums for the exchange of ideas and viewpoints.

PBGH is a member of the National Business Coalition on Health (NBCH), an organization providing expertise, resources and a voice to nearly 60 coalitions across the United States. NBCH serves as a resource, clearing-house and information center linking coalitions and the 7,000 employers (25 million employees, retirees and dependents) they represent.

## LETTER FROM THE PRESIDENT AND EXECUTIVE DIRECTOR

Last year was challenging on multiple fronts. The economy took its toll resulting in a number of employers restructuring their workforces as a way to ease stress on the bottom line. Others looked to offset poor economic conditions with changes to their employee benefit packages, asking employees to share more of the cost burden or to take greater responsibility for their own health to mitigate costs. Others considered some combination of the two.

The promise of health care reform hung heavy. With no clear answers, speculation was high among employers as to whether it could truly reign in the ever-rising cost of health care. Many employers wondered how their ability to provide employee benefits would be affected.

Understanding the tumultuous environment of 2009, PBGH responded with a valuable breadth and depth of new programs and services to help its members address cost management, wellness and reform issues. We continued to build on and strengthen many of our existing programs. By promoting quality and cost-effective health care and benefits for employees, dependents and retirees, the coalition strives to position our members for future success through new and innovative ways.

Cornerstones of our cost management programs, the Prescription Drug and Health Care Programs continued to build on past success for members enrolled in them. In 2009, PBGH negotiated a favorable three-year agreement with CVS Caremark to administer the program, resulting in an estimated \$55 million savings in prescription drug costs over the contract's three year term across the participating PBGH employer members.

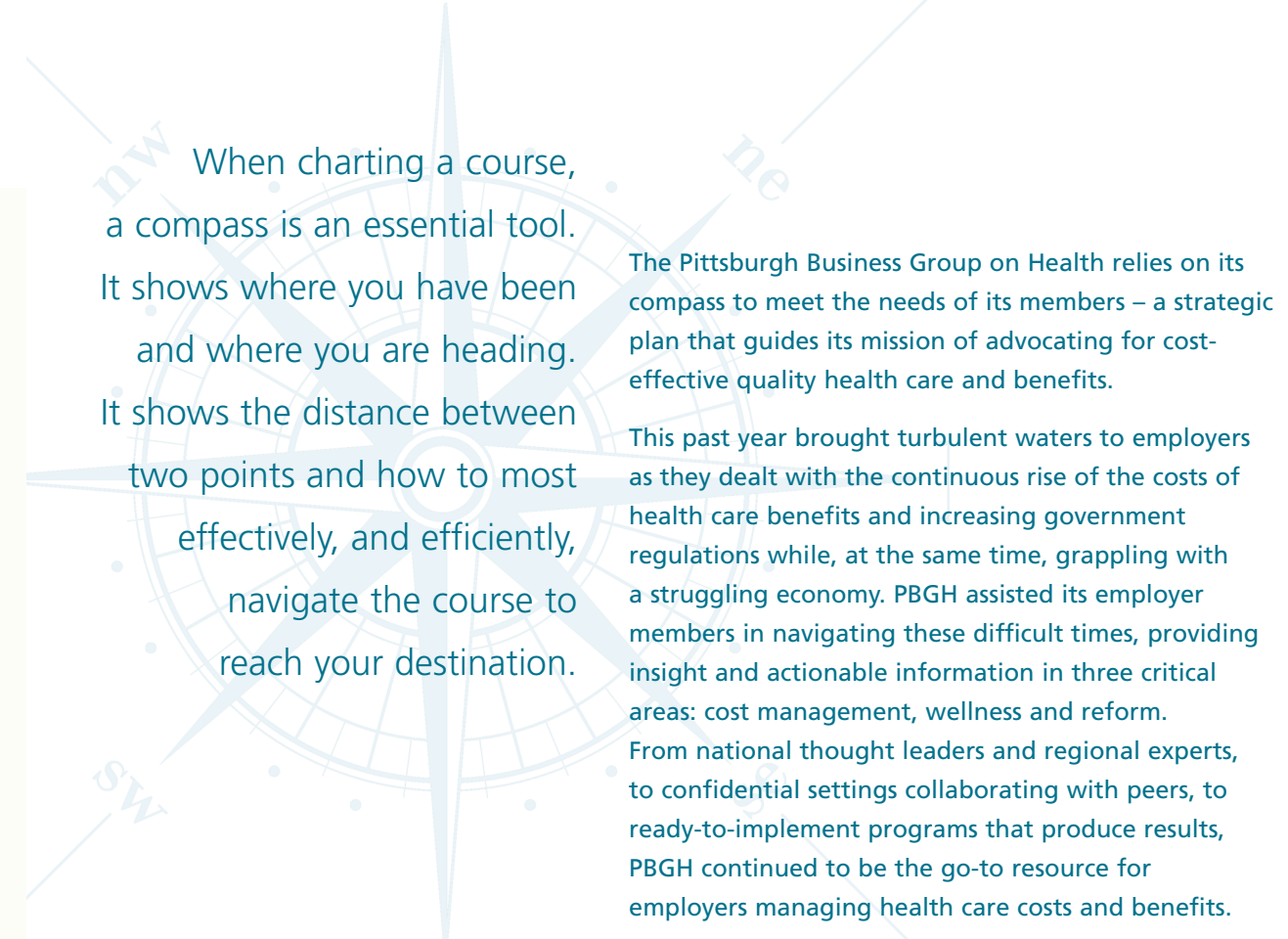
Our newest services – medical claims and dependent eligibility auditing, biometric screenings and health risk assessments – are already positioning our members for future success as they continue to look for ways to better manage their costs and the health of their population.

In 2009, PBGH retained its position as a conduit to innovative thinking and top regional and national thought leadership. Nearly 300 people attended the 10th Annual Health Care Symposium, "Engagement: Employees, Employers, Providers." From one employer's wellness journey – complete with demonstrated ROI – to an enlightening discussion about payment and delivery reform and the role of employers, the symposium brought together experts and insight unmatched in other similar settings.

Even as change and uncertainty continue to dominate the headlines throughout 2010, PBGH remains well positioned to continue in its role as employer advocate. As our members come face to face with today's issues of health care reform, uncertain economic times and the rising cost of providing quality employee benefits, they can be certain PBGH will continue to build programs that position them for future success.

  
DONNA J. FRISCH  
PBGH President  
Senior Manager, Health & Welfare Plans  
H.J. Heinz Company

  
M. CHRISTINE WHIPPLE  
PBGH Executive Director



When charting a course,  
a compass is an essential tool.  
It shows where you have been  
and where you are heading.  
It shows the distance between  
two points and how to most  
effectively, and efficiently,  
navigate the course to  
reach your destination.

The Pittsburgh Business Group on Health relies on its compass to meet the needs of its members – a strategic plan that guides its mission of advocating for cost-effective quality health care and benefits.

This past year brought turbulent waters to employers as they dealt with the continuous rise of the costs of health care benefits and increasing government regulations while, at the same time, grappling with a struggling economy. PBGH assisted its employer members in navigating these difficult times, providing insight and actionable information in three critical areas: cost management, wellness and reform.

From national thought leaders and regional experts, to confidential settings collaborating with peers, to ready-to-implement programs that produce results, PBGH continued to be the go-to resource for employers managing health care costs and benefits.

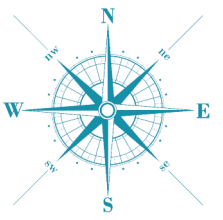
In 2009, PBGH, focusing on key issues, offered relevant and pertinent programs that built on the value and support members have come to expect and positioned the coalition to meet the future needs of members in a rapidly changing health care and benefits world.

### BUILDING on Success

COMING  
FACE TO FACE  
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TODAY'S ISSUES

POSITIONING for the Future

# COST MANAGEMENT



Managing and reducing costs are top objectives for most employers.

PBGH helps its members achieve these objectives through the power of numbers and information. By pooling its membership, PBGH takes advantage of aggregated lives across multiple employers to aggressively negotiate best-available price and service, as well as program and service performance guarantees. Yet being part of a larger group does not take away a member's ability to maintain its individuality. Employer members are still able to design their own benefit structures and develop strategies that best fit their organization's goals and objectives.

PBGH members participate in collaborative surveys that deliver valuable health plan and employee benefits data. The coalition continually provides its members with meaningful data that can be used to inform and assess their benefits decisions in comparison with regional and national benchmarks.

## BUILDING for Today

### Prescription Drug Program

PBGH's Prescription Drug Program is one of its most valuable group-purchasing programs. It provides members the option to purchase prescription drug benefits in a carved-out, self-insured arrangement with coalition discounts and enhanced services. Like many of PBGH's programs, it is flexible in that members can design a benefits plan that meets their goals and employees' needs.

Each year, the coalition also conducts and pays for an audit to validate the financial and performance guarantees for each participating employer. The audits include a financial and administrative review of all paid claims from more than 600 plans under the program. A benefit design option also offers employers the opportunity to assure claims are being paid according to their benefit plan structure. Each employer receives an individual report and a coalition benchmark report.

In 2009, PBGH negotiated a favorable three-year agreement with CVS Caremark to administer the program. The result will be an estimated \$55 million savings in prescription drug costs over the contract's three-year period across the participating PBGH employer members.

### Prescription Drug Program Users' Group Meetings

Employer members participated in semi-annual users' group meetings in 2009 to learn the latest industry trends, emerging strategies in managing prescription drug benefits, and experiences and successes of participating employer members.

### Health Care Program

In 2009, PBGH continued to offer employer members a self-insured option through Aetna that provides PPO, CDHP, HMO and retiree health care benefits. Using regional and national provider networks, enhanced reporting and performance guarantees, employer members keep costs in check by accessing a variety of care management strategies including member outreach and engagement and health improvement services that cover 37 disease conditions at no additional administrative costs. Administrative service fees are determined by the total number of employee lives covered across all participating PBGH member employers rather than on each employer member's enrolled employee population.

### Health Care Users' Group Meeting

In 2009, participating employer members took part in a users' group forum where the overall results of the program were reported along with enhanced services that were added without an increase in administrative fees.

### Annual Employee Contribution Survey

Supporting employers' efforts in benchmarking their employee benefit strategies, for the *sixth straight year* employer members participated in the Annual Employee Contribution Survey. Results of the survey provide key metrics on employee contribution strategies from national, regional and local employers. More than half of PBGH employer members provided information on nearly 250 different plans/contribution levels, including carrier name, plan design components, funding arrangements and specific employee contributions. Each participating employer member received summary and blinded company-specific information on all health care products (PPO, HMO and CDHP/High Deductible plans).

### Eighth Annual Tri-State Area Employee Benefit Survey

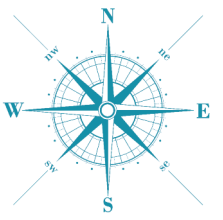
This survey, conducted annually with employee benefits consultants Cowden Associates, Inc., provides local and regional employee benefits benchmarks along with a national consensus comparison. Forty-five percent of the PBGH employer members completed the 2008/2009 survey. In a members-only session, employers received results that tracked monthly premium increases and employee contribution levels, medical and prescription drug benefit design, trend analysis and employer cost management strategies.

## POSITIONING for the Future

### Medical Claims and Dependent Eligibility Audits

In its ongoing effort to provide meaningful programs that help employers control costs, PBGH developed a new group-purchasing program in 2009. Preferred discounted fees are offered through BMI Audit Service, LLC to employer members for medical claims and dependent eligibility auditing services. BMI provides audits to assess the administrative effectiveness of the medical claims of each individual company. With industry experts indicating that three to 12 percent of covered dependents may not be eligible for coverage, depending on employee demographics and complexity of the criteria, dependent eligibility audits offer the opportunity to identify those who should no longer be covered under an employer plan.

# WELLNESS



Employers understand the direct correlation between a healthy employee and an improved bottom line.

There is tremendous opportunity in today's workplace for employers to provide wellness programs that not only improve the lives of their employees, but also reduce the staggering health care cost burden to the organization. PBGH offers several programs and resources that provide a way for employer members to offer innovative and cost-effective ways for employees to take control of their health so they can lead more productive lives – on the job and at home.

## BUILDING for Today

### LivingMyLife™: A Value-Based Benefits Strategy

Diabetes is an expensive disease that costs employers billions of dollars each year. But many of the costs can be contained when employees properly manage their condition and overall health. This is the impetus behind the innovative LivingMyLife program. Employer members waive co-pays for diabetes medications and testing supplies for eligible employees/dependents. In return, participants who voluntarily enroll in the program are required to attend regularly scheduled, one-on-one coaching sessions with certified coach-pharmacists to set participant-specific goals and learn how to control their diabetes.

Currently, there are approximately 200 enrollees from six PBGH employer members receiving coaching services across a network of 80-plus coach-pharmacists.

### Type 2 Diabetes Report

For the third year, PBGH presented a report comparing key demographics of people with Type 2 Diabetes in specified Western Pennsylvania regions compared to state and national averages. The report includes data on hospital and physician charges, utilization of clinical services and drug therapies, and certain best performing benchmarks that employer members can use for comparison purposes. The 2009 report shows that Pittsburgh is treating diabetes more cost effectively than the rest of the state and nation, and its efforts to help people better manage their disease are paying dividends.

Key findings on patients diagnosed with Type 2 Diabetes in Pittsburgh indicate:

- ☼ Patients were more likely than similar patients nationwide to receive A1c, blood glucose, serum cholesterol, ophthalmologic or urine tests, but best-performing regions use these same diabetes management services at a higher rate.
- ☼ 53 percent were older than 65, moderately higher than the national average.
- ☼ 47 percent were working-age people (age 18 to 64), lower than the national average.

## POSITIONING for the Future

### Biometric Screenings/Health Risk Appraisals

Providing employees with information so they can become engaged and manage their health with their personal physician is the basis for providing biometric screenings and health risk appraisals. Developed for employer members in 2009, beBetter Health offers PBGH employer members preferred, discounted pricing to make these services available to employees and dependents.

The health risk appraisal is a self-reported assessment of health with a personalized report and a summary provided to primary care physicians. The core biometric screening service includes worksite-based assessments for blood pressure, cholesterol, glucose, body mass index and waist-to-hip ratio. Immediate feedback is explained in person and provided in a written report for the employee and physician. With results of these screenings in hand, employees can set personal goals for health improvement and be better armed with information to discuss with their physician.

### Flu and Other Vaccination Services

#### Flu Shot Administration

In 2009, PBGH developed a solution for employer members to receive convenient, affordable influenza vaccination services. Employees and dependents of employer members in the Pittsburgh region, as well as those who work outside the region, took advantage of the service through worksite vaccination clinics, as well as at CVS pharmacy locations and MinuteClinics®. For populations outside the Pittsburgh region, OccuVAX offered licensed nurses who are available to administer flu shots at employer worksites.

#### Direct Purchase of Flu and Other Vaccines

For employer members that administer vaccines in-house, or have on-site medical clinics, PBGH provides the opportunity to purchase vaccine products directly from GlaxoSmithKline (GSK) at deep discounts. Included in this employer members-only program are seasonal flu and adult travel vaccines such as Hepatitis A & B, and Tetanus Diphtheria and Pertussis (Tdap). A simple on-line registration and ordering process with GSK representative support is available to facilitate the procedure.

### Best Doctors®: Tackling the Issue of Misguided Care

Expert physicians are just a phone call away for employees of employer members through the Best Doctors program, a health benefits strategy that ensures employees and their families get the right diagnosis and the right treatment – right when they need it. Best Doctors provides access to some of the nation's most advanced medical expertise in which physicians conduct a thorough analysis and prepare a summary report of the members' medical situation based on medical records, history and tests that can be used with treating physicians. Employees and families who are uncertain of a diagnosis or treatment now have the tools to make informed decisions about their health care, which can avoid the high cost of misguided care.

## PBGH 2009 Annual Health Care Symposium Engagement: Employees, Employers and Providers

Each year, PBGH brings national and regional thought leaders together with the health care and employee benefit community to discuss timely, critical health care and employee benefit issues. Nearly 300 people attended the 10<sup>th</sup> Annual Health Care Symposium in 2009.

Industry experts presented on a variety of timely topics, including:

- ◆ The evolution of an employee communications strategy and creative ways to get employees to pay attention and make changes.
- ◆ A wellness journey and how employees are an integral part in getting the messaging out.
- ◆ Value-based benefits that are engaging people with chronic conditions and the impact on managing benefit use and costs.
- ◆ Savvy consumers and successful strategies for transforming employees into purchasers.
- ◆ Retail health insurance, the emerging individual health insurance market and the implications for employer health care benefits.
- ◆ Cutting health care costs with payment and delivery reform and the role for employers.

In addition to the following speakers, sponsors and exhibitors provided valuable information and resources to those in attendance.

### TOPICS AND SPEAKERS:

#### Consumer Engagement

*Successful Strategies;  
Transforming Employees into Savvy Purchasers*

Cristie Travis, CEO  
Memphis Business Group on Health  
and President, Board of Directors  
National Business Group on Health

#### Individual Engagement

*Retail Health Insurance;  
Implications for Employer Health Care Benefits*

Steven Nelson, Vice President,  
Corporate Marketing & Consumerism  
Highmark Blue Cross Blue Shield

#### Employer Engagement

*Thrive! MEDRAD's Wellness Journey;  
Results and Future Direction*

Karen Marchi, Manager,  
Health and Welfare Benefits  
MEDRAD, Inc.

Maureen Londino, Principal  
Londino Ross Associates

#### Getting Serious about Cutting Health Care Costs

*Payment and Delivery Reforms; Role of Employers*

Harold D. Miller, Executive Director  
Center for Healthcare Quality and  
Payment Reform and President and CEO  
Network for Regional Healthcare Improvement

#### Employee Engagement

*Communicating with Employees;  
Tools. Knowledge. Action!*

Laura Ashley, Manager,  
Corporate Communications, ALCOA

#### Value-Based Benefits

*Engaging People with Chronic Condition; Impact on  
Asthma, Diabetes and Hypertension Management*

John Herrick, Executive Director  
Employer Payer Initiative

Edward Mauceri, MD, Executive Director,  
Corporate Health and Wellness  
Novartis Pharmaceuticals Corporation

#### Health Care Reform Panel

Mike Doyle, Congressman,  
14th District of Pennsylvania  
U.S. House of Representatives

Jason Altmire, Congressman,  
4th District of Pennsylvania  
U.S. House of Representatives

## Seventh Annual Health Plan Executives' Forum

The Seventh Annual Health Plan Executives' Forum offered the region's leaders the opportunity to address the state of their health plans – their successes in 2008 and their plans for 2009. Much of the discussion centered on what health care reform might look like. The health plan executives also discussed the importance of engaging workers in improving their own health to reduce chronic medical conditions, which comprise the majority of health care costs.

### SPEAKERS INCLUDED:

#### David Queller

Regional President, National Accounts,  
MidAtlantic/Southeast Regions  
Aetna

#### Joseph Gregor

President and General Manager  
CIGNA Healthcare

#### Mary Lou Osborne

Regional President  
HealthAmerica

#### Dan O'Malley

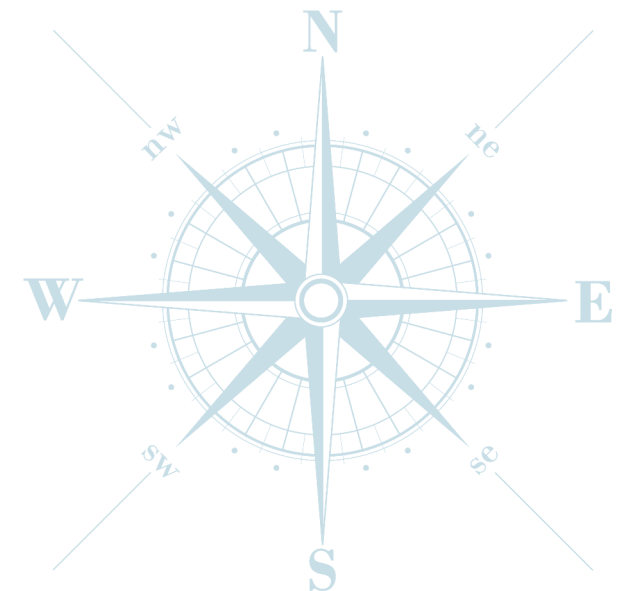
Vice President  
Highmark

#### Diane Holder

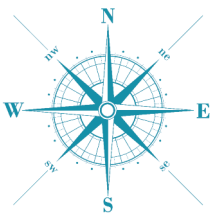
President  
UPMC Health Plan

#### Vincent E. Kerr, MD

Chief Clinical Officer & President,  
Care Solutions  
United Healthcare



# REFORM



Health care reform brought additional challenges as employers struggled to learn the details of how new and pending legislation would impact the cost and delivery of benefits for them and their employees.

A variety of health care, legislative and benefits related reforms were on the table throughout the year. PBGH identified the most significant issues for employer members and provided insightful and extensive information from national and regional experts to help employers make the best possible decisions for their organization in this critical time.

## BUILDING for Today

### National Partnerships

PBGH is a vital source of information as well as a conduit to critical information and benefits through its national partnerships. The National Business Coalition on Health (NBCH) is a network of more than 60 employer coalitions nationally that provide access to benefits and services including weekly federal legislative updates. The Integrated Benefits Institute (IBI) provides research, education, information and analysis to support the management and delivery of employee benefits across traditional benefit lines.

## POSITIONING for the Future

### Community Forums

In an effort to provide the very latest and most useful information on reform affecting employers' ability to provide health care and employee benefits, PBGH provided numerous informational forums to its members and the broader health care and employee benefits community in 2009. These forums, led by national thought leaders and regional experts, included forward-thinking sessions on:

#### Emerging Trends & Case Studies: Medical, Pharmacy, Health & Productivity

##### TOPICS AND SPEAKERS:

- ◆ *Driving Best-in-Class Pharmacy Benefit Management Results*  
Jack Bruner, FSA, Executive Vice President, Strategic Development and Marketing – CVS Caremark
- ◆ *The Keys to Continued Success: Lessons Learned From Consistent Performers*  
Ted Nussbaum, Director, Group and Health Care Consulting, North America – Watson Wyatt Worldwide
- ◆ *Health and Productivity Management: Forecasts, Trends, and Leading Edge Activities*  
Shane Sumner, Director, Practice Leader – Thomson Reuters

#### Legislative Update: Legal Challenges for Health and Welfare Plans

##### TOPICS AND SPEAKERS:

- ◆ *Update on Legislation Affecting Group Health Plans*  
Sandra Mihok, Esq., Member, Eckert Seamans Cherin & Mellott, LLC
- ◆ *Legal Challenges for Health and Welfare Plans*  
Laurie DuChateau, Esq., Counsel, Reed Smith

### Members-Only Forums

In addition to public meetings, PBGH provided a series of members-only forums in a confidential setting where members could share ideas and learn from their peers, as well as regional and national leaders, about a variety of benefit issues and emerging benefits strategies. In 2009, PBGH hosted a number of timely and valuable sessions and surveys, including:

##### TOPICS AND SPEAKERS:

- ◆ *Comparing the House and Senate Health Reform Proposals*  
John Sheils, Vice President, The Lewin Group
- ◆ *Health Parity and Addiction Equality Act of 2008, New COBRA Regulations & Administration*  
Sue Helke, CEBS, MHP, Senior Consultant, Watson Wyatt Worldwide  
Dave Millington, CLU, Senior Group Healthcare Consultant, Watson Wyatt Worldwide

#### Workforce Restructuring: Strategies for Today's Environment

##### TOPIC AND SPEAKERS:

- ◆ *Workforce Management and HR Strategy*  
Rachel Everaard, Director, Human Capital Management, Buck Consultants  
Robert Gallman, ASA, Director, HR Technology Administration, Buck Consultants  
Martin Giglio, Principal, Communications, Buck Consultants  
Pete McCormick, Principal, Communications Practice Leader, Buck Consultants

### Quick Queries

Learning what other employer members are doing as they deal with emerging issues is an integral part of belonging to PBGH. Using a web-based survey strategy administered by PBGH staff, employer members are able to quickly poll their peers on best practices, benefit insights, lessons learned, and policy topics. Having this easily accessible, immediate feedback allows members to develop and benchmark their own strategies based on sound details from others in the field. In 2009, quick queries topics included dependent eligibility audits, random drug testing, summer work hours, swine flu and G-20 strategies.

## MISSION

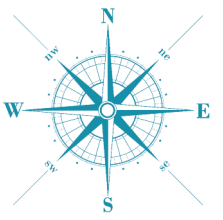
The PBGH mission is to be an employer-led coalition promoting education, collaboration and innovation among members, and in the community, to drive and deliver value and quality in health care and benefits.



## VISION

The Pittsburgh Business Group on Health will:

- ◆ Be recognized as a thought leader and change agent in the region.
- ◆ Utilize the strength of its membership to promote efficiencies and cost savings.
- ◆ Influence the face and future of health care and other benefits.



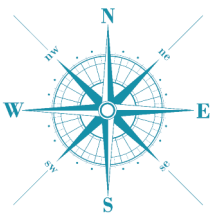
## CORE VALUES

**High quality** Provide the best possible service and programs to our members to drive quality in health care and benefits.

**Value driven** Assure the effectiveness of our services and deliver cost-efficient opportunities in health care and benefits.

**Collaborative** Work in partnership with others to develop solutions in health care and benefits.

**Integrity** Provide services based on ethical and honest principles and participate with others who hold these values.



## Provide Innovative Thought Leadership

- ◆ Anticipate trends and drive improvement in health care and benefits.
- ◆ Provide thought leadership around best practices and trends in health care and benefits.
- ◆ Present leading-edge ideas and concepts.

## Promote Education and Raise Awareness

- ◆ Promote understanding of critical issues impacting health care and benefits.
- ◆ Develop and offer effective analytic tools, educational opportunities and industry evaluations.

## Leverage Group Purchasing

- ◆ Empower the employer and the employee.
- ◆ Aggregate the purchasing power of employers in the benefits arena.
- ◆ Develop innovative programs to obtain best-in-class services, access and pricing that many members may not be able to obtain individually.
- ◆ Promote competition in health care and benefits.

## Bring Ideas to Action

- ◆ Link research and best practices to provide options to members.
- ◆ Translate leading edge concepts into ready to implement programs.
- ◆ Promote benefits programs that are value-driven, flexible, actionable and cost efficient.

## Provide Leadership

- ◆ Engage leadership of members in the region.
- ◆ Ensure alignment with business needs, goals, best practices and trends.
- ◆ Drive change.

## Collaborate with the Community (both internal and external)

- ◆ Convene employer leadership forums around health care and benefits.
- ◆ Initiate action to improve quality, effectiveness and value of health care and other benefits practices.
- ◆ Obtain results through collective synergy among members.

## 2010 PBGH OFFICERS

<b>PRESIDENT</b>	Donna Frisch, Senior Manager, Health & Welfare Plans H.J. Heinz Company
<b>VICE PRESIDENT</b>	Cheryl Melinchak, CEBS, Manager, Health & Welfare Plans, Westinghouse Electric Company LLC
<b>TREASURER</b>	Myra Kilgore, Benefits Manager, Eckert Seamans Cherin & Mellott LLC
<b>SECRETARY</b>	Wendy Doolan, Benefits Manager, Clearview Federal Credit Union

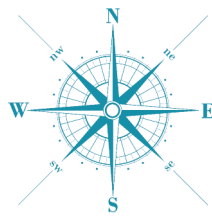
## 2010 PBGH BOARD

Amy Cox, Director, Corporate Benefits, Wabtec  
Lora Dikun, Vice President, HR Operations, Giant Eagle, Inc.  
Jim Giel, Jr., Human Resources Benefits Officer, Dollar Bank, F.S.B.  
Brian Hasson, SPHR, Benefits Manager, Mine Safety Appliances Company  
Kim Kapfer, Benefits Manager, Dick's Sporting Goods, Inc.  
Karen Marchi, Benefits Manager, MEDRAD, Inc.  
Susan Spencer, Director, Employee Relations & Benefits, ATI Allegheny Ludlum Corporation  
Donna V. Steed, Benefits Manager, Duquesne University  
David B. Thomas, CEBS, Benefits Manager, Development Dimensions International  
Pamela Vass, Vice President, Human Resources, Ellwood Group Inc.

## 2010 PBGH SERVICES, INC. BOARD

Paula Fortunato, Benefits, Consultant, Allegheny Energy  
Brian Hasson, SPHR, Benefits Manager, Mine Safety Appliances Company  
Lori Lechner, Director, Benefits Planning, Bayer Corporation  
Kristen Miller, PHR, Senior Human Resources Consultant, Westinghouse Electric Company LLC  
Laura Moorhead, Director of Workers' Compensation and Benefits, GENCO Distribution System

*Our appreciation is extended to the 2009 board members who graciously gave of their time and energy to PBGH including those who are no longer on the board.*



## PBGH MEMBERS

### Employer Members

Alcoa  
Allegheny Energy  
ATI Allegheny Ludlum Corporation  
Allegheny Technologies  
Ampco-Pittsburgh Corporation  
ANSYS, Inc.  
ArcelorMittal Tubular Products USA Corp.  
Bayer Corporation  
Butler Area School District  
Carmeuse North America  
Carnegie Mellon University  
Carpenter Technology  
CENTRIA  
City of Pittsburgh  
Clearview Federal Credit Union  
Cleveland Brothers  
CONSOL Energy Inc.  
Crown Castle USA  
Development Dimensions International  
Dick's Sporting Goods, Inc.  
Dollar Bank, F.S.B.  
Duquesne Light Company  
Duquesne University  
Eckert Seamans Cherin & Mellott, LLC  
Ellwood Group Inc.  
FedEx Ground Package System, Inc.  
L. B. Foster  
GENCO Distribution System  
General Nutrition Centers, Inc.  
Giant Eagle, Inc.  
H.J. Heinz Company  
The Hillman Company  
Joy Global Inc.

King's Family Restaurants  
Leedsworld, Inc.  
MARC USA  
Matthews International Corporation  
MEDRAD, Inc.  
Microbac Laboratories, Inc.  
Mine Safety Appliances Company  
Penn United Technologies  
PPG Industries  
Reed Smith LLP  
Severstal Wheeling  
SMC Business Councils  
TRACO  
Transtar, Inc.  
Trib Total Media  
U. S. Steel and Carnegie Pension Fund  
University of Pittsburgh  
Wabtec  
Wesco Distribution, Inc.  
Westinghouse Electric Company LLC

### Associate Members

Allergan, Inc.  
AstraZeneca  
Boehringer Ingelheim Pharmaceuticals, Inc.  
Buck Consultants  
Cowden Associates, Inc.  
CVS Caremark  
Highmark, Inc.  
Merck & Co.  
Pfizer, Inc.  
sanofi-aventis  
Towers Watson  
United Concordia  
UPMC Health Plan

## STAFF

**EXECUTIVE DIRECTOR** M. Christine Whipple  
**OPERATING DIRECTOR** Diane McClune  
**ADMINISTRATOR** Laura Wicker



PITTSBURGH BUSINESS GROUP ON HEALTH



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