LODESTAR
CLAIMS & RISK SERVICES

Lodestar Claims & Risk Services, Inc.

Workers' Compensation

TPA & Risk Services Proposal

June 8, 2026

Presented to

Village of Oak Park

Presented by

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June 8, 2026

Ms. Kira Tchang
Assistant Village Manager/ HR Director
Village of Oak Park, Illinois
123 Madison Street
Oak Park, IL 60302
HR@oak-park.us

Dear Ms. Tchang,

On behalf of Lodestar Claims and Risk Services, thank you for the opportunity to submit a proposal for Workers' Compensation Third-Party Administrative (TPA) & Risk Services. We understand that your business and risk management priorities include creating a safer, healthier workplace and reducing your total cost of risk. Our approach to risk management aligns our priorities with yours, helping us to maximize the results we can achieve together.

This proposal outlines why **Lodestar**, **as the Village's third-party administrator for the past nine (9) years**, continues to be the best choice as your partner in managing risk. Key highlights of our workers' compensation TPA & Risk Services proposal include:

- Unique **holistic approach**—which provides pre-loss, loss-reduction, and post-loss strategies to reduce your total cost of risk
- An **innovative company with a stable leadership team**, and **service-driven culture**—all focused on protecting workers while preventing claims and reducing their costs
- A professional **service team** leveraging Lodestar's 100 years of specialized workers' compensation expertise and infrastructure
- Lodestar's disciplined approach to managing the Village's workers' compensation claims helps control **medical costs, avoid overtreatment, and shorten recovery timelines**.
- Lodestar uses **targeted PPD reserving, early settlement authority requests, and pro se settlements** to close claims efficiently.

Lodestar's WC claim handling team for the Village of Oak Park delivers value through:

  - **Experience depth** (60+ years of combined WC experience between Sarah, Elizabeth and Eman)
  - **Role specialization** (right people handling the right claims)
  - **Regional expertise** (unmatched strength and expertise in Illinois)

- A continuously evolving and fully integrated **managed care program** driven by a **strategically sequenced approach** that uses six levels of **nurse intervention** and **predictive data analytics** to assess lost-time claims and cost effectively get injured workers the **right care at the right time**
- **24/7 Customer Service Center** that supports you, your injured workers, and their medical providers, enabling our claims professionals to focus on cost-effective claims resolutions.

- **Fewer claims escalating into costly lost-time cases:** Oak Park Fire consistently keeps lost-time rates (@ 19–22%) which is far below other fire departments in Lodestar's book of business (up to 58–59%), showing the partnership between the Village of Oak Park & Lodestar is reducing severity by keeping injuries in lower-cost medical-only status.

Lodestar is delivering measurable impact by:

- Controlling **how claims are treated (medical discipline)**
- Reducing **how long employees stay off work (RTW execution)**
- Managing **how claims are resolved financially (settlement strategy)**

Together, these directly **lower the Village of Oak Park's total cost of risk.**

At Lodestar, we have created a 100-year success story one relationship at a time. We are passionate about doing what we say and delivering exceptional value to our clients. We look forward to the opportunity to continue to partner with the Village of Oak Park in managing your risk, improving your program results, and exceeding your service expectations.

Sincerely,

Todd Jacobsen

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A. Description and History of Firm

Old Republic International (ORI) is a Fortune 500 firm, the parent company of Lodestar (Previously PMA Management Corp.), and one of the nation's 50 largest shareholder-owned insurance organizations with consolidated assets of $30 billion (as of December 31, 2025).

Lodestar Claims & Risk Services, Inc. ("Lodestar"), previously PMA Management Corp., is a leading provider of workers' compensation, property and casualty third-party administration and risk services for self-insureds, unbundled large deductible and self-insured retention programs, groups, trusts, captives, pools and programs. Lodestar's client retention averages 97% and client satisfaction averages 95% per independent surveys. Lodestar aims to deliver tangible value every day, striving to exceed our clients' service expectations and improve their financial results.

Lodestar has over 30 years of property, casualty, and workers' compensation experience. Our company's performance reflects an innovative spirit, a focus on service and partnership and a corporate structure that promotes accountability and exceeding customer expectations.

A Strategic Partnership Focused on Reducing Risk and Improving Outcomes

The Village of Oak Park is seeking more than a claims administrator—you are seeking a **collaborative partner** who can proactively manage risk, reduce costs, support employees, and provide actionable insights to guide decisions.

Lodestar Claims & Risk Services is purpose-built to deliver exactly that. With deep expertise in public entity workers' compensation programs, Lodestar combines **disciplined claims handling, advanced analytics, and hands-on client engagement** to help municipalities like Oak Park control their total cost of risk while maintaining fair and responsive care for injured employees. Our approach aligns directly with the Village's priorities of **proactive claims management, cost containment, timely communication, and data-driven decision-making**.

Our Understanding of the Village's Priorities

Based on the RFP, Oak Park's goals center on three critical outcomes:

1. Reducing Total Cost of Risk
The Village is looking to control escalating claim costs through better medical management, reserve accuracy, subrogation, and reduced litigation exposure.

2. Delivering Proactive, High-Quality Claims Handling
You value early intervention, consistent communication, and a program that minimizes claim duration and complexity while supporting injured employees and labor relationships.

3. Gaining Visibility Through Data and Analytics
The Village requires robust reporting, trend analysis, and actionable insights to inform safety initiatives, financial planning, and operational improvements.

Lodestar's Solution

Lodestar delivers a comprehensive, proactive claims management model designed to address each of these priorities.

Cost Control Through Precision Claims Management

We actively manage every claim to reduce overall program costs—not simply administer transactions.

- Early claim triage to identify high-exposure cases within the first 24–48 hours
- Strict reserve setting protocols with continuous oversight
- Integrated bill review, PPO optimization, and utilization management
- Aggressive subrogation identification and recovery
- Litigation avoidance and strategic partnership with defense counsel

Result: Lower claim severity, reduced paid losses, and improved financial predictability.

Proactive Claims Handling That Improves Outcomes: Our model focuses on preventing claim escalation through early intervention and consistent engagement.

- Dedicated, low-caseload adjusters experienced in public sector risks
- 24-hour claimant contact and ongoing communication protocols
- Nurse case management and return-to-work coordination at first indication of lost time
- Structured collaboration with Village HR, supervisors, and legal partners
- Employee-centered approach that supports trust and positive labor relations
-

Result: Faster claim resolution, reduced litigation, and improved employee satisfaction.

Advanced Analytics That Drive Smarter Decisions: Lodestar transforms claims data into actionable intelligence.

- Real-time, web-based dashboards tailored to Village leadership
- Trend analysis by department, injury type, and root cause
- Lag-time and reporting compliance tracking
- Litigation spend and outcome monitoring
- Return-to-work performance metrics and lost-time reduction insights
- Custom executive reporting for strategic planning and board-level visibility

Result: Full transparency into program performance and the ability to act proactively on emerging risks.

Our Differentiators

Lodestar stands apart in three key ways:

1. A Proactive, Not Reactive, Model
We intervene early, manage aggressively, and prevent cost escalation—rather than reacting after claims become complex.

2. Public Entity Expertise
We understand the unique risks, union environments, and operational challenges of municipalities, ensuring alignment with Oak Park's workforce and service structure.

3. High-Touch Service with Measurable Accountability
Our clients benefit from:

- Consistent adjuster assignments
- Low caseloads
- Defined service-level commitments
- Regular stewardship meetings and performance reviews

A True Partnership with the Village of Oak Park

Lodestar is committed to functioning as an extension of the Village's Human Resources and risk management team—providing not only claims administration, but **strategic guidance, operational support, and continuous program improvement**.

We have had the privilege of being your TPA since 2017 and will work collaboratively with Village leadership to:

- Identify cost drivers and risk trends
- Strengthen return-to-work and safety initiatives
- Improve claim outcomes year over year
- Ensure compliance and transparency across all aspects of the program

Conclusion

The Village of Oak Park deserves a partner who can balance **financial discipline, employee care, and operational insight**. Lodestar Claims & Risk Services delivers:

- **Lower costs**
- **Better outcomes**
- **Greater visibility**

We welcome the opportunity to continue our partnership with the Village to continue building a **best-in-class workers' compensation program** that protects both your employees and your financial resources.

B. List of Current Illinois Public Entity Clients

Lodestar has over 500 clients. These clients consist of individual self-insureds, Groups and Captive Insurance arrangements. When self-insureds groups are broken down, our client list exceeds 2,000 individual entities. Thirty Five percent (35%) of the clients are public entity clients, many of which are counties, municipalities and school systems.

Lodestar is one of the 10th largest regional Third-Party administrators in the United States. Lodestar's annual revenues exceed $50 million dollars. Lodestar continues to grow and expand into new states.

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While Lodestar does not release a list of our current clients, we are proud to share that some of our Illinois municipal clients include:

- City of Bloomington, IL
- City of Peoria, IL
- City of Springfield, IL
- City of Rockford, IL

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C. Education, Experience, and Expertise

Education, experience, expertise and certifications of the firm, principals, and key employees including resumes of personnel who would be assigned to the project. Also identify:

1) **How many adjusters are currently employed?**

Lodestar employs approximately 562 staff members.

2) **What is the average tenure for your adjusters?**

Company-side, Lodestar's Claims Professional staff has an average of 12 years of claims handling experience. The three-person team of workers' compensation professionals handling claims for the Village of Oak Park exceeds 60 years of experience combined. (Sarah Schroder = 15. Elizabeth Schuett = 32. Eman Nathan = 17). Bios begin on page 10.

3) **What is the adjuster's average case load?**

Lodestar's Claims Professional caseloads and support resources, such as our 24/7 Customer Service Center, are established to **allow our Claims Professionals to give each claim the time and attention** it requires. This allows us to complete more thorough investigations, and to exercise greater control over loss development.

140

Workers' Compensation Caseload Average for Lost Time Files

200

Workers' Compensation Caseload Average for Medical Only Files

4) **Will one individual handle all of the Village's claims or will they be divided by claim type?**

As the Village of Oak Park is a current client for nine years, Lodestar plans to keep the current claims team assigned to this account. Please see the Lodestar Team Bios below.

5) **Accessibility and ability to respond to Village needs in a timely manner.**

Lodestar is committed to providing the Village with high-accessibility, rapid-response service that ensures all claims and inquiries are handled promptly, accurately, and with full transparency. Our service model is built around direct availability, proactive communication, and clear escalation pathways to ensure the Village receives immediate support whenever needed.

The Lodestar Team

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Todd Jacobsen, ARM
Territory Marketing Executive
Lodestar Claims & Risk Services

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LinkedIn Profile

Todd Jacobsen, Territory Marketing Executive, is responsible for leading and promoting Lodestar Claims & Risk Services, Inc. (Previously PMA Management Corp.) brand awareness initiatives to distributors and prospective buyers of TPA services throughout the country, with concentrated focus in the Southwest and West Regions.

In his previous role, Todd served as Lodestar's AVP of Claims overseeing the Midwest and Southwest Regions. His claims career spans 34 years in positions of increasing responsibility. In addition to his extensive claims experience, Todd has in-depth expertise in client relationship development, underwriting, risk management, account management, strategic planning, management, and risk management information systems.

Certifications

- State of Illinois Insurance Producer's License
- State of Texas All Lines Adjuster License

Education

- Bachelor of Arts degree in Economics and Marketing, Cornell College; Mt. Vernon, Iowa.
- Associate in Risk Management (ARM) designation

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Sarah Schroeder

Supervisor Claims

Overview

Sarah Schroeder joined Lodestar Claims & Risk Services, bringing with her over 15 years of experience in the insurance industry. She has multiple years of experience handling claims, including over 6 years working with captive accounts for a large national TPA.

In her current role as a Claims Supervisor, she oversees LCRS's Midwest region.

Expertise depth

Sarah has spent the last several years in positions of increased responsibility, including her most current role as a Claims Supervisor. Her jurisdiction of expertise is Illinois.

Credentials / Certifications

- Licenses: Texas
- CCP Designation: September 2020
- Shining Star Award 2018 and 2020 for adjusting excellence voted on by captive client members

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Elizabeth Schuett

Senior Claims Specialist

Overview

Elizabeth Schuett joined Lodestar Claims & Risk Services, bringing with her over 32 years of experience in the Workers' Compensation Industry. She has handled claims for the Illinois jurisdiction almost exclusively.

In her current role as a Senior Claims Specialist, she handles many complicated litigated files, pro se matters, and coverage issues. Elizabeth has handled claims for many national large corporations and smaller local businesses. She assesses each client's unique needs and tailors her claims handling approach accordingly to best meet the needs for each client.

Expertise depth

Elizabeth has also worked with a large variety of clients to provide superior claims handling, and to develop close working relationships between the clients, the insurance company and Third-Party Administrator, and other involved parties (defense attorneys, vendors, etc.). She has a proven track record of building excellent client relations to improve the claims handling process and customer satisfaction. She has executed many in person claim reviews and has also spearheaded training programs for new employees and for her accounts.

Credentials / Certifications

- Continuation of growth professionally; industry-based education, seminars, and in-house training for the Workers' Compensation field in both medical and legal issues

Education

- Bachelor's degree in Education; Eastern Illinois University

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Lodestar Data Classification: Confidential

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Eman Nathan

Associate Claims Specialist

Overview

Eman Nathan joined Lodestar Claims and Risk Services in 2018, bringing with her over 17 years of experience in the Insurance Industry, specializing in focusing on handling medical-only and limited lost time Workers' Compensation claims.

In her current role, she handles medical-only and limited lost time claims expertly in Illinois, Indiana, Iowa, Missouri, Minnesota, and Wisconsin.

Credentials / Certifications

- Jurisdictional expertise in: Missouri, Minnesota, Illinois, Indiana, Wisconsin, and Iowa
- Licenses: Texas, Michigan, and Indiana

Section II. Specific Requirements

Detailed Plan Information

1. All firms interested in providing Worker's Compensation Claims Administration services to the Village of Oak Park must have the ability to provide the following:

   A. Review each claim and loss report submitted by the Village to determine compensability or liability. **Lodestar can and will comply**.

   B. Direct the investigation of each Qualified Claim or Loss to the extent deemed necessary by Vendor, and/or at the Village's request. **Lodestar can and will comply**.

   C. Perform necessary and customary administrative and clerical work in connection with each Qualified Claim or Loss, including the preparation of checks or vouchers, releases, agreements and other documents needed to finalize a claim. **Lodestar can and will comply**.

   D. Receive medical bills related to Workers' Compensation claims. Forward bills to the bill Review/PPG Vendor for review and discounting. Vendor will identify claims with potential for subrogation and pursue subrogation possibilities on behalf of the Village where and when applicable, or as directed by the Village. If litigation is necessary, Vendor will, with the Village's approval, refer claim to Village's legal counsel. Vendor will establish process to receive and issue checks and Explanations of Benefits (EOBs) to providers. Fees, as agreed to by the Village will be paid by Vendor to the Vendor as Allocated Claims Expenses and charged to claims file. **Lodestar can and will comply**.

   E. Require Vendor's staff to attend management meetings with Village personnel on a quarterly basis, at minimum. **Lodestar's can and will comply.**

   F. Recommend and update claim reserves as needed:
      1) Vendor shall provide the Village with a monthly report of reserve changes in a format acceptable to the Village. **Lodestar can and will comply**.
      2) A copy of a reserve worksheet will also be given to the Village upon the Village's request. **Lodestar can and will comply.**
      3) The reserve amounts for such cases are subject to review and approval of the Village. **Lodestar can and will comply.**
      4) Maintain claims data on Vendor's computer claims system and provide the Village with monthly reports as follows: loss experience, check register and escrow statements, in format agreed to by the Village. **Lodestar can and will comply.**

   G. Notify the Village and all Village excess carriers of all claims and or losses, which may exceed the Village's retention, including Qualified Claim(s) and or Loss(es), specific reporting requirements of excess insurance carriers and, if requested, provide information on the status of those claims or losses. **Lodestar can and will comply.**

   H. Coordinate investigations of claims, including those in litigation with attorneys representing the Village and with representative of the excess carrier, as required by the Village. It is expressly understood that all legal costs and loss payments will be paid as Allocated Claim Expenses(s). **Lodestar can and will comply.**

I. Provide designated Village employees with inquiry access to the Vendor's proprietary claims system. The Village is responsible for providing the hardware and data lines for such access by Village employees. **Lodestar can and will comply.**

J. Provide additional ad hoc information, analysis, reports and services as deemed necessary by the Village. **Lodestar can and will comply.**

K. Assist the Village in selecting experts or specialists as claims may require. **Lodestar can and will comply.**

L. Provide Village with copies of liens and Summons and Complaints immediately upon receipt or knowledge of such. **Lodestar can and will comply.**

M. Provide quarterly Accident Analysis report containing accident statistics to monitor trends and establish safety initiatives. **Lodestar can and will comply.**

N. Prepare and complete all reporting and other documents required to be filed regarding services that are or may be required by any local, state or federal governmental authorities, subject to approval of the Village. This will include but not necessarily be limited to, providing the Village with information needed regarding the assessments to the State of Illinois Second Injury Fund and Rate Adjustment Fund; and also preparing and filing 1099 reports based on payments processed pursuant to the Contract and act as reporting agent for Medicare Reporting requirements. **Lodestar can and will comply.**

O. Monitor the escrow account and maintain with sufficient funds to cover claims exposure. **Lodestar can and will comply.**

P. Assist in the management of claims to insure timely return to work including work hardening and return-to-work programs, and where appropriate the coordination of vocational rehabilitation services and identification of alternative jobs within/outside the Village. **Lodestar can and will comply.**

Q. Actively participate in settlement negotiations and case preparation with the Village's legal counsel. **Lodestar can and will comply.**

R. Identify and pursue third party payers. Provide assistance to the legal counsel as needed for settlement of such claims. Conduct and administer subrogation process. **Lodestar can and will comply.**

S. Prepare reports to the Village to assist in the identification of areas for further examination and review, to reduce the incidences and cost of compensable claims. Review and analyze accident data. **Lodestar can and will comply.**

T. Provide annual training to managers and supervisors on relevant Workers' Compensation safety and investigation techniques. **Lodestar can and will comply.**

U. Provide advanced analytics and reporting capabilities, including but not limited to:

1) Interactive or web-based dashboard reporting;

2) Claim trend analysis by department, injury type, and cause;
3) Lag-time reporting from injury occurrence to reporting;
4) Litigation tracking and legal spend analysis;
5) Reserve and loss forecasting reports;
6) OSHA and safety trend reporting;
7) Return-to-work metrics and lost-time analysis;
8) Custom reporting capabilities upon Village request; and
9) Data exports compatible with actuarial analysis and excess insurance reporting requirements. **Lodestar can and will comply.**

V. The selected Contractor may directly provide or subcontract ancillary services including bill review, PPO network management, nurse case management, Medicare reporting, pharmacy benefit management, surveillance, and subrogation recovery. The Contractor shall remain fully responsible for performance of all subcontracted services. **Lodestar can and will comply.**

*****

Lodestar affirms that it can fully meet and exceed the requirements outlined in the Statement of Requirements. Lodestar's operational model, staffing structure, technology platform, and service philosophy are specifically designed to support the Village of Oak Park's needs with a high level of accuracy, responsiveness, and accountability.

Lodestar commits to:

- **Delivering all required services in strict accordance with the SOW**
- **Maintaining the staffing, expertise, and resources necessary to ensure uninterrupted service**
- **Providing transparent, timely communication and proactive claims oversight**
- **Providing transparent, timely communication and proactive claims oversight**
- **Ensuring full compliance with all Village policies, procedures, and reporting requirements**
- **Leveraging our claims system, bill review capabilities, and case management resources to exceed performance expectations**

Lodestar's experience with public-sector clients and its proven service model ensure that every requirement in the Statement of Requirements will be met or surpassed. The Village can rely on Lodestar for consistent, high-quality performance throughout the duration of the contract.

Lodestar's Holistic Approach to Risk Management

Lodestar's holistic approach integrates three key risk strategies that can help the Village of Oak Park reduce the frequency and severity of claims by focusing on risk control, claims, managed care (Care+), risk management information services, data analytics, benchmarking, and value-added business solutions.

Pre-Loss

We will partner with you to understand your loss drivers and implement effective risk control measures. Our pre-loss strategies typically include the following:

- **Risk Management Assessment** – An assessment of your operations and risk management program to identify your historical loss exposures and opportunities to lower frequency and severity of claims.
- **Collaborative Goal Setting** – Creation of goals and performance metrics to guide our improvement efforts.
- **Planning** – Development of a plan with mileposts that will guide the improvement process and enhance results for a greater ROI.

Lodestar offers a full range of in-person and online risk control services and resources, including access to Websource®, our interactive online safety and risk management portal at no additional charge to the Village of Oak Park.

Loss-Reduction

Our claims service is designed to aid in reducing your overall exposures and controlling your costs. ***Early intervention on each claim*** will help us manage claims to cost-effective resolutions and mitigate your exposure on all claims. Each step of our comprehensive claims management process is structured to achieve favorable results.

Care+, our managed care program, which is ***fully integrated with our claims service*** and claims management system, focuses on:

- Predicting high-risk/high-cost claims for timely intervention
- Obtaining timely, quality care for injured workers
- Managing medical costs
- Reducing total claims costs

Care+ includes Nurse Triage (available 24/7 Nurse Triage via Lodestar Care24), Medical Bill Review, Workers' Compensation PPO & Specialty Networks, Nurse/Medical Code Examiners, Pharmacy Benefits Management, Point of Sale Pharmacy Intervention Program, Nurse Case Management, and a Utilization Review Program with Medical Peer Review.

Post-Loss

Lodestar will ***analyze your loss history, benchmark your performance against your peer group (where possible) and industry results***, and report back to you through our Annual Performance Consultation reporting process. More importantly, we explain ways to improve your program and implement best practices. Our goal is to help you develop best practices that enhance your program and facilitate timely claims intervention.

Our Results Focused Claims Service

Loss Reporting

Lodestar offers the Village of Oak Park **a selection of in-house claims reporting options,** so you can choose the channel that is most convenient for the Village of Oak Park. Lodestar can receive first notice of loss (FNOL) reports electronically through Lodestar's website or through RadiusR®, our internet-based risk management information system. You can report losses from mobile devices including iPhones, iPads, Android smartphones, and tablets. Telephone, fax, and mail reporting options are also available to the Village of Oak Park and its employees.

Claims reported electronically are immediately assigned a Lodestar claim number. That claim number will instantly be provided to the submitter and can be shared with your injured parties involved in the claim. For all reported claims, letters of acknowledgement will be e-mailed to designated client contacts.

Optionally, for Workers' Compensation, we offer Lodestar Care24, a convenient **24/7 telephonic claim intake and first level clinical assessment** of the employee's injury by a Registered Nurse at the point of injury. The Registered Nurse serves as a patient advocate in determining the appropriate level of treatment pursuant to the injury assessment. If medical treatment is recommended, the employee will be referred to a provider within the Lodestar or client's Preferred Network. This interaction becomes the sole point of claim reporting to Lodestar and helps mitigate costs, unnecessary treatment utilization, and claim reporting redundancies.

Lodestar's Customer Service Center

Our 24/7, multilingual Customer Service Center (CSC) is available to answer high-level claims service needs of the Village of Oak Park, their employees, injured parties, medical providers, and vendor partners. Lodestar's CSC provides a suite of support services for our Claims Professionals, allowing our claims teams to focus on adjusting functions. Our investment in this key department is what continues to differentiate Lodestar in the marketplace and allows us to maintain low Claims Professional turnover and strong satisfaction of our employees and customers.

55,000+ Calls

Handled monthly

20 Seconds

To answer a call

Lodestar's CSC is a center of excellence in providing exceptional quality of **data integrity and capture at claim intake**. Our Customer Service representatives are measured by their ability to capture and display the most accurate information in the claim files including employee demographics, location coding data, and items required by state EDI.

Workers Compensation Early Intervention Model

Once a claim is reported, Lodestar deploys our people, processes, and powerful claims management information system (CMIS) to identify high exposure claims characteristics like comorbidities, psycho-social factors, injured worker age, body mass index (BMI), and length of employment. This critical information helps our Claims Professionals and triage nurses intervene early in the process to deliver a proactive approach designed to achieve positive outcomes.

Injury Occurs

Online Reporting
Telephonic Reporting
Fax or Email Reporting

Care+

Optional Clinical Triage Service
Injury Intake
Direction of Care
Automatic FNOL Generation

Clinical Triage

Lost Time Claims
Nurse Review
Clinical Intervention

Claims Resources

Multi-Tier, Experienced Claim Staff
Right Claim, Right Person
Right Time

Enhanced Services

Subrogation Specialist
OSHA Specialist
Recover at Work Specialist
Point of Sale Pharmacy Nurse
Legal Bill Analyzer

Predictive Modeling

Proprietary Algorithm
FNOL Model
30 Day Model

Claims Handling

Upon receipt of a claim, **Lodestar will ensure accuracy of all data points** provided on FNOL and follow-up for any missing information or any updates as needed. Lodestar claims system offers our customers the ability to track additional data fields specific to their business needs that could be captured at the time of claim reporting or throughout the life of the claim. These **custom codes** are viewable to our clients in Lodestar RMIS - RadiusR®.

Lodestar designed our claims service to **reduce our clients' overall exposure and control costs**. Each step of our comprehensive claims program for workers' compensation, property and casualty has been structured to achieve results, including driving claims to resolution in a timely, thorough, and cost-effective manner. We recruit and retain Claims Professionals with strong technical knowledge in all lines of business. In fact, our Claims Professional staff has **an average of 12 years of workers' compensation** claims handling experience and **an average of 10 years of property and liability** claims handling experience. Lodestar supervisors have **over 15 years of experience**. We leverage our roots as an insurance company with liability Claims Professionals who not only understand these distinct coverages, but also how best to resolve their claims. As part of our holistic approach, we maintain a tight linkage between claims management, Care+, and risk control—enabling us to continually identify and **help you address emerging loss trends** while seeking to reduce your loss costs.

Upon receipt of a claim from the Village of Oak Park, a claim is generated in Lodestar's claims system and referred to the supervisor for review and assignment. The supervisor utilizes their knowledge and claims facts available to assess claim complexity, provide guidance and determine the level of Claims Professional expertise that will be needed to handle the file most appropriately. The supervisor assigns the claim to the appropriate member of your team, and the Claims Professional will receive an activity in the claims system notifying them of the claim receipt.

All claims are reviewed by the Claims Professionals within **24 hours of receipt** from the client, and 24-hour contacts are completed. The number of contacts made on each claim is defined by **Special Handling Instructions** and Lodestar's Best Practices. The Claims Professional will review the Special Handling Instructions for any guidelines on initial claim handling. During the initial investigation, the Claims Professional obtains all the necessary information to make a compensability determination for workers' compensation claims or a liability assessment in property and liability claims. **All the information obtained is documented in the log notes and will be visible to the Village of Oak Park in our Lodestar RMIS system -** RadiusR®. Additionally, Claims Professionals are **responsible for updating the data fields** that are mandatory for the state, carrier, and client reporting. If the contact attempts are unsuccessful, the Claims Professional will follow up via a letter or an email (if available) and make additional telephonic attempts to reach all parties.

Lodestar values customer service as a key result area of the Claims Professional staff. Therefore, upon reaching the parties involved in the claim, the Claims Professional will ensure that each contact is provided with all the information necessary about the claim, next steps, outstanding items, etc. The Claims Professional will request all necessary information, including payroll records, police reports, medical records, investigative reports, and other relevant documents and upload them to the claim file.

For workers' compensation claims, it is the Claims Professional's responsibility to **ensure appropriate EDI filings** are completed timely and accurately. Additionally, workers' compensation lost time claims are evaluated by a Lodestar nurse case manager to **determine the need for clinical intervention** or nurse assignment. If the claim complexity and Special Handling Instructions indicate the need for a telephonic or a field case manager, a nurse is assigned to the file to work in collaboration with the Claims Professional **to help bring the injured worker back to safe and gainful employment**.

Lodestar's Predictive Severity Model

Lodestar has developed a **proprietary algorithm** based on claim information gathered over our many decades of claim handling experience. The **Predictive Analytics tool** encompasses multiple models that incorporate **45 different data points** and analyzes their influences on claim exposure and likelihood of claim payment as the data points relate to each other. This model identifies combinations of factors that influence ultimate claim exposure and duration and serves as a tool to bring supervisor and Claims Professional attention to the key components of the claim to ensure the appropriate claim assignment and intervention at the right time.

Lodestar developed 2 main models to assist with claim exposure and duration analysis. These models are run daily to provide ongoing input and recommendations to the claims team:

1. **The Severity Escalation at FNOL Model**

This model produces a risk **score of low, moderate, or high**. This score serves as guidance to the claims team in determining, upon receipt of the initial claim, the proper trajectory for claim assignment to the correct Claims Professional. A low-risk score reflects a strong probability of the claim resulting in overall low ultimate probable exposure, whereas a high-risk score would drive supervisor assessment and assignment to the senior Claims Professional for complex analysis and handling. This FNOL model serves to ensure that the right claims are assigned to the right skill set level (based on complexity) at the right time within the life of a claim file.

2. **The Severity Escalation at 30-day Model**

This model builds upon the FNOL model and relies on the additional information that has been gathered by the Claims Professional since the loss was initially reported and throughout the first 30 days of the claim. This **additional data is used to re-score the claim** to identify files that may develop significantly, may change severity projections based on the latest information, or may require additional interventions based on new detail gathered during the investigation.

Quality Assurance and Learning Initiatives

At Lodestar Claims and Risk Services, we have revolutionized quality assurance by seamlessly integrating proven methodologies with a dynamic learning curriculum, creating a synergistic approach to enhance individual and organizational proficiency. Through our innovative program, **ELEVATE 365, our highly experienced Quality Assurance Specialists serve as peer mentors to Claims Professionals**. They identify and evaluate claim handling trends and curate comprehensive training programs for consistent development and sustained improvement.

Our **Learning Academy provides a versatile mix of in-person, virtual, self-paced, and instructor-led training.** We focus on upskilling existing staff and attracting and nurturing the next generation of talent. Through a continuous cycle of file reviews and targeted re-training, we set the standard for excellence in claims handling. This approach supports the professional development of our claims personnel and ensures superior outcomes for you.

The feedback loop, coupled with our Quality Assurance team's diverse risk management expertise, has enabled us to establish a program that consistently delivers exceptional results for our clients.

File Supervision

Unlike many TPAs, **Lodestar Claims Supervisors do not carry claim pendings. They are solely responsible for guiding claims staff** on claim file direction, oversight, and compliance with customer's Special Handling Instructions. Lodestar maintains a span of control of 1:6 (or less) for our claims supervisor and Claims Professional staff.

WC Medical Only claims require supervisor review within 15 days from assignment to verify state and jurisdictional compliance. This review is documented in claim log notes. Subsequently, supervisor review is required within 90 days from assignment to identify closure opportunities or potential for escalation to an indemnity claim, based on claim definitions.

WC Indemnity claims require an **initial supervisor assignment note within 24 hours** after claim assignment. Supervisor review on all claims classified as indemnity will be completed within 15 days from file assignment, 60 days thereafter, and every 90 days until resolution. Supervisors are required to comment regarding the accuracy and validity of reserves during each review.

Casualty and Property claims require supervisor review during initial assignment and on an ongoing basis depending on complexity of the file, expertise of the Claims Professional and client Special Handling Instructions.

Lodestar's Claims Professional Duties

Investigation

Appropriate, timely and thorough 24-hour contact investigation of claims of all exposures occur within 24 hours of the first notice of claim to Lodestar. Contact attempts follow requirements as outlined in Special Handling Instructions. Daily attempts at contact are made to reach the impacted parties and are documented in the claim log notes and visible in Lodestar RMIS RadiusR® system.

Reserving

Initial reserve is established within 15 business days of receipt of all new claims. Ongoing reserves are established based on the most probable outcome using the most current information available and are updated upon each review of the Action Plan as well as within 24 hours of any major claim event.

Action Planning

An Action Plan is established within 30 days of claim assignment and provides a summary of findings from Claims Professional's investigation as well as details the strategies with specific goals and timeframes for executing key objectives to resolve claim. Ongoing Action Plans are completed at any major claim event or a minimum of every 90 days and include a review of outstanding reserves on file.

Settlement Authority

Authorization will be requested prior to the settlement of any claim for any line of insurance that we would administer. Clear and detailed instructions will be outlined in **Special Handling Guidelines** for all Claims Professionals.

Our Claims Professionals will provide written requests for settlement authority in advance of the proposed settlement date. Requests will include a detailed evaluation of the claims' exposures, along with input from defense counsel and your risk manager.

Litigation Management

Lodestar believes that **litigation management is a team effort** involving our client, the Claims Professional, defense counsel, and the carrier (if/where applicable) to best protect your interests. Upon knowledge of litigation, Lodestar Claims Professional will advise the Village of Oak Park contact no later than 48 hours and begin file preparation for assignment to the Village of Oak Park's preferred defense firms. Our litigation management procedures include collaborative development of defense strategies with counsel selected by the Village of Oak Park, preparation, and maintenance of files necessary for legal defense of claims or claim-related activity, attendance of hearings, depositions, mediations, where appropriate. Lodestar Claims Professionals are required to document their files timely and accurately with the outcome of each legal proceeding and will provide a summary of the outline to the Village of Oak Park. All fees and expenses for legal services are evaluated for adherence to budget, accuracy, and compliance with terms of negotiated fee agreements. Lodestar will pay all attorney, strategic partner, and other vendor fees within 30 days of receipt.

Legal Billing Solution

To help the Village of Oak Park save money on legal fees, we provide an optional Legal Billing Solution. This service utilizes technology and legal professionals to analyze bills against clients' legal guidelines and rate structures. To create clear expectations, Lodestar will collaborate with the Village of Oak Park to establish Customized Defense Counsel Guidelines and rates. The TPA Compliance Team at Lodestar will make sure the Village of Oak Park sees outcomes in the legal expenditure area through client onboarding, program support, and quality assurance. All aspects of invoices received from defense counsel will be reviewed by algorithm intelligence and legal professionals. This enables Claim Professionals to concentrate on strategic litigation management instead of legal invoice management. We can provide the Village of Oak Park reports of the findings to observe trends and drive down costs.

Diary Management

All open claims are maintained on a diary by Lodestar Claims Professionals and Lodestar supervisors. Claims on diary are reviewed at a minimum of every 90 days. Lodestar's supervisors have access to the Claims Professional's diary. All diary activities will have a corresponding entry or document in the claim file. Each claim has a diary set for a future date to ensure proactive file handling and resolution. Lodestar management teams and Quality Assurance Specialists review diary reports on a regular basis to address any delays in proactive file handling and to offer guidance.

Subrogation and Recovery

Lodestar offers specialized services for claims with subrogation and recovery opportunities throughout the United States. These services provide an enhanced level of focus, expertise, and specialization. Our subrogation specialists are highly trained in jurisdictional nuances and have developed state-specific strategies to maximize recoveries for our customers

Lodestar also specializes in **maximizing excess recoveries for** the Village of Oak Park through our fee-based recovery services. Lodestar will identify claims for excess reporting based on the requirements on the specific carrier and send the initial excess notification to the excess carrier in a timely manner as well as provide a copy for your records. Following the carrier notification, **Lodestar will aggressively pursue all possibilities of excess insurance reimbursement** and document their efforts in the claim log notes. This approach will apply for all potential recoveries including, but not limited to, third party liens, contribution, special/second injury fund, and others.

Claim Indexing and Special Investigation Unit

All workers' compensation and liability claims are indexed through the Insurance Services Office system, and the results are documented in the claim log notes. If there are records that are relevant to the claim, the Claims Professional will follow up to obtain those records. **Claims are automatically alerted to any new index matches within the 12-month period from the original indexing. The Claims Professional re-indexes the claims every 12 months thereafter**. Indexing claimants with the Central Index Bureau and the National Insurance Crime Bureau allows us to determine if the claimant has filed any other claims. This ensures that you are responsible only for the injuries related to your accident. Indexing is a critical tool in our fraud control program. Suspect claims are reviewed with the client and our Special Investigative Unit (SIU) to determine additional action steps.

Lodestar employs a full-time SIU that is made available to the Village of Oak Park. The SIU is staffed with industry fraud professionals with over 25 years of experience who are committed to detecting, deterring, and preventing fraud while protecting the assets of our clients. Our SIU works in conjunction with the LODESTAR Claims Professionals. This collaborative approach has resulted in significant savings for our clients and criminal insurance fraud prosecutions in many states. Lodestar's SIU is responsible for fraud investigations, fraud training, regulatory anti-fraud compliance, private investigator vendor management, and maintaining Lodestar's Anti-Fraud Plan.

Lodestar Medicare Solutions

Lodestar offers dedicated resources for oversight and management of Medicare and Medicaid products and services. Our Lodestar Medicare Solutions division provides our customers with access to **best-in-class services for all their Medicare and Medicaid needs**, including Medicare Set-Asides, Social Security checks, conditional liens, and other related services. We provide **extensive quality oversight** to these services and conduct regular audits and quality assurance initiatives to ensure compliance with Lodestar Service Level standards and expectations.

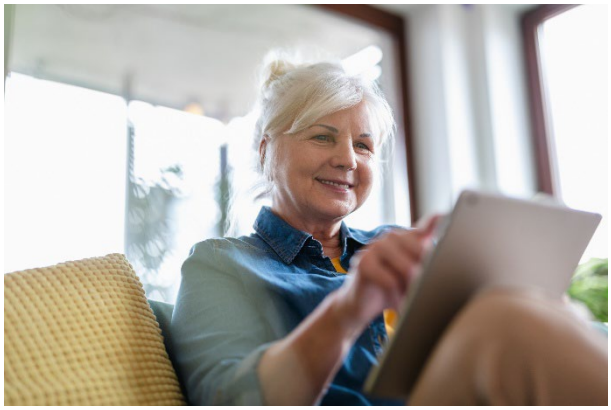
Claims Professionals will evaluate each claim on its specific merit and provide recommendations related to the need for Medicare Set-Aside, conditional lien searches, and structured settlement considerations. Recommendations are made in collaboration with case managers, defense counsel, and other parties.

Access to Telehealth

Telemedicine connects injured workers with trained physicians and physical therapists for medical diagnosis and treatment online, including prescribing medications when needed. Injured workers can have one-on-one video consultations right from the comfort of home via their smartphones, tablets, or computers.

Telerehabilitation

- Injured workers can avoid delays in getting the physical therapy (PT) they need with quality care through telerehabilitation
- Telerehabilitation offers one-on-one PT sessions with certified physical therapists via a smartphone, tablet, or computer
- 30- or 45-minute sessions are available 7 days a week in all 50 states



Medical Peer Review

Lodestar engages a board-certified provider, in the same specialty as the injured employee's treatment physician, to review the treatment file and **render an expert opinion of medical treatment** for reasonableness and necessity. The Peer Review physicians are also engaged to provide an expert opinion in cases that warrant further review as a part of the Utilization Review process or through other jurisdictional requirements.

Communication with Medical Providers, Employers, and Injured Workers

Lodestar believes in the importance of communication and relationship building at all levels of claim handling. It is our experience that claims with proactive disability management and ongoing follow-up lead to faster resolution and better ultimate outcome for our customers and their employees. The outline below will summarize Lodestar requirements for ongoing disability management and engagement on behalf of our Claims Professionals.

Ongoing and proactive communication with the client for return-to-work planning is important for disability management. When the physical status of the employee changes, updates of physical capabilities and their impact on return to work in transitional/modified/full duty capacity are communicated to the client. In addition, **the Claims Professional will contact the client at a minimum of 30-day intervals** unless other contact has taken place in the interim. The Claims Professional will verify return to work with the client and document the file accordingly.

The Claims Professional will utilize job descriptions obtained during initial client contact and provide them to the treating medical providers. It is the Claims Professional's responsibility to communicate with the medical provider confirming they received the appropriate job description and considered it during their assessment of the employee. If the client can accommodate light-duty work, the Claims Professional will obtain available job descriptions from the employer.

Ongoing and proactive **communication with the employee** is critical to facilitate prompt resolution of the claim and to **demonstrate empathy and caring**. On all indemnity claims, the Claims Professional will contact the employee at consistent intervals throughout the claim to establish a strong rapport and trust. Contacts and interactions may be more frequent if the claim circumstances change.

On files involving a Nurse Case Manager, the **Lodestar registered nurse will serve as a patient advocate** and provide an additional level of support to the injured employee by remaining in ongoing contact, closely monitoring treatment progression, reviewing ODG guidelines and working with medical provider on a clinically appropriate treatment and return to work plan.

The Claims Professional will **engage the treating provider at the onset of the claims** file and in coordination with the employee's treatment plan. The Claims Professional and/or Nurse Case Manager will follow up with the treating medical provider after the employee's medical appointments for updated work status, medical prognosis, updated diagnosis, appointment dates, and any additional treatment referrals.

If a Nurse Case Manager (telephonic or field) follows up with the medical provider, he/she will engage the Claims Professional to discuss the findings and agree on an action plan that would provide the best benefit to the injured employee while allowing him/her to progress along the treatment trajectory.

The Claims Professional or a Nurse Case Manager may elect to engage a **Lodestar Recover-At-Work Specialist** on select cases to assist with **additional expertise from a Vocational Rehab Specialist** that can work with the medical provider to adjust restrictions and allow for a safe return to work. Utilization of this offering will be done in consultation with the client unless outlined differently in Special Handling Instructions.

Comprehensive & Integrated Managed Care

Lodestar Care24

We believe that every employee deserves the highest-quality care services immediately following injury, should experience seamless access to appropriate care during recovery, and, when needed, be afforded coaching to navigate the path back to productive function at work.

Lodestar Care24 clinical best practices mandate a holistic view of each injured worker, evaluating all physical, co-morbid, psychosocial, and emotional factors that may impact recovery. This holistic approach improves an injured worker's overall health and helps prevent prolonged treatment and recovery after injury.

Our strategic approach to managing costs ensures that care is provided within a standardized delivery of products and programs. The **Lodestar Care24** cost strategy model leverages industry partners, best practices, and networks of credentialed and high-quality providers for all necessary medical, pharmacy, and ancillary care.

Injury Triage Program – Lodestar Care24

This optional **24/7/365 telephonic first notice of loss and clinical assessment** by a Registered Nurse (RN) of an employee's condition occurs immediately at the point of injury. The RN serves as a **patient advocate** in determining the most appropriate level of care and triaging the new loss. The RN provides treatment recommendations and/or refers the injured employee to a provider within the Lodestar Preferred Network. This interaction becomes the sole point of claim reporting to Lodestar and helps mitigate costs and utilization.

Customers that elect to participate in this offering are provided with a unique toll-free number that they can offer to their employees for claim reporting purposes. At the time of injury, the employee, or their supervisor (based on the client's internal set-up) utilizes this number to call in a claim. They will reach a telephonic nurse who will complete a triage of the injury and medical history and provide an assessment of future medical needs for the injured employee. Our **Lodestar Care24** product is specific to Lodestar and provides a number of great benefits to our clients, including e**arly access to clinical care, impact on OSHA recordables** by avoiding unnecessary treatment, **reduction in Emergency Room spend**, access to after-hour care when panel providers are not available, **reduction in lag times for reporting claims**, and improved network and panel penetration.

Risk Modeling

Lodestar Care24 risk modeling tools and clinical best practices enable our Claims Professionals and nurses to collaboratively **manage those claims at greatest risk to ensure optimal outcomes**. Our integrated model is designed to promote clinical intervention only when risk is evident and to apply the most appropriate level of clinical intervention at that time. Our risk model scores claim acuity based upon an injured worker's clinical, behavioral, and claim attributes for new and maturing claims. Unlike many competitive programs, our risk modeling does not stop with early claim indicators; we leverage data from our bill review, network, and pharmacy programs to flag risk at any point in claim maturity.

Claim Triage

When a claim is identified by the automated risk model, it immediately appears on the **Lodestar Care24** dashboard for nurse triage. The nurse reviews the risk acuity score in context of all available data in Claim Center (including compensability) to make a recommendation for management to the Lodestar Claims Professional. If case management is agreed upon, the triage nurse would transfer the case for immediate management (telephonic or field based) to avoid any gaps in care.

Telephonic Case Management (TCM)

Guided by our risk and triage model, the **Lodestar Care24** TCM nurses can engage injured workers at any point following their injury, throughout their recovery and return-to-work (RTW) process. Our nurses coordinate all care from medication management, surgical coordination, post-op recovery to outpatient care. Return to work planning begins on day one and is integrated into the overall treatment plan focusing on functionality versus disability. Using both nationally recognized and proprietary guidelines for medical necessity review and disability duration, **Lodestar Care24** case managers proactively **accelerate and facilitate care requirements**, as well as set clear expectations with the injured worker for returning to work.

Lodestar Care24 best practices mandate a holistic view of each injured worker, evaluating all physical, co-morbid, psychosocial, and emotional factors that may impact recovery. This holistic approach improves an injured worker's overall health and helps prevent prolonged treatment and recovery after injury.

Lodestar Care24 Signature Field-based Case Management (FCM)

Although Lodestar Claims and Risk Services strongly believes that we have designed a truly differentiated approach to Field Case Management (FCM) that delivers unique benefits to our clients through our approved case management partners, we also recognize that some clients want to maintain their historical vendor relationships.

The **Lodestar Care24** **Signature Program** offers a best-in-class approach to Field Case Management (FCM). Powered by a secure, state-of-the-art case management system and a national network of more than 1,300 FCMs, including nearly 250 who are bilingual, the program is designed to improve injured workers' experiences, ensure their access to appropriate care, and expedite their safe and productive return to the workplace.

- **Quality control** for case management performance and outcomes
- Multi-level **data security** protocols protect our customers and their injured workers' data
- Robust single-system data management for complete and consistent **program analysis**
- Seamless ability for our preferred FCMs to channel to appropriate care via preferred primary and ancillary Lodestar **provider networks**

Industry leading impact for Lodestar and its customers:

RTW/MMI: 89.7%

Business Days Saved: 57.3*

* Based upon ODG standardized benchmark

However, if a customer chooses to maintain their legacy Case Management supplier relationship while also considering our mutual need for data security, Lodestar can accommodate by enabling ***My Favorite Nurses*** Case Managers to enter their notes and reports into the Signature secure case management system. This system communicates directly into the Lodestar claim system via secured electronic transmission.

As detailed above in the proposal to meet your security requirements, Lodestar has a comprehensive Information Security Management program in place to protect the data assets of the organization and our customers. Lodestar undergoes an annual security audit each fall and mandates a strict security audit for all data trading partners.

Leveraging our secure Signature case management platform means your injured workers' information is protected throughout the process. This approach also provides a current view of all case management activity which is transmitted twice daily, making it visible to our Claims Professionals and to our customers through our RMIS system.

Catastrophic Case Management (CAT)

Lodestar Claims and Risk Services implemented a strategic catastrophic case management partnership model that leverages **internal clinical management resources** along with expert vendor delivery. Through defined claim and clinical criteria, Lodestar partners with Paradigm Corporation who specializes in the management of catastrophic injuries such as head trauma, severe burns, major limb amputations, and spinal cord injuries resulting in paralysis. Combined with Lodestar's applied internal clinical and claim management expertise, Paradigm's specialized expertise and network of catastrophic medical providers enables Lodestar to manage these claims to a better outcome at a lower cost.

At the recommendation of Lodestar's Managed Care Liaison and/or Claims Professional, cases are referred to Paradigm which then develops an Outcome Plan for review and approval. The Managed Care Liaison completes a comprehensive contract value analysis and presents/discusses with the applicable claims team for contract decision making purposes. Lodestar actively manages all Paradigm cases and does not accept all Outcome Plans. Lodestar and Paradigm provide a comprehensively evaluated & collaborative approach to such cases. Each complex or catastrophic case is managed by Lodestar specialized resources and proactively reviewed with Paradigm monthly to help drive the best possible clinical and claim approach and to provide the best treatment plan appropriate for the injured worker at a reduced cost.

Utilization Review (UR)

Our UR Services integrate with case management, bill review, and pharmacy benefit management to promote **greater control** over care for injured workers and medical spend across the continuum of care. **Lodestar Care24** UR offers rigorous clinical reviews, consistently applying guidelines to all claims. This reduces unnecessary medications, surgeries, diagnostics, and physical therapy.

Lodestar Care24 UR helps employers meet workers' compensation utilization review regulatory requirements while reducing administrative costs, ensuring recommendations are defensible, and streamlining the decision-making process resulting in outcomes with turnaround times that accelerate the delivery of approved, appropriate medical care.

Preferred Provider Networks (PPO)

Lodestar utilizes strategic partnerships throughout its territories to offer clients access to a comprehensive provider network for workers' compensation claims. We strive to **optimize network penetration and savings** by actively managing a matrix of preferred network options within and across states. A team approach is employed by Lodestar's Managed Care, Claim and Account Management staff to educate clients on the benefits of using network providers and encourage injured workers to seek treatment from high quality providers for more efficient and effective injury management.

Out of Network Program

When use of network providers is not possible, Lodestar offers an out-of-network negotiation and cost base pricing model program which provides **savings below traditional state fee schedule** or usual and customary charges for certain medical services. This often provides savings opportunities with providers who choose not to participate in PPO networks. This program also allows us to capitalize on savings for prompt payment with large bills that fall outside of jurisdictional rules for exceptional facility services such as critical access hospitals, traumatic injuries, or significantly high levels of care.

Ancillary Services

Lodestar Claims and Risk Services offers a fully integrated ancillary suite of products and services in addition to our broad-based national and regional PPP networks. Lodestar has developed close partnerships and customized programs with **leading industry service providers** to offer injured workers fast access to high-quality physical therapy, diagnostics, durable medical equipment, home health, transportation, etc. to help restore function and reduce claim and indemnity duration and costs. Lodestar utilizes an ancillary referral tool that enables claims staff to make referrals quickly and easily via a secure data hub to our preferred service providers. Managed Care closely monitors performance and strategically promotes or demotes service providers based on results, location, and client needs. Lodestar and our preferred ancillary service providers engage in a process of continuous improvement to optimize the experience for the injured worker.

Complex Bill Review

Lodestar's complex bill review solution includes coding specialists and registered nurses who perform a technical audit and clinical review of medical bills to ensure coding accurately reflects the services billed. **Our average national customer savings off billed charges in 2025 was 64%; PPO penetration is 67.5%.** The team members possess a thorough understanding of the rule base from the American Medical Association, American Association of Orthopedic Surgeons, Centers for Medicare and Medicaid, and states' workers' compensation regulations. If errors are detected by this team, the bill is adjusted and/or sent back to the medical provider for an explanation.

Pharmacy Benefits Management Program (PBM)

Lodestar Claims and Risk Services offers a comprehensive pharmacy solution including a retail pharmacy network and home delivery services. The model offers full adjudication of physician-dispensed and third-party invoices for pharmaceutical products. These programs provide a comprehensive pharmacy profile on a claim which helps to **manage the rising costs of prescription drugs** through drug utilization review and negotiated rates.

Clinical Pharmacy Intervention Program (Rx+)

Lodestar has a robust Pharmacy Intervention Program in place which utilizes multiple resources, including a team of Registered Nurses who are fully integrated within the Lodestar claim process. The **Lodestar Care24** Rx+ team receives all non-formulary medications for assessment, intervention, and application of decision. The assessment includes the history of the claim, comparison of treatment to evidence-based guidelines, and jurisdictional regulations. The team uses various **intervention strategies**, including outreach to prescribers and pharmacists, Claims Professionals, assigned nurse case managers, drug testing and monitoring, peer-to-peer reviews, or utilization review to address prescription drug conflicts. The model is designed to improve injured worker safety by applying a **clinical assessment on any non-formulary prescription**, which includes opioids, muscle relaxants, topicals, compounds, and physician dispensing.

Lodestar partners with a Pharmacy Benefit Manager (PBM) that applies Lodestar's customized injury-specific formulary or state-mandated formularies. The PBM coordinates the pharmacy networks, facilitates the dispensing and payment of prescriptions, and initiates various clinical interventions to drive safety and cost-effective strategies, like home delivery. The PBM provides data analytics and risk score capability to further enhance the assessment capability of **Lodestar Care24**.

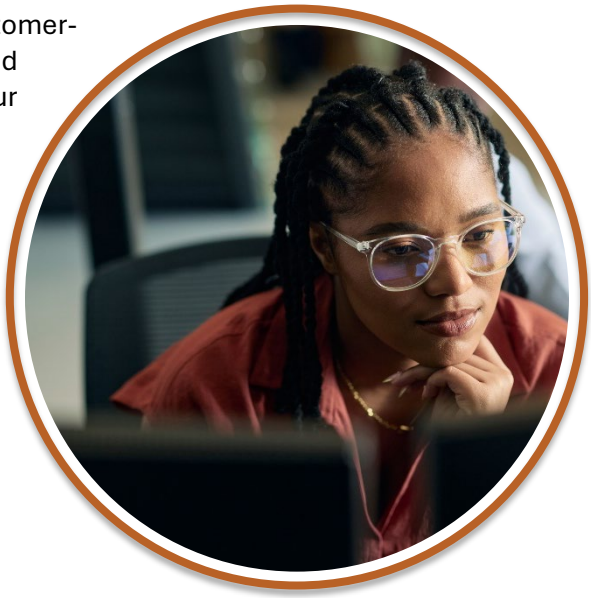
Lodestar also offers a fully integrated, programmatic drug screening program to provide an additional layer of patient safety as well as reduce fraud, waste, and abuse.

Cost Analysis Products

Lodestar Managed Care provides two medical cost analysis services that support Claims with appropriate future medical cost evaluation based on past and current medical trends specific to each claim. Lodestar's Medical Cost Projection service aids Claims Professionals in establishing **appropriate and comprehensive future medical reserve considerations** which can become a key component for settlement negotiations as well as critical medical exposure definition. Lodestar's Medical Cost Analysis service provides a clinical **assessment and validation of projected medical reserves** aligned with projected cost of treatment which supports the Claims Professionals with potential needed medical reserve increases. Both services are implemented and managed by internal Lodestar clinical experts with comprehensive understanding of Claims medical cost strategies and dependencies.

Account Management

Account Management



Our Account Management teams are highly experienced, customer-focused experts in multi-line claims handling, data analytics, and strategic program management. We get to know you and your business and leverage our knowledge of the claims industry and regulatory landscape to help achieve your objectives. Together, we establish and execute an Account Management action plan, driven and sustained by partnership, advanced technology, proven claims processes, and results that speak for themselves.

- 24/7 Customer Service Center
- Client Implementation Team
- Risk Control & Safety Resources
- Regulatory & Compliance Support
- Business Metrics & Data Analytics
- Carrier Relations Practice
- Financial Services
- Risk Management Tools

Special Handling Instructions

Understanding and meeting the unique needs of our customers is at the heart of our service model. Lodestar prides itself on being a ***high-touch, customer-focused organization*** with strong customization capabilities. As a part of onboarding all Lodestar clients, we spend time learning your requirements, your internal structure, unique program goals, and custom requests. This information is utilized to develop a ***comprehensive, customized Special Handling Guideline* document** that is stored in our claims system for the reference and utilization by Lodestar Claims Professionals and internal supporting departments. This document includes guidelines for handling your standard as well as catastrophic claims.

We work closely with you to develop and re-evaluate this document on an ongoing basis to ensure the timeliest information is provided to our staff. The Special Handling Instructions are developed to memorialize a mutual agreement between our organizations about how we will be servicing your program. It can include reserve notifications, initial contact information, specifics about benefit payments, settlement authority levels, attorney selection, and other areas important to you and your team.

Claim Reviews and Status Reports

We are committed to providing the Village of Oak Park with all the tools and information necessary to effectively manage their programs. This is accomplished by providing access to detailed claims information through Lodestar RadiusR®, by conducting in-person or telephonic claims reviews, and through the presentation of our Account Performance Consultation Reports.

A proactive, targeted review of claims is essential for identifying key risk factors and developing impactful strategies to support resolution. At Lodestar, we work alongside you to devise an innovative approach for resolving your claims, ultimately benefiting your organization, brand, and employees.

How does Lodestar bring a fresh perspective to the traditional claim review process?

- **Partnership-driven model** encourages collaborative discussions among Claims Professionals, clinical staff, strategic partners, client risk management team members, and broker and carrier partners.
- **Enhanced file selection process** tailored to the needs and preferences of each client.
- Lodestar utilizes **an analytical claim selection approach** based on key triggers to identify files that benefit from strategic discussion and collaborative planning. This focused method allows us to accurately target developing claims and prioritize strategies with the most significant impact on your total cost of risk.
- **Full data field customization suite** allows our clients to direct the content of their claim status reports, providing as much or as little information in a format most effective for meeting the objectives of the claim review. Whether you are coordinating a claim review for your departments/locations/facilities or require a high-level financial claim discussion with your CFO/Treasurer, the Lodestar Claim Review Status Report format is designed to pinpoint and present the exact information needed.
- We utilize **key claim indicators coupled with our proprietary predictive severity model** to ensure a productive, collaborative discussion that drives measures for improving outcomes and mitigating claim costs.

Account Performance Consultation

Our comprehensive Account Performance Consultation is customized for your program. It marries cutting-edge claims and risk control data and analytics with socioeconomic trends and industry benchmarking to identify and align with key objectives for your business to help you achieve your preferred outcomes. This process allows us to partner with you to identify areas of program success and areas for improvement, paving the way for tactical and collaborative recommendations.

Risk Control Services

Drawing on **100+ years of safety, risk management, and commercial insurance experience**, our risk control team provides cost effective safety and risk management services to organizations throughout the United States. With more than **60 risk control consultants on staff**, our risk control services are designed to prevent claims, support effective safety and risk management practices, and lower the cost of risk for our clients.

Outlined are core skills of the Lodestar's risk control team and how we believe the Village of Oak Park will benefit from an expanded engagement with our risk control team if **you choose**. *Please note that these services are only applicable to clients who purchase the program.*

Data Analytics

Organizations that leverage data analytics will better understand their business, their industry, their strengths, and their opportunities for improvement. **Lodestar will bring clarity to complex data, analyze loss trends** to pinpoint areas needing improvement, and reduce the frequency and severity of your losses and costs. We provide analytic solutions, including **Annual Performance Consultation, loss trending analysis, industry comparison,** and goal establishment.

Risk Assessment

Lodestar risk control can support the Village of Oak Park's risk management process by assessing exposures to identify risk characteristics which drive performance and selection.

Safety & Risk Management Training

Lodestar's risk control team is also available to develop and present customized safety and risk management training events to address the specific needs of the Village of Oak Park and its employees via remote training platforms or through live, on-site training.

Risk Improvement Support

Every organization can improve their safety and risk management performance. Using data analytics, we work with organizations to understand historical loss trends and develop plans to prevent claims and reduce claim costs.

OSHA & Regulatory Compliance Support

To help our clients manage their OSHA compliance and other regulatory safety standards, we offer a **broad range of safety training and safety program assistance designed to ensure compliance and keep employees safe**. We routinely provide training and program development around OSHA lockout / tagout, fall protection, hazard communication, ergonomics, blood borne pathogens, personal protective equipment, emergency planning, and workplace violence to name a few. To support these efforts, many of our consultants are authorized **OSHA 10 and 30-hour outreach trainers**. In addition to OSHA compliance, we also offer many programs designed to manage the liability exposures associated with facility conditions, motor vehicle operations, and employment practices.

OSHA REPORTING & SPECIALIST SERVICES

Lodestar offers our clients access to our proprietary **OSHA tool through Lodestar RadiusR®,** our online risk management information system. This tool offers users the ability to quickly and efficiently track the recordability of OSHA cases, easily complete, and generate OSHA 300 and 300A logs in compliance with OSHA regulations at no additional cost.

We also offer trained OSHA Recordkeeping Specialists who can help alleviate the organizational burdens of OSHA tracking and recordability. **These specialists can help with recordability, tracking, and OSHA log generation.** All services are performed in accordance with the OSHA requirements and special handling guidelines for our clients, including:

- Assistance with customized reporting
- Reporting by state, region, or specific location
- Flexible report generation frequency to support our clients' unique OSHA compliance needs

Websource®

Lodestar's clients also have access to Websource®—an online portal of safety and risk management resources exclusively for our clients. Our Risk Control Consultants designed Websource® to offer convenient access to practical loss prevention and safety information and solutions, including technical bulletins, safety and compliance training programs, monthly webinars led by Lodestar industry specialists, as well as tools and resources to enhance your safety and health programs. **There is no charge for this service.**

D. Transition Plan

Transition plan: Outline how the firm would propose transitioning from the current provider to control by the responding firm. Include the following additional information:

1) **Describe process flow for claims receipt, processing/handling, investigation and payment.**

When a claim is reported, Lodestar initiates immediate intake and triage:

- Claims may be submitted via phone, email, secure portal, or electronic data feed.
- All First Reports of Injury (FROI) are entered into the claim system within 24 hours.
- The claim is assigned to the appropriate adjuster (Lost Time or Medical-Only) based on injury type and severity.
- The Village receives confirmation of claim setup and initial contact.

Once the claim is created:

- The adjuster reviews the FROI, medical documentation, and employer statements.
- The adjuster establishes initial reserves using Lodestar's reserving methodology.
- The employee, supervisor, and medical provider are contacted within 24 hours.
- Compensability is evaluated based on statutory requirements and available evidence.
- This early triage ensures timely direction and reduces downstream delays.

Lodestar conducts a thorough investigation tailored to the nature of the claim:

- Employee interview to confirm injury details
- Employer and witness statements
- Medical record review and provider communication
- Job description analysis
- Surveillance or field case management, if appropriate
- Recorded statements when needed

All investigative activity is documented in the claim system and visible to the Village.

Throughout the life of the claim, Lodestar ensures:

- Regular contact with the injured worker, employer, and providers
- Monitoring of medical progress and treatment plans
- Return-to-work coordination
- Litigation management if counsel is assigned
- Reserve reviews at required intervals
- Compliance with all state reporting and filing requirements

Adjusters maintain proactive communication and provide the Village with timely updates.

All medical bills are routed through Lodestar's bill review system:

- Application of State Fee Schedule
- Application of PPO network discounts
- Coding accuracy checks and duplicate bill detection
- Integration with the claim file for transparency

Savings reports are available to the Village at any time.

Once bills or indemnity payments are approved:

- Payments are issued through Lodestar's secure payment system
- All payments follow Monroe County Administrative Instruction 7400.4
- Payment details are documented in the claim system

- The Village receives real-time visibility into all financial transactions
- Adjusters ensure accuracy and compliance with statutory deadlines

2) Describe process for finalizing/closing a claim.

A claim is closed when:

- Medical treatment is complete
- The employee returns to full duty
- All indemnity and medical payments are finalized
- Subrogation or recovery opportunities are resolved
- All documentation is complete and reviewed

A closure summary is provided to the Village.

3) Explain the transition process of existing claims from current TPA to a new TPA.

Lodestar has had the privilege to partner with the Village of Oak Park since 2017. As such, no transition plan would be required should the Village choose to retain Lodestar as their third party administrator. This ensures there is no disruption of services and offers a cost savings to the Village as they will not have to pay to transition their claims to a new service provider.

4) Identify the criteria and process for assignment of a case manager to claims.

Lodestar uses a criteria-based, needs-driven process to determine when a case manager, particularly a field or nurse case manager, is assigned to a claim. The goal is to ensure timely medical recovery, cost control, and effective coordination among all parties. A case manager is assigned when one or more of the following conditions are present:

- Serious or complex injuries - e.g., fractures, surgeries, head injuries, spinal injuries, significant trauma
- Extended or uncertain recovery timelines - When medical progress is slower than expected or complications arise.
- Multiple medical providers or specialties involved - To coordinate care and avoid duplication or conflicting treatment plans.
- Return-to-work barriers - When modified duty, restrictions, or job-specific accommodations require coordination.
- Potential for high claim exposure - Including high medical costs, prolonged disability, or litigation risk.
- Communication challenges - Such as difficulty reaching the employee or provider, or when additional support is needed.
- Physician recommendations - When treating providers request case management involvement.

5) Describe programs or support provided for developing Return to Work and Work Hardening Programs.

Lodestar offers a Recover-At- Work solution for our customers looking to improve their outcomes in this area. Lodestar utilizes Recover-At-Work specialists (RAWS) **trained in vocational rehabilitation with certifications in rehabilitation specialty and occupational health.** These resources are utilized to assist our customers with analysis and development of a comprehensive job demand bank, creation of modified duty positions within unique departments, and understanding complexities of each employer's business. Our RAWS are uniquely positioned to provide our customers with solutions and recommendations around development and implementation of the return-to-work programs at departmental or organizational levels. Additionally, RAWS are often utilized to provide transferrable skill analysis, resume reviews, and assist with

cross-departmental job placements within the employer's organization. Unlike a formal vocational rehabilitation specialist assigned by the state, through defense counsel or due to litigation, the RAWS is focused on offering injured employees support and confidence necessary for the return to work in temporary or permanent capacity.

E. Price Proposal

Price Proposal: Service Providers shall provide an itemized list of available procedures and associated prices to fulfill the scope of services outlined in this RFP including

1) **All claim administration charges that may be charged back to individual claims under either pricing option. Please quote two ways:**
   i. **Flat Fee - How many claims would be included and what is the charge per claim over that allowed number?**
   ii. **Per Claim Fee for medical only claims and indemnity claims (which include legal claims).**
2) **No additional charges will be allowed for items listed above.**

Lodestar Claims & Risk Services, Inc. ("Lodestar"), previously PMA Management Corp., offers a complete and comprehensive claims management and risk services program.

Claims Handling Activities:

- Investigation
- Three-Point Contact
- Action Planning
- Claims Processing
- Compensability Decisions
- SIF Investigation
- Fraud Prevention
- Account Management
- Quality Assurance Program Oversight
- Structured Settlements
- Pre-Settlement Advisories
- EDI with State as Required
- 1099 Reports
- Settlement Authority
- Resolution Negotiation
- Litigation Management
- Check Issuance
- Payment Registers
- Claim Review Meetings
- Annual Performance Consultation Meeting
- Self-Insurance Re-Application Assistance
- First Report of Injury Filed with State Agency
- Customized Claim Handling Instructions
- Reserve Advisories
- Patriot Act Compliance
- Office of Federal Asset Control Compliance
- Claim Acknowledgements
- Direct Deposit of Indemnity Payments

Care+ Managed Care:

- Medical Bill Review
- Complex Bill Review
- Out-of-Network Bill Review
- Early Intervention Nurse Assessment on Lost Time Claims
- PPO & Specialty Network Access
- PPO Radius Listing & Mapping to Locations
- Pharmaceutical Benefit Management
- Case Management

Safety/Loss Prevention Services:

- Websource Access
- Lodestar Technical Bulletins
- Lodestar Monthly Web Events Training
- 300+ Safety Videos/DVD Library
- WC/Liability Performance Indicator Report
- Risk Management Assessment
- Lodestar Insights White Papers
- Lodestar Engineering & Safety Services

RMIS Services:

- Executive “Dashboard”
- Internet Claim reporting via RadiusR
- Claim Number Notification
- Real Time Access to Claim Log Notes
- Client Diary System
- Loss Analysis Reports
- Care+ Savings Reports
- Reserve Analysis Reports
- Email Claims Professional Capabilities
- “Schedule My Reports” Feature

Loss Adjustment Expenses:

- Independent Medical Exams
- Medical Bill Review
- Complex Bill Review
- Out-of-Network Bill Review
- Case Management Expenses
- Utilization Review Expenses
- SIF / SITF Recovery
- PPO Network Access Fees
- Private Investigators / SIU Capabilities
- Medicare Section 111 Reporting Fee
- Central Index Bureau /National Insurance Crime Bureau
- Legal Fees / Attorney Fees
- Records Reproduction Fees
- Medicare/Medicaid Conditional Payment Review

Client is responsible for the payment of all Loss Adjustment Expenses including, but not limited to, the above.

Pricing Option # 1 – Life of Contract - Flat Fee

Lodestar will provide comprehensive Life of Contract Flat Fee Third Party Administration Services for all new claims as represented in your proposal for the period August 1, 2026 to July 31, 2033, as follows:

Contract Type		Year 1	Year 2	Year 3	Year 4	Year 5
Life of Contract – Flat Fee		$29,900	$29,900	$29,900	$31,500	$31,500
Included Services						
Claims Handling		Included	Included	Included	Included	Included
Claim Review (Telephonic or Virtual)	4 reviews	Included	Included	Included	Included	Included
Stewardship Meeting	1 meeting	Included	Included	Included	Included	Included
Unbundled Services						
Annual Administration Fee		$5,500	$5,500	$5,500	$5,500	$5,500
RadiusR ($500 each additional user)	7 users	$7,000	$7,000	$7,000	$7,000	$7,000
Subrogation Specialist	% recovery	20.0%	20.0%	20.0%	20.0%	20.0%
Medical Bill Review	per bill	$9.50	$9.50	$9.50	$9.50	$9.50
Cost Containment (Excluding State Fee/UC)	% of Savings	29.0%	29.0%	29.0%	29.0%	29.0%

- Pricing is for a 5-year contract with 2 optional extension years subject to a 5% rate increase.
- This quote is valid for 90 days from the date presented. If the quote is accepted after 90 days, we reserve the right to re-price the account.
- For Flat Fee Pricing agreements, if during the term of the contract, any individual occurrence results in more than ten claimants, as determined by Lodestar, then the following additional claims handling fees above and beyond the Annual Flat Fee shall apply: beginning with the 11th claim and for every claim thereafter, $850 will be charge for each Lost Time Claim; $125 for each Medical Only Claim; and $40 for each Record Only Claim.

Pricing Option # 2 – Life of Contract Per Claim

Lodestar will provide comprehensive Life of Contract Per Claim Third Party Administration Services for all new claims as represented in your proposal for the period August 1, 2026 to July 31, 2033, as follows:

Contract Type		Year 1	Year 2	Year 3	Year 4	Year 5
Life of Contract – Per Claim						
Lodestar Per Claim Information		**Claim Fees**	**Claim Fees**	**Claim Fees**	**Claim Fees**	**Claim Fees**
Workers' Compensation – Lost Time		$929	$929	$929	$975	$975
Workers' Compensation – Med Only		$155	$155	$155	$162	$162
Workers' Compensation – Record Only		$25	$25	$25	$25	$25
Included Services						
Claims Handling		Included	Included	Included	Included	Included
Claim Review (Telephonic or Virtual)	4 reviews	Included	Included	Included	Included	Included
Stewardship Meeting	1 meeting	Included	Included	Included	Included	Included
Unbundled Services						
Annual Administration Fee		$5,500	$5,500	$5,500	$5,500	$5,500
RadiusR ($500 each additional user)	7 users	$7,000	$7,000	$7,000	$7,000	$7,000
Subrogation Specialist	% recovery	20.0%	20.0%	20.0%	20.0%	20.0%
Medical Bill Review	per bill	$9.50	$9.50	$9.50	$9.50	$9.50
Cost Containment (Excluding State Fee/UC)	% of Savings	29.0%	29.0%	29.0%	29.0%	29.0%

- Pricing is for a 5-year contract with 2 optional extension years subject to a 5% rate increase.
- This quote is valid for 90 days from the date presented. If the quote is accepted after 90 days, we reserve the right to re-price the account.
- Claims handling fees are tentative based on estimated claim counts. Claims reconciliation will be performed 60 days after expiration to determine the actual number of claims received. Final claims handling fees will be determined by the actual number of claims received.

Exhibit A – Other Services Fee Schedule

All fees are billed as incurred unless specifically agreed otherwise.

Service Type	Amount
Managed Care:	
Medical and pharmacy bill review and repricing	$9.50 per bill, plus 29% of savings over and above fee schedule and/or usual and customary
Utilization review	$130 per review
Field Case management services	$125 per hour plus expenses
Clinical case management services	$125 per hour plus expenses
Catastrophic Clinical Services	$185 per hour
Medical consultant Peer review	$265 per review
Care 24 Nurse Triage Service	$105 per call
Care 24 Enrollment Fee	$3,000
Care Rx+ Pharmacy Intervention Services	$75 per review
Care 24 Translation	Prevailing Market Rate
Medical Director	$250 per hour
Medicare Solutions	
Section 111 Reporting	$9.50 per claim queried
Medicare Set Aside, Revision and Submission Services: MSA, MSA Submissions to CMS, Revisions or Update to Prior MSA, Future Medical Allocations, Life Care Planning and Review; Medicare or Social Security Verification	Prevailing rate for each service Rush fees apply for MSA completed within 5 business days Complimentary Annuity Quote with MSA Applies to all coverage types
Medicare and Medicaid Secondary Payer Services and Lien Resolution Services: Conditional Payment Research, Canvass, Evaluation, Disputes, Appeals, and Negotiations	Prevailing rate for each service Applies to all coverage types
Medical Cost Projections	$1,900 each
Demand Package Nurse Review	$1,900 per review
Update (within 6 months of prior Demand Package Nurse Review)	$950 per review
Demand Package Medical Bill Analysis	$400 per review
Update (within 6 months of prior Demand Package Medical Bill Analysis)	$200 per review
Information Systems:	
RMIS fee	$7,000 $500 per year each additional user
Standard Data Conversion	$13,500
Customized Reporting/Programming	$200 per hour
Standard Data Feed Set-Up	$3,500 per year
Standard Data Feed	$300 per month

Risk Control:	
General	$160 per hour (AOS), $175 per hour (CA)
Industrial Hygiene Services	$180 per hour
Special Projects	To be determined
Lodestar Websource	Included
Lodestar Organizational Safety Institute	Included
Claim Adjustment:	
Vocational Rehabilitation	$105 per hour
Claim Indexing	Prevailing Market Rate
Legal Bill Analyzer	3% of gross billed charges
Other:	
Administrative	$5,500
Account Implementation	$5,000 minimum
Claim intake	Internet or Data Fee: included
Non-standard claim intake which includes call	$15 per claim
Subrogation Specialist Services	20% of gross recovery
Excess Recovery Services	2% of gross recovery
Second Injury Fund Recovery Services	20% of gross recovery
Standard Data Extract (upon termination)	$6,000
OSHA reporting preparation services	$20 per incident
OSHA Special Projects	To be determined
Each Claim Review in excess of two per year	$2,500 per review plus Lodestar Expenses
Onsite claim review	Travel incurred by Lodestar personnel is reimbursed in full by the client
Lodestar Staff Attendance at Legal Proceedings	Travel and expenses incurred by Lodestar personnel reimbursed in full by client
Physical File Storage	To be determined

Lodestar Funding Options

Lodestar offers ACH direct deposit and expedited payments **at no additional cost to the Village of Oak Park**. Lodestar claims loss funding options are outlined below.

Traditional Escrow

With this option, the client will provide Lodestar with an escrow of three months of estimated paid losses and loss adjustment expenses. Lodestar will pay for the claims throughout the month with this account. At the end of the month, Lodestar will bill the client for losses and loss adjustment expenses paid along with the appropriate claims handling fees (if applicable). The client will also receive detailed loss reports showing all claims activity for the month and a cumulative claims summary report by policy/contract.

Direct Funding

With this option, the client will receive a daily, weekly, or monthly electronic communication from Wells Fargo Bank with the total claim checks issued that day, week, or month. On the next business day, Wells Fargo will initiate an ACH transfer to deduct the previous days' (weeks'/months') claims from the client's bank account. Payment is deposited directly into a sub-account, which is unique to the client. At month-end, the client will receive an AMPS billing statement for the loss-handling fees. The client will also receive detailed claims reports showing all activity for the month and a cumulative claims summary report by policy/contract. Reimbursement by check or client-initiated wire transfer/ACH transfer is required for payment of all fees.

Lodestar eBilling Solution

eBilling* is available to Lodestar clients for loss funding and service fees bills. With eBilling you can easily access and view your bills electronically through our secure internet site instead of receiving paper copies through the mail.

F. References

References: The Village will notify all references identified in the qualified vendor's response.

a. **Provide a reference list including any municipal clients within the State of Illinois**
b. **Provide evidence of the firm's experience in providing service for other unionized municipalities.**
c. **List other accounts the firm has served and indicate whether the Village may independently contact such accounts for an appraisal of comparable services they have received from your firm**

Lodestar people, programs, and processes are designed for delivering positive client experiences to employers and their constituents. Select current clients shown below. Lodestar invites you to contact these customers to learn more about their experiences with our company and our unique holistic approach to reducing their total cost of risk. **To protect the privacy of our clients, please reach out to *Todd Jacobsen* at least *two days* before contacting these customers.**

Current Clients	Contact	Telephone Number	Term/Scope of Service
Metropolitan Water Reclamation District of Greater Chicago 111 E. Erie St. Chicago, IL 60611	Brittney Wyatt Risk Manager wyattb@mwrd.org	312-751-5757 (office) 773-490-9205 (mobile)	*Workers' Compensation and Casualty TPA Service Provider from April 2013 to present*
Community High School District 218 10701 South Kilpatrick Ave Oak Lawn, IL 60453	Anthony (Tony) Corsi Risk Manager anthony.corsi@chsd218.org	Phone: (708) 424-2000	*Workers' Compensation TPA Service Provider from August 2014 to present*
City of Peoria, Illinois 419 Fulton Street Room 200 Peoria, Illinois 61602	Ed Hopkins, SHRM-SCP Human Resources Director	Office (309) 494-8585 Fax (309) 494-8587	*Workers' Compensation TPA Service Provider from October 2010 to present*

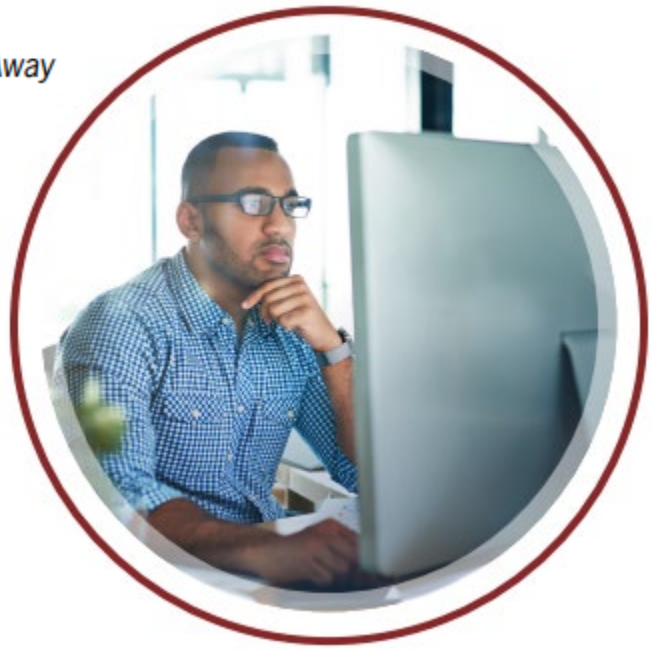
G. Forms and Reports

Forms and Reports: Describe the firm's analytics platform, dashboard capabilities, predictive modeling tools, and ability to generate custom reports for municipal risk management purposes. Provide samples of all forms your facility uses to report and analyze worker's compensation claims and specify how quickly reports will be available for the Village. Indicate which results can be completed, submitted or retrieved online. Please provide samples of invoices, statements and any other accounting reports. Indicate which of these documents can be accessed online.

Lodestar's RMIS System

RADIUSR

Your Risk Management Data the Right Way, Right Away



RADIUSR: LODESTAR's Intuitive Risk Management Information System (RMIS)

RADIUSR is designed to make analyzing claims and risk data easier and more effective. It delivers timely and meaningful loss information, enhances decision-making, and improves data analysis capabilities.

A RMIS Designed for You

RADIUSR is a secure, cloud-based RMIS that delivers fast access to claims details and data-driven insights through an easy-to-use application. It provides a consolidated and organized view of claims data, serving as a single source of truth for stakeholders.

RADIUSR Transforms Risk Management by:

- Providing streamlined access to claims data, enabling faster and more informed decision making
- Providing access to new, enhanced dashboards and features
- Automating workflows, reducing manual tasks, and increasing efficiency
- Enhancing data accuracy and reducing errors
- Facilitating seamless communication and collaboration across the organization

Providing access to a vast reporting library to support data needs

Business Metrics and Analytics

Benchmarking

Lodestar offers Business Metrics and Analytics services that assist with interpreting your historical business data using iterative methodologies, statistical and predictive models to **transform your data into business insights** that can be leveraged to make business decisions, improve productivity, and reduce expenses. These solutions help our clients develop trend analysis and provide them with recommendations for actionable items that can help improve their outcomes. Lodestar post-loss services include **peer, industry, and jurisdictional benchmarking**. Lodestar offers **sophisticated business analytics model** that includes extensive data aggregation via our state-of-the-art claims system, data mining by our team of highly specialized business analysts, **predictive analytics focused on directing the right claim to the right resource at the right time**, and a suite of data visualization tools.

Client Reporting

Lodestar Business Metrics and Analytics assists our customers with solving for recommendations related to their unique business needs. We utilize your data to provide information and recommend actions that could help improve outcomes, reduce total cost of risk, and enhance your program.

Our reporting capabilities are expansive and can support all our customers' needs, including **scheduled and ad-hoc reporting related to deductibles, open excess recoveries**, numerous variations of customized loss runs, customized data fields, and any other analytics required by our clients.

Sample Reports

ACCOUNT NAME (NUMBER)

WC Claims with Incurred Changes

Valued as of 04/30/2026

Claim Number	Injured Worker	Accident Date	Loc Code	Location Description	Begin Incurred	End Incurred	Incurred Change
Policy: 0782334 292500 Effective 07/01/2025 - 07/01/2026							
W005092605		3/7/2026	211000	FIRE-SUPPRESSION	37,773	104,248	66,475
W004995805		9/21/2025	311007	DEPT. OF PUBLIC WORKS - PARKS	43,689	95,352	51,663
W004975122		8/6/2025	211000	FIRE-SUPPRESSION	46,385	82,958	36,573
W004623745		7/10/2025	211004	FIRE MARSHALL OFFICE	63,176	91,858	28,682
W005153776		4/21/2026	212001	POLICE COMMUNITY SERVICES BUREAU	0	28,584	28,584
W005154042		4/22/2026	311006	DEPT. OF PUBLIC WORKS-WASTE & RECYCLING	0	24,555	24,555
W005154067		4/18/2026	212000	POLICE ADMINISTRATIVE SERVICE BUREAU	0	23,858	23,858
W005149897		4/9/2026	721	HARTFORD PUBLIC LIBRARY	0	21,483	21,483
W005021654		11/12/2025	212003	POLICE PATROL	57,631	78,931	21,301
W005062140		1/25/2026	212003	POLICE PATROL	26,926	45,294	18,367
W005040191		12/7/2025	212003	POLICE PATROL	81,313	99,593	18,280
W005146251		3/26/2026	311006	DEPT. OF PUBLIC WORKS-WASTE & RECYCLING	0	13,324	13,324
W005069711		2/6/2026	311001	DEPT. OF PUBLIC WORKS - FACILITIES	11,375	24,512	13,137
W005147942		4/1/2026	212003	POLICE PATROL	0	12,225	12,225
W005086037		3/2/2026	R02	RESTRICTED - POLICE	21,069	33,156	12,087
W005153149		4/19/2026	212003	POLICE PATROL	0	11,738	11,738
W005051830		12/23/2025	142	SPORTS AND REC	39,144	50,372	11,228
W005095332		3/4/2026	211000	FIRE-SUPPRESSION	0	9,250	9,250
W004973597		8/2/2025	212001	POLICE COMMUNITY SERVICES BUREAU	104,653	112,991	8,338
W005146681		3/27/2026	211000	FIRE-SUPPRESSION	0	8,125	8,125
W005146700		3/27/2026	211000	FIRE-SUPPRESSION	0	8,125	8,125
W005146667		3/27/2026	211000	FIRE-SUPPRESSION	0	7,650	7,650
W005146684		3/27/2026	211000	FIRE-SUPPRESSION	0	7,550	7,550
W005146789		3/28/2026	211000	FIRE-SUPPRESSION	11,475	18,121	6,646
W005150905		4/12/2026	212003	POLICE PATROL	0	5,858	5,858
W005121045		3/22/2026	212003	POLICE PATROL	0	5,017	5,017
W005146528		3/27/2026	212003	POLICE PATROL	0	5,000	5,000

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ACCOUNT NAME (NUMBER)

PMA Indemnity Transaction Report

Last 12 Months

Claim Number	Worker Name	Job Description	SSN Last 4	Accident Date	Location Name	Date Posted	Transaction #	Pay Period	Amount
Transaction Date: 4/2024									
Is Payment Transaction Billable: True									
W004250637		Sanitation		1/12/2024	DEPT. OF PUBLIC WORKS-WASTE & RECYCLING	4/20/2024	P100585663	03/31/2024 - 04/06/2024	-437.70
W004250637		Sanitation		1/12/2024	DEPT. OF PUBLIC WORKS-WASTE & RECYCLING	4/21/2024	P100585697	04/07/2024 - 04/09/2024	-187.59
W004250637		Sanitation		1/12/2024	DEPT. OF PUBLIC WORKS-WASTE & RECYCLING	4/18/2024	P100585458	03/31/2024 - 04/06/2024	-437.70
W003997612		Detective		4/17/2023	POLICE INVESTIGATIVE SERVICE BUREAU	4/10/2024	C108459856	04/09/2024 - 04/15/2024	1,060.22
W004250637		Sanitation		1/12/2024	DEPT. OF PUBLIC WORKS-WASTE & RECYCLING	4/1/2024	C108884427	03/24/2024 - 03/30/2024	437.70
W004250637		Sanitation		1/12/2024	DEPT. OF PUBLIC WORKS-WASTE & RECYCLING	4/8/2024	C108899292	03/31/2024 - 04/06/2024	437.70
W004230594		Maintainer 1		12/15/2023	DEPT. OF PUBLIC WORKS - PARKS	4/8/2024	C108899257	03/31/2024 - 04/06/2024	493.74
W003997612		Detective		4/17/2023	POLICE INVESTIGATIVE SERVICE BUREAU	4/3/2024	C108459855	04/02/2024 - 04/08/2024	1,060.22
W003840153		MAINTAINER III		8/8/2022	DEPT. OF PUBLIC WORKS - PARKS	4/4/2024	C108893332	03/20/2024 - 04/02/2024	1,679.98
W003840153		MAINTAINER III		8/8/2022	DEPT. OF PUBLIC WORKS - PARKS	4/17/2024	C108919063	04/03/2024 - 04/16/2024	1,679.98
W003868655		POLICE OFFICER		10/30/2022	POLICE PATROL	4/1/2024	C108822377	03/19/2024 - 04/01/2024	2,216.00
W004265989		FIRE DEPT LIEUTENANT		2/13/2024	FIRE DEPARTMENT	4/4/2024	P100584514	03/13/2024 - 03/19/2024	-1,461.14
W003868655		POLICE OFFICER		10/30/2022	POLICE PATROL	4/15/2024	C108909381	04/02/2024 - 04/15/2024	2,216.00
W004185940		Maintenance Or Engineerin		10/16/2023	DEPT. OF PUBLIC WORKS - PARKS	4/5/2024	C108895152	03/24/2024 - 03/26/2024	267.39
W002992758		POLICE SERGEANT		3/11/2020	POLICE	4/30/2024	S111672570		-10,000.00
W004230594		Maintainer 1		12/15/2023	DEPT. OF PUBLIC WORKS - PARKS	4/1/2024	C108884403	03/24/2024 - 03/30/2024	493.74

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ACCOUNT NAME (NUMBER)

WC Loss Run

by Policy

Claim Num	Acdt Date	Rec'd Date	Injured Worker	NCCI Injury, Part and Cause	Loss Line	Incurred	Paid	Reserves
Type - Status	Location Code	ST	Accident Description - Litigation Status					
Policy: 0456590 292500 Effective 07/01/2025 - 07/01/2026								
W004637092	7/20/2025	7/22/2025		Strain or injury by	Medical	19,752	11,596	8,155
Lost Time	Lag of	2	FIREFIGHTER WAS RESPONDING TO A MEDICAL CALL FOR A FALL. HE AND HIS PARTNER PICKED UP PATIENT FROM THE FLOOR WHEN CRISCUOLO FELT A PULL IN HIS LOW BACK. HE FINISHED HIS SHIFT AND STILL FEELS TIGHTNESS IN HIS BACK.		Indemnity	81,313	36,055	45,258
Open	0000000001	CT	Not litigated		Expense	5,318	3,211	2,107
					Totals	**106,382**	**50,862**	**55,520**
W004638517	7/18/2025	7/23/2025		Strain or injury by	Medical	9,762	2,954	6,808
Lost Time	Lag of	5	EMPLOYEE STATES HE WAS ON THE BACK OF THE GARBAGE TRUCK ON FRIDAY 6/18/25 AND STEPPED OFF THE TRUCK TO GET TRASH AND AS HE WAS STEPPING HE RETWISTED HIS ANKLE THAT HE INJURED ON 3/27/25		Indemnity	5,599	1,048	4,552
Open	0000000004	CT	Not litigated		Expense	3,450	568	2,882
					Totals	**18,812**	**4,569**	**14,242**
W004641149	7/25/2025	7/29/2025			Medical	0	0	0
Medical Only	Lag of	4	Strain or injury by while lifting garbage can felt		Indemnity	0	0	0
Closed	0000000004	CT	pain in right shoulder		Expense	0	0	0
					Totals	**0**	**0**	**0**
W004973743	8/2/2025	8/4/2025		Miscellaneous causes	Medical	5,408	5,408	0
Medical Only	Lag of	2	WHILE TREATING A PATIENT AFTER A MVC TRAUMA INJURY PATIENTS BLOOD/BODILY FLUID GOT ON FF LEFT FOREARM. FF HAD ABRASION ON ARM		Indemnity	0	0	0
Closed	0000000001	CT			Expense	614	614	0
					Totals	**6,022**	**6,022**	**0**
W004974384	8/4/2025	8/5/2025		Fall, slip, or trip injury	Medical	0	0	0
Record Only	Lag of	1	EMPLOYEE WAS BRINGING A BANKER BOX TO THE BACK ROOM. HE HAD TO MOVE ANOTHER BOX. WHEN HE LIFTED THE BOX FROM UP HIGH THE CONTENTS SHIFTED AND IT THREW HIM OFF AND HE LANDED ON HIS RIGHT LEG FEELING PAIN. AT THIS TIME RECORD ONLY		Indemnity	0	0	0
Closed	000000000	CT			Expense	0	0	0
					Totals	**0**	**0**	**0**

5/14/2026 5:58:20 PM

RADIUSR

Licenses to Provide Service in Illinois

STATE OF ILLINOIS

DEPARTMENT OF INSURANCE

RENEWAL SERVICE COMPANY LICENSE

This is to certify that **PMA Management Corp** having complied with the requirements of Section 107a.09 of the Illinois Insurance Code, relating to the licensing of service companies, is licensed to perform the following services:

1) Risk Management Services including claims management, medical cost containment, early claim intervention, and return to work solutions, risk control services and a risk management informational system.

Until the 31st day of December A.D. 2026.

Date: February 24, 2025

DEPARTMENT OF INSURANCE of the State of Illinois:

Ann Gillespie
Acting Director of Insurance

SEAL OF THE STATE OF ILLINOIS AUG. 26TH 1818

OFFICE OF THE SECRETARY OF STATE

ALEXI GIANNOULIAS-Secretary of State

6524-498-5
MARCH 25, 2026

ILLINOIS CORPORATION SERVICE COMPANY
801 ADLAI STEVENSON DRIVE
SPRINGFIELD, IL 62703-4261

RE LODESTAR CLAIMS & RISK SERVICES, INC.

DEAR SIR OR MADAM:

ENCLOSED YOU WILL FIND THE AMENDED AUTHORITY FOR THE ABOVE CORPORATION.

FEES IN THIS CONNECTION HAVE BEEN RECEIVED AND CREDITED.

SINCERELY,

ALEXI GIANNOULIAS
SECRETARY OF STATE
DEPARTMENT OF BUSINESS SERVICES
CORPORATION DIVISION
TELEPHONE 1-800-252-8980

FILED

MAR 24 2026

ALEXI GIANNOULIAS
SECRETARY OF STATE

FORM **BCA 13.40** (rev. Dec. 2003)
APPLICATION FOR AMENDED AUTHORITY TO TRANSACT BUSINESS IN ILLINOIS
Business Corporation Act

Secretary of State
Department of Business Services
501 S. Second St., Rm. 350
Springfield, IL 62756
217-782-6961
www.**ilsos**.gov

Remit payment in the form of a check or money order payable to the Secretary of State.

File # 65244985 **Filing Fee:** $25.00 Approved: AP

------Submit in duplicate ------Type or Print clearly in black ink------Do not write above this line-----

1. (a) CORPORATE NAME: PMA Management Corp.

   (b) **If changed**, NEW CORPORATE NAME: Lodestar Claims & Risk Services, Inc.

   (c) (Complete only if the new corporate name is not available in this state.)

   ASSUMED CORPORATE NAME: _____
   (By electing this assumed name, the corporation hereby agrees NOT to use its corporate name in the transaction of business in Illinois. Form BCA 4.15 is attached.)

2. (a) State or Country of Incorporation: Pennsylvania (b) If changed, Period of Duration: _____

3. If changed, Purpose or Purposes proposed to be pursued in transacting business in this State:
   (If not sufficient space to cover this point, use reverse side or add one or more sheets of this size.)
   Name change only

4. **This application is accompanied by a copy of the articles of Amendment to the Articles of Incorporation, if any, as evidence of any change of name, duration or purpose reported herein, such copy being duly authenticated by the proper officer of the state or country wherein the corporation is incorporated, which certification is not more than ninety (90) days old. The filing fee for the certified copy of the Articles of Amendment is $50 unless the amendment acts as a restatement of the Articles of Incorporation, in which case the filing fee is $150. In the event the statutory change was effected in a merger, a certified copy of the merger is required, plus applicable fee. The fees outlined in this paragraph are in addition to the $25 filing fee in the upper right hand corner of this form.**

5. The undersigned corporation has caused this application to be signed by a duly authorized officer who affirms, under penalties of perjury, that the facts stated herein are true. (All signatures must be in **BLACK INK.**)

Dated March 23, 2026 Lodestar Claims & Risk Sevices, Inc.
(Month & Day) (Year) (Exact Name of Corporation)

(Any Authorized Officer's Signature)
Robert Munoz, VP & Asst. Gen. Counsel
(Print Name and Title)

Printed by authority of the State of Illinois. January 2015 - 1 - C 196.12

BCA 13.30 $50 6524-4985

FILED
MAR 24 2026
ALEXI GIANNOULIAS
SECRETARY OF STATE

Pennsylvania Department of State
Bureau of Corporations and Charitable Organizations
PO Box 8722 | Harrisburg, PA 17105-8722
T:717-787-1057
dos.pa.gov/BusinessCharities

Entity Name:	Lodestar Claims & Risk Services, Inc.		
Jurisdiction:	PENNSYLVANIA	**Issuance Date:**	03/23/2026
Entity No.:	0002030144	**Receipt No.:**	002619510
Entity Type:	Domestic Business Corporation	**Certificate No.:**	075950428

Document Listing

Image No.	Date Filed	Effective Date	Filing Description	No. of Pages
B1026-3410	03/21/2026	03/21/2026	Articles of Amendment - Domestic Corporation	2

** **** ****** ******** End of list ******** ****** **** **

I, Albert Schmidt, Secretary of the Commonwealth of Pennsylvania, do hereby certify that the attached document(s) referenced above are true and correct copies and were filed in this office on the date(s) indicated above.

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the seal of my office to be affixed, the day and year above written

ALBERT SCHMIDT
Secretary of the Commonwealth

Verify this certificate online at www.file.dos.pa.gov

0015294307

B1026-3410 03/21/2026 8:00 AM Received by Pennsylvania Department of State

Certificate Verification No.: 075950428 Date: 03/23/2026

COMMONWEALTH OF PENNSYLVANIA
Department of State
Bureau of Corporations and Charitable Organizations
PO Box 8722
Harrisburg, Pennsylvania 17105-8722

ARTICLES OF AMENDMENT - DOMESTIC CORPORATION
Fee: $70

Pennsylvania Department of State
-FILED-
Amendment #: 0015294307
Date Filed: 3/21/2026

DSCB:15-1915/2104/2305/2704/2904/3304/5915/7104/7105/7106/7107 (rev. 7/2015)

In compliance with the requirements of 15 Pa.C.S. § 1915 / § 2104 / § 2305 / § 2704 / § 2904 / § 3304 / § 5915 / § 7104 / § 7105 / § 7106 / § 7107 (relating to articles of amendment/election/termination), the undersigned, desiring to amend its articles, hereby states that:

Record Information

File number	0002030144
Current name	PMA MANAGEMENT CORP.
Date of incorporation	06/14/1991
Filing type	Domestic Business Corporation
For profit filing subtype	Business

Business Subtype Change

Change business filing subtype?	I do not want to change the filing subtype of the corporation

Corporate Name Change

Change Corporation Name?	I want to change the name of the corporation
Profit Corporation name	Lodestar Claims & Risk Services, Inc.
Reserved Name	Lodestar Claims & Risk Services, Inc.

Current Registered Office or Commercial Registered Office Provider

Search for Commercial Registered Office Provider (CROP)	Corporation Service Company Commercial Registered Office Provider
Venue and Publication County	Dauphin

New Registered Office

I do not want to change the registered office

Stock

The corporation is organized on a stock share basis and the aggregate number of shares authorized is:

Number of shares of stock authorized	1,000

Formation Statute

Profit corporation - select one	Business Corporation Law of 1988

Effective Date

The filing shall be effective when filed with the Department of State

Amendment adoption statement

Select one of the following	The amendment was adopted by the board of directors pursuant to 15 Pa. C.S. § 1914(c) or § 5914(b).

Additional changes to the articles, if any

Additional changes	There are no additional changes

Restated Articles

☐ The restated Articles of Incorporation supersede the original articles and all amendments thereto.

Electronic Signature

IN TESTIMONY WHEREOF, the undersigned Corporation has caused these Articles of Amendment to be signed by a duly authorized officer.

Officer	*Robert Munoz*	*03/20/2026*
Signer's Capacity	Sign Here	Date

Attachments

1. Cost Proposal Form
2. Compliance Affidavit
3. EEO Report
4. No Proposal Explanation (NOT APPLICABLE)
5. Professional Services Agreement

Cost Proposal Form

Fedex to Troy 5/27/27

Village of Oak Park

Attachment I. Cost Proposal Form

The undersigned proposes to furnish, Village of Oak Park Human Resources Department, 123 Madison St., Oak Park, IL 60302 and, Vendor shall state as part of their bid, costs associated with

Proposal Signature: Michael MacAulay

State of Pennsylvania, County of Montgomery

Michael MacAulay, being first duly sworn on oath deposes and says that the Contractor on the above Proposal is organized as indicated below and that all statements herein made on behalf of such Contractor and that their deponent is authorized to make them, and also deposes and says that deponent has examined and carefully prepared their proposal from the Specifications and has checked the same in detail before submitting their Proposal; that the statements contained herein are true and correct.

Signature of Contractor authorizes the Village of Oak Park to verify references of business and credit at its option.

Signature of Contractor shall also be acknowledged before a Notary Public or other person authorized by law to execute such acknowledgments.

Lodestar Claims & Risk Services, Inc.
Organization Name
(Seal - If Corporation)

By: Michael MacAulay Dated: 5/27/26
Authorized Signature

380 Sentry Parkway, Blue Bell, PA 19422
Address

610-397-5000
Telephone

mmacaulay@lodestar.com
E-mail

Subscribed to and sworn before me this 27th day of May, 2026.

Renee Williams
Notary Public

Commonwealth of Pennsylvania - Notary Seal
Renee Williams, Notary Public
Montgomery County
My commission expires June 1, 2027
Commission number 1435425
Member, Pennsylvania Association of Notaries

13

Compliance Affidavit

Village of Oak Park

Attachment II. Compliance Affidavit

I, Michael MacAulay being first duly sworn on oath depose and state as follows:
(Print Name)

1. I am the (title) President of the Proposing Firm ("Firm") and am authorized to make the statements contained in this affidavit on behalf of the Firm.
2. The Firm is organized as indicated on Exhibit A to this Affidavit, entitled "Organization of Proposing Firm," which Exhibit is incorporated into this Affidavit as if fully set forth herein.
3. I have examined and carefully prepared this proposal based on the Request for Proposals and verified the facts contained in the proposal in detail before submitting it.
4. I authorize the Village of Oak Park to verify the Firm's business references and credit at its option.
5. Neither the Firm nor its affiliates[1] are barred from proposing on this project as a result of a violation of 720 ILCS 5/33E-3 or 33E-4 relating to bid rigging and bid rotating, or Section 2-6-12 of the Oak Park Village Code related to "Proposing Requirements".
6. Neither the Firm nor its affiliates is barred from contracting with the Village of Oak Park because of any delinquency in the payment of any debt or tax owed to the Village except for those taxes which the Firm is contesting, in accordance with the procedures established by the appropriate revenue act, liability for the tax or the amount of the tax. I understand that making a false statement regarding delinquency in taxes is a Class A Misdemeanor and, in addition, voids the contract and allows the Village of Oak Park to recover all amounts paid to the Firm under the contract in a civil action.
7. I am familiar with Section 13-3-2 through 13-3-4 of the Oak Park Village Code relating to Fair Employment Practices and understand the contents thereof; and state that the Proposing Firm is an "Equal Opportunity Employer" as defined by Section 2000(E) of Chapter 21, Title 42 of the United States Code Annotated and Federal Executive Orders #11246 and #11375 which are incorporated herein by reference.
8. All statements made in this Affidavit are true and correct.

Signature: _____ Printed Name: Michael MacAulay

Name of Business: Lodestar Claims & Risk Services, Inc. Your Title: President

Business Address:
380 Sentry Parkway, Blue Bell, PA 19422

[1] Affiliates means: (i) any subsidiary or parent of the bidding or contracting business entity, (ii) any member of the same unitary business group; (iii) any person with any ownership interest or distributive share of the bidding or contracting business entity in excess of 7.5%; (iv) any entity owned or controlled by an executive employee, his or her spouse or minor children of the bidding or contracting business entity.

14

(Unit Number, Suite #) _____ (City, State & Zip):
Blue Bell, PA 19422

Telephone: 610-397-5000 Fax: 610-397-5027 Web Address: www.lodestar.com

Subscribed to and sworn before me this 21th day of May, 2026.

Renee Williams
Notary Public

Commonwealth of Pennsylvania - Notary Seal
Renee Williams, Notary Public
Montgomery County
My commission expires June 1, 2027
Commission number 1435425
Member, Pennsylvania Association of Notaries

EEO Report

Village of Oak Park

Attachment III. M/W/DBE Statue and EEO Report

Failure to respond truthfully to any questions on this form, failure to complete the form or failure to cooperate fully with further inquiry by the Village of Oak Park will result in disqualification of this Proposal. For assistance in completing this form, contact the Department of Human Resources at 708-358-5650.

1. Consultant Name: Lodestar Claims & Risk Services, Inc.

2. Check here if your firm is:

- ☐ Minority Business Enterprise (MBE) (A firm that is at least 51% owned, managed and controlled by a Minority.)
- ☐ Women's Business Enterprise (WBE) (A firm that is at least 51% owned, managed and controlled by a Woman.)
- ☐ Owned by a person with a disability (DBE) (A firm that is at least 51% owned by a person with a disability)
- ☒ None of the above

[Submit copies of any W/W/DBE certifications]

3. What is the size of the firm's current work force?

532 Number of full-time employees

7 Number of part-time employees

4. Similar information will be requested of all sub-consultants working on this agreement. Forms will be furnished to the lowest responsible Consultant with the notice of agreement award, and these forms must be completed and submitted to the Village before the execution of the agreement by the Village.

Signature: Michael Mitchell

Date: 5/29/24

EEO REPORT

Please fill out this form completely. Failure to respond truthfully to any questions on this form, or failure to cooperate fully with further inquiry by the Village of Oak Park will result in disqualification of this Proposal. An incomplete form will disqualify your Proposal. For assistance in completing this form, contact the Human Resources Department at 708-358-5650.

An EEO-1 Report may be submitted in lieu of this report

Consultant Name_____
Total Employees 550

Job Categories	Total Employees	Total Males	Total Females	Males				Females				Total Minorities
				Black	Hispanic	American Indian & Alaskan Native	Asian & Pacific Islander	Black	Hispanic	American Indian & Alaskan Native	Asian & Pacific Islander	
Officials & Managers	37	24	13		1				1			2
Professionals	490	92	398	10	7		2	69	32		7	133
Technicians												
Sales Workers	14	10	4	1	1		1	1				4
Office & Clerical	9	0	9					1				1
Semi-Skilled												
Laborers												
Service Workers												
TOTAL	550	126	425	17	9		3	71	33		7	140
Management Trainees												
Apprentices												

No Proposal Explanation

NOT APPLICABLE.

Certificates of Insurance

We comply with **6. Insurance** with the following exceptions:

6.1
Notice of Cancellation- Our insurance carriers will not provide notice to the Village, on an endorsement or certificate of insurance. Lodestar Risk & Services Inc. will agree to provide notice to the Village directly. Our policies require the carriers to provide us with 90 days' notice, allowing us to notify the Village within the specified period of time.

6.2
F. Additional Insured- We will not use the additional insured language specified in the requirement. We will include the Village as an additional insured "where required by written contract prior to loss" on our general liability and auto liability policies. It will extend to our umbrella policy on a follow-form basis over the auto liability and general liability policies. Additional insured coverage on our general liability policy will apply to ongoing operations and not completed operations. Copies of the additional insured endorsements are attached for the Village to review.

6.3 and 6.4
Waiver of Subrogation- Waiver of subrogation will be provided on our auto liability, general liability, and workers compensation policies.

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
04/03/2026

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

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

PRODUCER	CONTACT NAME:	
Aon Risk Services Central, Inc. Chicago IL Office 200 East Randolph Chicago IL 60601 USA	PHONE (A/C, No, Ext): (866) 283-7122	FAX (A/C, No): (800) 363-0105
	E-MAIL ADDRESS:	

INSURED	INSURER(S) AFFORDING COVERAGE		NAIC #
Lodestar Claims & Risk Services, Inc c/o Old Republic International Corp. 307 North Michigan Avenue Chicago IL 60601 USA	INSURER A:	LM Insurance Corporation	33600
	INSURER B:	Liberty Mutual Fire Ins Co	23035
	INSURER C:	Navigators Insurance Co	42307
	INSURER D:		
	INSURER E:		
	INSURER F:		

COVERAGES CERTIFICATE NUMBER: 570119254420 REVISION NUMBER:

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

Limits shown are as requested

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
B	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE / X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY / PRO-JECT / LOC OTHER:			TB2641004114915	06/15/2025	06/15/2026	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	$2,000,000 $500,000 $5,000 $2,000,000 $6,000,000 $6,000,000
B	AUTOMOBILE LIABILITY X ANY AUTO OWNED AUTOS ONLY / SCHEDULED AUTOS HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY			AS2-641-004114-905	06/15/2025	06/15/2026	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$2,000,000
C	X UMBRELLA LIAB / X OCCUR EXCESS LIAB / CLAIMS-MADE DED / X RETENTION $10,000			CH25UMRZ01Z8VIV	06/15/2025	06/15/2026	EACH OCCURRENCE AGGREGATE	$10,000,000 $10,000,000
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N: N / N/A If yes, describe under DESCRIPTION OF OPERATIONS below			WA564D004114935 SIR applies per policy terms & conditions	06/15/2025	06/15/2026	X PER STATUTE / OTH-ER E.L. EACH ACCIDENT E.L. DISEASE-EA EMPLOYEE E.L. DISEASE-POLICY LIMIT	 $2,000,000 $2,000,000 $2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Evidence of Insurance

CERTIFICATE HOLDER	CANCELLATION
Lodestar Claims & Risk Services, Inc c/o Old Republic International Corp 307 North Michigan Avenue Chicago IL 60601 USA	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE Aon Risk Services Central, Inc.

Holder Identifier :

Certificate No : 570119254420

ACORD 25 (2016/03)

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 04/03/2026

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

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

PRODUCER	CONTACT NAME: Christine Mundell
Brummel Brothers, Inc. 307 N. Michigan Avenue Chicago, Illinois 60601 312.762.4274	PHONE (A/C, No, Ext): 312-762-4274 FAX (A/C, No): E-MAIL ADDRESS:

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : American Business & Mercantile Insurance Mutual	40789
INSURER B :	
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED: Old Republic International Corporation
Lodestar Claims and Risk Services Inc.
307 North Michigan Avenue
Chicago, Illinois 60601

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

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	$
	☐ CLAIMS-MADE ☐ OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$
							MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$
	☐ POLICY ☐ PRO-JECT ☐ LOC						PRODUCTS - COMP/OP AGG	$
	OTHER:							$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$
	☐ ANY AUTO						BODILY INJURY (Per person)	$
	☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
	☐ UMBRELLA LIAB ☐ OCCUR						EACH OCCURRENCE	$
	☐ EXCESS LIAB ☐ CLAIMS-MADE						AGGREGATE	$
	☐ DED ☐ RETENTION $							$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N						☐ PER STATUTE ☐ OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) N / A						E.L. EACH ACCIDENT	$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$
A	Insurance Company Professional Liability			ABM 039466-00	7/1/2025	7/1/2026	$5,000,000 each occurrence $5,000,000 aggregate	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

EVIDENCE OF INSURANCE

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
04/03/2026

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PRODUCER	CONTACT NAME:		
Aon Risk Services Central, Inc. Chicago IL Office 200 East Randolph Chicago IL 60601 USA	PHONE (A/C. No. Ext): (866) 283-7122	FAX (A/C. No.): (800) 363-0105	
	E-MAIL ADDRESS:		
	INSURER(S) AFFORDING COVERAGE		NAIC #
INSURED Lodestar Claims & Risk Services, Inc c/o Old Republic International Corp. 307 North Michigan Avenue Chicago IL 60601 USA	INSURER A:	LM Insurance Corporation	33600
	INSURER B:	Liberty Mutual Fire Ins Co	23035
	INSURER C:	Navigators Insurance Co	42307
	INSURER D:		
	INSURER E:		
	INSURER F:		

COVERAGES CERTIFICATE NUMBER: 570119254420 REVISION NUMBER:

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

Limits shown are as requested

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
B	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE / X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY / PRO-JECT / LOC OTHER:			TB2641004114915	06/15/2025	06/15/2026	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	$2,000,000 $500,000 $5,000 $2,000,000 $6,000,000 $6,000,000
B	AUTOMOBILE LIABILITY X ANY AUTO OWNED AUTOS ONLY / SCHEDULED AUTOS HIRED AUTOS ONLY / NON-OWNED AUTOS ONLY			AS2-641-004114-905	06/15/2025	06/15/2026	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$2,000,000
C	X UMBRELLA LIAB / X OCCUR EXCESS LIAB / CLAIMS-MADE DED / X RETENTION $10,000			CH25UMRZ01Z8VIV	06/15/2025	06/15/2026	EACH OCCURRENCE AGGREGATE	$10,000,000 $10,000,000
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? Y/N: N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N / A		WA564D004114935 SIR applies per policy terms & conditions	06/15/2025	06/15/2026	X PER STATUTE / OTH-ER E.L. EACH ACCIDENT E.L. DISEASE-EA EMPLOYEE E.L. DISEASE-POLICY LIMIT	$2,000,000 $2,000,000 $2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Evidence of Insurance

Holder Identifier :

Certificate No : 570119254420

CERTIFICATE HOLDER	CANCELLATION
Lodestar Claims & Risk Services, Inc c/o Old Republic International Corp 307 North Michigan Avenue Chicago IL 60601 USA	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE Aon Risk Services Central, Inc.

ACORD 25 (2016/03)

POLICY NUMBER: AS2-641-004114-905

COMMERCIAL AUTO
CA 20 48 10 13

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

DESIGNATED INSURED FOR COVERED AUTOS LIABILITY COVERAGE

This endorsement modifies insurance provided under the following:

AUTO DEALERS COVERAGE FORM
BUSINESS AUTO COVERAGE FORM
MOTOR CARRIER COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by this endorsement.

This endorsement identifies person(s) or organization(s) who are "insureds" for Covered Autos Liability Coverage under the Who Is An Insured provision of the Coverage Form. This endorsement does not alter coverage provided in the Coverage Form.
This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Named Insured: OLD REPUBLIC INTERNATIONAL CORPORATION

Endorsement Effective Date: 06/15/2025

SCHEDULE

Name Of Person(s) Or Organization(s):
WHERE REQUIRED BY WRITTEN CONTRACT.

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

POLICY NUMBER: TB2-641-004114-915

COMMERCIAL GENERAL LIABILITY
CG 20 26 04 13

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):
WHERE REQUIRED BY WRITTEN CONTRACT PRIOR TO A LOSS
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. **Section II – Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

1. In the performance of your ongoing operations; or
2. In connection with your premises owned by or rented to you.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

Professional Services Agreement

Our proposal and agreement to enter into a contract is conditioned upon the contract incorporating minimum provisions. LODESTAR is willing to work with the SD toward a mutually acceptable agreement that sets forth the provisions within the form contract with the additional provisions. The additional provisions are utilized to clarify LODESTAR's obligations and to ensure proper funding and claim handling going forward. We have attached a draft form agreement we utilize with many public entities. This agreement is open to negotiation and only provides a framework going forward.

3. Compensation: not to exceed amount: Make sure clear this applies to claim fees and not other scheduled fees which are billed to the file.

4. Term and Termination: would request the following additional provisions:

a) This Agreement may be terminated:

i. by mutual agreement of the parties;

ii. by LODESTAR if Client is in default in payment of any fees or expenses due hereunder or fails to maintain the requisite claim funding levels as required herein and LODESTAR has given Client prior written notice of such default five days prior to the date set for termination;

iii. by the non-breaching party if the other party breaches (other than a monetary breach) under any of the terms, covenants and conditions hereunder and the non-breaching party has given the breaching party prior written notice of such breach 20 days prior to the date set for termination and the breaching party has failed to cure such breach prior to the termination date;

iv. by one party if the other party becomes insolvent or bankrupt, is placed into receivership, makes an assignment for the benefit of creditors, or is levied upon or sold by Sheriff's sale;

v. by LODESTAR or Client if LODESTAR fails to obtain any required state or federal licensing for providing services hereunder; or

vi. by LODESTAR or Client if any state regulatory entity fails to approve or subsequently disapproves or revokes the self-insured status of Client. LODESTAR or Client may choose to suspend all or part of LODESTAR's obligations under this Agreement or terminate this Agreement with respect to a state or states where Client loses its self-insured status.

b) This Agreement shall be deemed terminated upon its normal expiration.

c) [**Insert if Cradle to Grave is selected]** Upon termination of this Agreement pursuant to paragraph (c) above, LODESTAR shall service Client's remaining open claims pursuant to the terms of this Agreement, unless Client directs LODESTAR to cease servicing the open claims. Upon termination of this Agreement pursuant to paragraph (b) above, LODESTAR shall have no further obligation to service Client's remaining open claims and LODESTAR shall be entitled to return the Claim Files to Client in electronic form. LODESTAR may at its option keep a copy of the Claim Files for LODESTAR's records. Client shall be responsible for payment of all fees incurred by LODESTAR up to and including the date of termination.

d) **[Insert if Life of Contract is selected]** Upon termination of this Agreement, LODESTAR will provide a final accounting of any amounts due either party. Client shall be responsible for payment of all fees incurred by LODESTAR up to and including the date of termination. Upon final closing of the account, LODESTAR shall return the Claim Files to Client in electronic form. LODESTAR may at its option keep a copy of the Claim Files for LODESTAR's records.

e) Client and LODESTAR acknowledge that certain approved indemnity, medical and expense payments may still be in process of payment upon the date of termination. Therefore Client agrees that Client will remain responsible for payment of any and all indemnity, medical and expense payments which may be processed by LODESTAR for a Qualified Claim, which shall include, at a minimum, the maintenance of a claim funding mechanism for at least 45 days after the Agreement terminates. In addition, LODESTAR shall return to Client any outstanding checks remaining unpaid after termination. LODESTAR shall not be responsible for Client's escheat obligations with regard to issued but unpresented checks either before or after the termination of this Agreement.

f) LODESTAR may utilize the Payment Account for any outstanding amounts owed by Client to LODESTAR prior to returning unallocated funding to Client.

g) This Section of the Agreement shall survive the termination of this Agreement. Nothing in this Section of the Agreement shall limit any other remedy that may be available to LODESTAR.

5. Indemnification: would request the following:

a) Client agrees that it will not hold LODESTAR liable for, or reduce the compensation of LODESTAR with respect to, any failure of LODESTAR to deliver any services resulting from (i) any failure to cooperate on the part of Client or the prior administrator, or (ii) any files for Takeover Claims which have not been properly maintained or are not delivered to LODESTAR in good order.

b) Promptly after the receipt by any party seeking indemnification under this section ("**Indemnitee**") of notice of the commencement of any action or the assertion of any claim against such Indemnitee by a third party, such Indemnitee shall give such indemnifying party written notice thereof and the indemnifying party shall have the right to undertake the defense of such action or claim. If the indemnifying party fails to defend or, after undertaking such defense, fails to prosecute or withdraws from such defense, the Indemnitee shall have the right to undertake the defense and settlement thereof at the indemnifying party's expense. If the indemnifying party is defending such action or claim, the Indemnitee may retain separate counsel at its sole cost and expense and may participate in the defense of such action or claim. An indemnifying party may only settle an action or claim with the consent of the Indemnitee, which consent shall not be unreasonably withheld or delayed. If the Indemnitee does not consent to a settlement proposed by the indemnifying party that includes a full release of Indemnitee from all claims at issue, the Indemnitee shall be responsible for any settlement, award, judgment or damages incurred above the settlement amount proposed by the indemnifying party, as well as all costs and expenses, including attorneys' fees, incurred in the defense of the claims from the date of the proposal.

c) The indemnification provided in this section represents the sole remedy for actions or claims brought by third parties.

d) Neither party shall be liable to the other party for punitive or consequential damages.

6. Insurance: Rosalyn Myers-Nesmith has to review. Pg. 24

11. Books/Audits: Ask a clarification on what this entails? Is it just records generated for the agreement or any records of Lodestar. If all records, for instance, we cannot agree to the broad breath of the audit. We cannot agree to provide the city with access to documents related to our assets, expenses, and cost of goods. We also cannot agree to provide them access to contracts and/or contract amendments, payroll documents, and time sheets.

12. Confidentiality: would request it be mutual as long as does not violate freedom of information act.

a) If there is an obligation to release part but not all of the information, the part deemed not responsive will be withheld, but nothing in this Agreement is intended to abrogate the duty of either party to comply in good faith with such discovery requests.

b) Each party agrees that the information contained within LODESTAR's RMIS must be treated in a confidential manner by all users who may gain authorized access to LODESTAR's RMIS.

c) Client agrees LODESTAR (or its representative) may de-identify and thereafter utilize Client's information for benchmarking and related purposes.

d) LODESTAR processes on behalf of Client personal information disclosed to it by Client and personal information that Client has asked LODESTAR to collect for the purpose of administering Qualified Claims in accordance with this agreement (including managed care services, reporting, and other related support services) and providing risk control services. LODESTAR shall not sell or share with third parties for marketing purposes personal information it collects pursuant to this Agreement. LODESTAR shall not retain, use or disclose personal information relating to Client's injured workers for any commercial purpose other than for the purpose of administering Qualified Claims in accordance with this agreement (including managed care services, reporting, and other related support services), providing risk control services or as permitted by applicable law. LODESTAR may disclose information to vendors to the extent necessary or advisable to provide the services required under this Agreement.

15. Village Remedies: Lodestar would request that it be able to appeal any decision regarding remedies.

15.2: Liquidated damages: Lodestar cannot agree to this but may agree to a performance guarantee. This is up to you how you want to handle.

Lodestar would request the following additional provisions:

2. NATURE of RELATIONSHIP

a) LODESTAR agrees to perform the services described in this Agreement as an independent contractor and not as an agent or employee of Client. Client retains no control or direction over LODESTAR, its employees or agents, or over the detail, manner or methods of the performance of the services described herein.

b) LODESTAR retains third party vendors to provide services under this Agreement and LODESTAR's charges to Client may vary from the itemized charge to LODESTAR. Client acknowledges and agrees that LODESTAR may receive allowances or payments from vendors in connection with LODESTAR's utilization of vendor services as consideration for LODESTAR's efforts in the management, administration and integration of the services. If Client requests the use of a vendor not offered by LODESTAR ("Client Vendor"), LODESTAR may disapprove the use of the Client Vendor in its sole discretion. If LODESTAR does not disapprove the Client Vendor and the Client Vendor services Client's Qualified Claims, then Client shall be responsible for all aspects of managing and monitoring the Client Vendor's performance, including service levels, costs and data security requirements. Client authorizes and directs LODESTAR to share with the Client Vendor information in its possession related to the Qualified Claims being serviced by the Client Vendor. LODESTAR shall have no liability with respect to any act or omission of the Client Vendor and Client shall indemnify, defend and hold harmless LODESTAR from any and all liabilities resulting from LODESTAR's interaction with a Client Vendor. So long as funds are available in the Payment Account, LODESTAR shall pay on behalf of Client all invoices submitted by a Client Vendor to LODESTAR in the amount set forth in such invoice.

3. MANAGED CARE SERVICES

a) Client agrees to exclusively utilize the following LODESTAR managed care services:

i. LODESTAR's medical bill review and repricing services, which may include but are not limited to:

1. reviewing medical documents for appropriateness, relatedness to the injury or accident, unbundling, and conformity to applicable fee schedule or usual and customary re-pricing; and

2. utilizing LODESTAR's complex bill review process to review certain medical bills for possible additional savings.

ii. LODESTAR's managed care networks which include:

1. traditional networks (e.g. physicians and medical facilities);

2. specialty networks (e.g. providers of durable medical equipment, diagnostic testing, physical therapy, pain management, home health, and dental services);

3. state specific networks (e.g. California Medical Provider Network, Texas Health Care Network); and

4. out-of-network services from LODESTAR and third party vendors.

iii. LODESTAR's pharmacy benefit management program (e.g. bill repricing, home-delivery, brand-to-generic conversion, customized formularies, narcotic management, drug utilization review).

iv. Utilization of clinical case management services when any of the following criteria are met:

1. surgical procedure;
2. spinal cord injury;
3. occupational disease or a pandemic requiring medical treatment;
4. third degree burns;
5. multiple complex fractures;
6. crush injuries requiring poor initial medical outcome;
7. head injuries with cognitive impairment or loss of consciousness;
8. immediate post-injury hospital admission;
9. multiple trauma; or
10. adjuster identified assignments.

Continued clinical case management will proceed at the discretion of LODESTAR.

b) LODESTAR shall also provide the Medicare related services set forth in Exhibit A to this Agreement.

c) LODESTAR's Clinical Case Managers are authorized to provide LODESTAR's pharmacy intervention services on all claims at LODESTAR's discretion to assist with seeking improved claim outcomes. The Program will review incoming claimant medications which are outside of Centers for Disease Control guidelines, and recommend an intervention strategy which may include potential weaning, drug testing, and peer reviews to attempt to mitigate long term dependency at the point of sale.

d) LODESTAR is authorized to employ utilization review services for evaluation of reasonableness, necessity, duration, and frequency of treatment or medication. These services may include, but are not limited to the following:

i. Prospective Review - a review prior to treatment or admission conducted by an experienced registered nurse to validate the necessity, frequency and duration of treatment.

ii. Concurrent Review - a review during the course of treatment conducted by an experienced registered nurse to evaluate treatment and planned procedures and establish target completion dates.

iii. Retrospective Utilization Review- a review after the completion of treatment conducted by an experienced registered nurse to identify inappropriate treatment utilization.

iv. Peer Review or Physician Advisor Review - physician-to-physician review and contact to resolve questions related to treatment and diagnosis.

e) LODESTAR is authorized to employ prospective and concurrent utilization review services that may also include the use of physician advisor review such as for cases that are complicated and warrant physician review to resolve treatment or diagnosis questions.

f) Upon Client request, LODESTAR will utilize LODESTAR Care24 point of injury nurse triage to assist with determining the direction of care when an injury is reported. This service may include but is not limited to a Clinical Case Manager providing self-care recommendations to the claimant, first notice of loss reporting, direction of care into the network or to a panel provider, or a recommendation for use of emergency room care.

g) LODESTAR may retain third party vendors for the purpose of providing specific medical

management services.

4. RISK MANAGEMENT INFORMATION SYSTEM ("RMIS")

a) LODESTAR will provide the following RMIS services:

i. upon request, a standard conversion of Client's existing claims data into LODESTAR's claim system. A standard conversion shall be from one electronic source and a customized conversion shall be from two or more sources;

ii. access to LODESTAR's RMIS for up to three users, provided Client agrees to the terms and conditions of the License Agreement when first accessing LODESTAR's RMIS;

iii. standard reports available through LODESTAR's RMIS;

iv. One monthly data file transfer to a single carrier or RMIS system ("**Standard Data Feed**");

v. customized reporting reasonably acceptable to LODESTAR, subject to additional terms, conditions and fees as may be agreed upon by the parties. LODESTAR will provide a reasonable estimate of the costs of preparation of any such reports to Client in advance;

vi. assist Client with Occupational Safety and Health Administration ("OSHA") recordkeeping services, including recordability decisions and time tracking in individual cases. LODESTAR will provide Client access to LODESTAR's RMIS reporting tool to generate OSHA 301 forms, OSHA 300 logs, and 300A summary reports, as well as verify data capture on Client's OSHA logs.

1. LODESTAR's OSHA related services are only intended to aid Client in its compliance obligations. Client remains responsible for compliance with OSHA requirements. LODESTAR does not assume Client's OSHA obligations.

b) LODESTAR warrants LODESTAR's RMIS against malfunctions, errors, or loss of data which are due solely to errors on its part. If Client notifies LODESTAR in writing and furnishes adequate documentation of any such malfunction, error or loss of data, then:

i. in the event of a malfunction, error or loss of data, upon notice from Client within 20 days of the event, LODESTAR will recreate the reports designated by Client without an additional fee, using data as of the recreation date.

ii. the maximum and only liability of LODESTAR for such malfunction, error or loss of data shall be its obligation to recreate reports or regenerate data as described above.

c) THE WARRANTIES STATED IN THIS SECTION ARE IN LIEU OF ALL OTHER WARRANTIES, EXPRESS OR IMPLIED INCLUDING, BUT NOT LIMITED TO, ANY IMPLIED WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE. IN NO EVENT SHALL LODESTAR BE LIABLE FOR ANY LOSS OR DAMAGE TO REVENUES, PROFITS, OR GOODWILL OR OTHER DIRECT, SPECIAL, INDIRECT, INCIDENTAL OR CONSEQUENTIAL DAMAGES OF ANY KIND RESULTING FROM ITS PERFORMANCE OR FAILURE TO PERFORM UNDER THIS SECTION, INCLUDING WITHOUT LIMITATION ANY INTERRUPTION OF BUSINESS, EVEN IF

LODESTAR HAS BEEN ADVISED OF THE POSSIBILITY OF SUCH LOSS OR DAMAGE. THIS SECTION OF THE AGREEMENT SHALL SURVIVE THE TERMINATION OF THE AGREEMENT.

d) Obligations of Client regarding use of LODESTAR's RMIS:

i. Client shall adhere to state and federal law with regard to protecting the privacy of any claimant whose information may appear in LODESTAR's RMIS. Client agrees to use all available security features and to notify LODESTAR promptly of all potential and actual breaches of the system.

ii. Client agrees that no information in LODESTAR's RMIS will be used as a pretext for retaliatory or other illegal or unfair discriminatory employment practices in violation of any federal or state statute or regulation.

e) General Provisions regarding LODESTAR'S RMIS:

i. Client agrees to limit access to LODESTAR's RMIS to those persons who perform the essential functions of claim and risk management, including protecting security access passwords and communications, except that this provision is not intended to limit Client from generating and using reports and statistics for legitimate business purposes.

ii. Unless otherwise stated, Client's access to LODESTAR's RMIS will end upon termination of the Agreement.

5. LITIGATION SUPPORT SERVICES

a) In the event a Qualified Claim managed by LODESTAR pursuant to this Agreement: (x) enters into litigation; or (y) is scheduled for a workers' compensation hearing; or (z) involves a potential third-party (subrogation) claim (collectively, (x), (y) and (z), "**Disputed Claim**"), LODESTAR will:

i. make recommendations to Client regarding claim matters relevant to the Disputed Claim;

ii. assist Client in the retention and appointment of counsel selected by Client to represent Client in and regarding such legal matters, and assist Client in the selection of expert witnesses and vendors;

iii. pursue all appropriate subrogation claims as directed by Client.

b) If requested by Client, LODESTAR will manage Disputed Claims in accordance with LODESTAR's Defense Counsel Guidelines. LODESTAR shall remain authorized to settle any Disputed Claim within the Discretionary Authority Limit or an amount in excess of the Discretionary Authority Limit that is authorized by Client.

c) LODESTAR is authorized to utilize legal bill analyzer services to review and process legal invoices from all defense counsel utilized by the Client.

6. SECTION 111 REPORTING

a) Client understands and acknowledges that it is a Responsible Reporting Entity ("**RRE**") as defined by the Centers for Medicare and Medicaid Services ("**CMS**"), and is responsible for the reporting

requirements as set forth in Section 111 of the Medicare, Medicaid, and SCHIP Extension Act of 2007.

b) Client authorizes LODESTAR or LODESTAR's designee to undertake Client's Section 111 reporting requirements as Client's Account Manager/Reporting Agent as it relates to Client's Qualified Claims. Client further agrees to fully cooperate with LODESTAR, including the execution of any documents necessary for such authorization.

i. LODESTAR shall not provide any Section 111 reporting services for Client's Record Only Claims.

ii. LODESTAR shall not undertake Section 111 reporting activities for Client's claims which were converted from Client's prior TPA to LODESTAR but were never serviced by LODESTAR.

c) Client acknowledges and agrees to provide LODESTAR with complete, accurate, and timely data, as well as completed CMS documentation, for Section 111 reporting purposes.

d) Upon receipt of complete, accurate claim data, LODESTAR shall commence reporting of Client's data to CMS, and shall continue for as long as LODESTAR provides claims handling services for Client's Qualified Claims.

e) LODESTAR shall have no liability for any failure of (i) Client to register as a RRE; (ii) Client to execute any documents necessary to authorize LODESTAR or LODESTAR's designee as its Account Manager/Reporting Agent; or (iii) Client or its prior TPA to report Client's claims when they were first required to do so.

Thank You!

Lodestar Claims and Risk Services would be honored to remain as the Village of Oak Park's TPA and Risk Services partner.

Lodestar is a trusted leader and recognized expert in commercial risk management insurance solutions and services. Lodestar specializes in workers' compensation, commercial auto, general liability, and commercial package and umbrella coverages, as well as offering claims administration and risk management services through Lodestar, its wholly owned TPA. Lodestar's issuing insurance companies are Pennsylvania Manufacturers' Association Insurance Company, Manufacturers Alliance Insurance Company, and Pennsylvania Manufacturers Indemnity Company. Lodestar is part of Old Republic International, a Fortune 500 company (NYSE: ORI). ORGIC.COM

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