

UNITED STATES DISTRICT COURT DISTRICT OF CONNECTICUT

ROBERT FRULLA, ON BEHALF OF HIMSELF
AND AS REPRESENTATIVE OF A CLASS OF
PERSONS SIMILARLY SITUATED,

Plaintiff,

vs.

CRA HOLDINGS INC., KENNETH S. GREENBERG,
MARI ALDIN, PRESTON GOLDEN, SCOTT DUNN,
ROLAND HENNESSEY, DALI MASUD, STUART
JAMIESON, JOEL MALLIN, ROBERT V.
RICHCREEK, EQ CORPORATION, HAROLD
MARRON and CRA HOLDINGS INC. EMPLOYEE
WELFARE BENEFIT PLAN,

Defendants

CIVIL ACTION NO.
3:08-CV-00119 (JCH)

**ORDER GRANTING DEFENDANTS CRA HOLDINGS INC. AND
CRA HOLDINGS INC. EMPLOYEE WELFARE BENEFIT PLAN'S MOTION
TO OPEN AND MODIFY THE JUDGMENT DATED JUNE 19, 2009**

The Defendants CRA Holdings Inc. and CRA Holdings Inc. Employee Welfare Benefit Plan having filed their Motion to Open and Modify the Judgment Dated June 19, 2009 (the "Motion"), the Memorandum in Support of the Motion (the 'Memorandum'), and the Affidavits and Annex in Support of the Motion; and

The Court having found after a hearing that the Motion should be granted, that the Judgment dated June 19, 2009 should be opened and modified, and that the Defendants should be granted the relief requested in the Motion;

Now, therefore, it is hereby ORDERED, ADJUDGED and DECREED:

1. The Motion hereby is GRANTED.

2. The Court's April 30, 2009 Judgment approving the Settlement Agreement and Release dated June 19, 2009 hereby is OPENED and MODIFIED in the manner set forth in the Motion and as summarized below.

3. The CRA Holdings Inc. Employee Welfare Benefit Plan (n/k/a the CRA Holdings Inc. Retiree Welfare Benefit Program) (the "Plan") hereby is reformed by amending and restating the Plan Document and Summary Plan Description (the "Plan Document," which is Annex 2 to the Memorandum), to include the following provisions:

(A) The Plan Document hereby is reformed to add the following language as new paragraphs 5 and 6 of Appendix A thereto:

"5. Benefits under the Health Insurance Plan are frozen and such Plan is suspended, effective January 1, 2011; accordingly, such Plan shall cease to provide group health care insurance to Participants as of December 31, 2010.

6. The Plan Administrator is authorized to procure an insurance policy at a cost that it determines to be reasonable, if the Plan Administrator determines such policy to have reasonable coverage. The provisions of paragraph 5, above, shall cease to apply upon the effective date of any such insurance policy."

(B) The "Schedule of VEBA Trust Contributions" that is attached as a Schedule to the Plan Document shall be, and hereby is, amended and restated to read as follows:

**"VEBA TRUST
CONTRIBUTIONS/CREDITS TO:**

Coverage Period	Cash Contributions to Health Insurance Plan	Reimbursement Plan Credits
August 1, 2009 – December 31, 2009	\$143 per month	Monthly cost of coverage under an Alternative Medical Plan up to \$119 per month
January 1, 2010 – December 31, 2010	\$229 per month	Monthly cost of coverage under an Alternative Medical Plan up to 83.33% of the monthly Health Insurance Plan contribution
January 1, 2011 – December 31, 2011	n/a	Monthly cost of coverage under an Alternative Medical Plan up to 100% of monthly Health Insurance Plan contribution for 2010, increased at the same rate as the increase in the base Medicare Part B premium, published by the Social Security Administration."

4. The Plan, as reformed pursuant to the terms of this Order, and all of the provisions thereof, including but not limited to Section X(C) (regarding the establishment of a termination reserve), is hereby APPROVED in the form submitted as Annex 2 to the Defendants' Memorandum.

5. The document titled "Agreement Concerning Arrangements and Procedures for the Continuing Administration of the CRA Holdings Inc. Employee Welfare Benefit Plan, " which document is forth as Annex 1 to the Memorandum (the "Plan Administration Agreement"), is hereby amended such that Section III(3) of the Plan Administration Agreement shall provide as follows:

"3. Procedure for Reimbursement. Opt-Out Participants will be entitled to be reimbursed on either a monthly or a quarterly basis, as they may elect from time to time. Participants must submit documentary evidence of the premiums paid for private insurance for coverage during the applicable period they have elected, and the Plan will issue reimbursement checks in the appropriate amounts. Participants will be entitled to submit reimbursement requests not later than 60 days after the end of each calendar quarter, with respect to premiums paid during such quarter."

6. The Plan Administrator is hereby authorized to review the fees requested by the Plan's professionals and to pay, out of Plan assets, the professional fees that it determines have been reasonably incurred in connection with this matter.

IT IS SO ORDERED

Dated at Bridgeport, Connecticut this 17th day of November, 2010.

/s/ Janet C. Hall
UNITED STATES DISTRICT JUDGE