



CONTRACT AMENDMENT CONFIRMATION TO RENEW EARLY FOR DECEMBER 1, 2013

Form must be emailed to SBUService@kp.org or faxed to: 800-369-8010

Please read this form in its entirety before completing. It specifically supports a change in your renewal date or an early renewal for December 1, 2013. If you have questions about this form or are interested in a different early renewal date, call the Customer Connection Team at **800-790-4661, option 3**, or contact your broker.

Groups are permitted to change renewal dates or renew early by voluntarily terminating their current guaranteed 12-month contract and replacing it with a new 12-month contract with a new renewal date if they meet all the requirements below. Please **initial** on the lines below for each requirement your group meets. If you do not meet all of the requirements below, you will not be eligible to renew early.

_____ My group did not make a renewal date change in 2013.
Initial here

_____ My group acknowledges December 2013 rates will be applied.
Initial here

If you became a new Kaiser Permanente customer any time from October 2012 to December 2012 and received a 13-month to 15-month extended contract that renews in January 2014: You will receive a 6.47% increase (5.14% for POS and 2.04% for PPO Plans) if you have a Northern California contract. You will receive a 6.84% increase (3.15% for POS and 2.04% for PPO Plans) if you have a Southern California contract.

If you have a contract beginning any time from January 2013 to June 2013: You will receive a 4.21% increase (0% for POS and PPO Plans) if you have a Northern California contract. You will receive a 6.45% increase (0% for POS and PPO Plans) if you have a Southern California contract.

If you have a contract beginning any time from July 2013 to December 2013: There will be no rate impact.

By completing, signing, and returning this form to Kaiser Permanente by October 4, you are indicating your confirmation to amend your current contract, which changes your renewal date to December 1, 2013. Your new 12-month contract period will be December 1, 2013, through November 30, 2014. Your confirmation to amend your contract is binding and irrevocable until December 2014. In order for your Confirmation to Renew Early form to be accepted, we must have already received your Intention to Renew Early form by the August 30 due date. Kaiser Permanente reserves the right to decline, for any reason, a request to renew early.

Please complete, sign, and email or fax this form to the email address or fax number provided above by October 4. Forms received after the October 4 deadline will not be accepted.

COMPANY INFORMATION

Company name		Customer ID	
Street address (no P.O. boxes)		City	State ZIP
Office phone () -	Ext.	Fax () -	

CHANGE RENEWAL DATE

Current renewal date	Group health plan carrier being offered alongside Kaiser Permanente
Requested renewal date December 1, 2013	Open enrollment period November 1, 2013, through November 30, 2013

SIGNATURE

By signing this form, I agree to amend my current contract to change my renewal date to December 1, 2013, and my contract period to December 1, 2013, through November 30, 2014. I further understand this may result in a rate increase.

You will need to decide if renewing early is the best choice for you. Kaiser Permanente makes no representations about what an early renewal could mean for compliance with the Affordable Care Act, and you should consult your legal advisers before making any decision.

Authorized company signer (please print name)	Title (please print)
Signature X	Date
Email	