Excellus

January Renewal Change Attestation

By signing this document, I am requesting that my group health plan renewal period and open enrollment be changed from _____to January 1, 2014. I understand that my benefit plan year for all plan offerings will match my renewal period. Effective January 1, 2014, the benefit plan year will be calculated on a calendar year basis. As a result of this change, all current deductibles and/or other accumulators for all plan offerings will reset to zero effective on each of the dates indicated above.

I understand that my group health plan premium rate will also change on each of the dates indicated above. January 1 will be the start of my renewal period and benefit plan year going forward. I also understand that all plan offerings must have the same rate effective date, renewal period and benefit plan year.

I agree to hold a new open enrollment for my employees. I also agree to communicate to my employees the fact that their deductibles and accumulators will re-set to zero on each of the dates indicated above and January 1 will be the start of the new benefit plan year going forward.

Group Name:_____ Group Representative Signature_____

Coverage Effective Date: _____ Broker/Agent Signature_____

Please include this document with the signed rate sheet(s) and benefit grid(s).