Renewal Cover Letter – 2027 Plan Year

Effective January 1 – December 31, 2027

Dear Group Administrator,

Your Idaho AGC Health Plan renewal packet for the 2027 plan year is now available in your SIMON Employer Portal under Resources → Documents. If you do not see all your renewal materials, please contact our office for assistance.

Documents to Return to Idaho AGC Health Plan

Please complete, sign, and return the following renewal documents no later than November 20, 2026:

- **2027 Medical Rate Sheet:** Select your plan(s), sign, and date.
  - Groups with 11–50 enrolled employees may offer up to 2 plans.
  - Groups with 51–99 enrolled employees may offer up to 3 plans.
  - Groups with 100+ enrolled employees may offer up to 4 plans.
  - At least 10% of employees must be enrolled in each plan offering.
  - If you are selecting multiple plans and using paper enrollment forms, please contact our office for a Plan Selection Form. **Groups using SIMON for enrollment do not need this form.**
- **2027 Vision/Dental Bundle Rate Sheet:** Select or decline the plan, sign, and date.
- **Annual Renewal Agreement:** Complete all sections and obtain signatures from an authorized company officer.

Documents to Distribute to All Employees

Please distribute the following documents to your employees no later than 30 days before January 1, 2027, as required by law:

- 2027 Plan Year Changes
- Summary of Benefits and Coverage (SBC)
- Glossary of Health Coverage and Medical Terms

These documents will be available on your SIMON portal and on the Idaho AGC Health Plan webpage mid-November 2026

- https://www.simon365.com/
- https://healthplan.idahoagc.org/benefits-information-forms

Important Dates and Deadlines

To ensure your group's setup in all carrier systems by January 1, please follow the timeline below:

• November 20, 2026 – Last day to Submit Renewal Documents

Submit your completed Medical and Vision/Dental Rate Sheets and Annual Renewal Agreement to the Idaho AGC Health Plan Team as soon as possible. The earlier you submit your renewal, the more time your employees will have for Open Enrollment!

• Open Enrollment Period

Your group's open enrollment window will open **once renewal documents have been received and**

processed. You'll receive an email notification once your session is live in SIMON. All open enrollment elections and change forms must be completed in SIMON or submitted to our office by December 1, 2026.

See the enclosed Open Enrollment Information Sheet for full details.

Coordination with Your Broker

Work with your broker of record to coordinate your group's 2027 renewal elections. Please ensure your broker receives copies of all signed renewal documents. Completed renewal documents must be returned to our office no later than November 20, 2026, even if no plan changes are being made. Your broker and their staff should assist you with both your renewal and open enrollment processes.

Invoices and Billing

Your January 2027 invoice will be generated in mid-December and will reflect your updated plan enrollment and rates. Please review your invoice carefully to confirm all enrollees and rates are accurate and notify our office immediately if you identify any discrepancies.

Thank You

We appreciate your continued support of the Idaho AGC Health Plan. Your partnership helps us provide consistent, high-quality benefits to member organizations across Idaho. We wish you and your employees a healthy and successful 2027!

Sincerely,

Your Idaho AGC Health Plan Team

Susan Fudge *Jenny Larsen* *Kaity Kidd*

Susan Fudge
Sr. Health Plan Director

Jenny Larsen
Health Plan Manager

Kaity Kidd
Benefits Admin. Specialist

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Ph: (208) 344-9755 | Fax: (208) 336-2120
healthplanteam@idahoagc.org
https://healthplan.idahoagc.org/

IDAHO AGC HEALTH PLAN

2027 PLAN YEAR CHANGES
TO YOUR GROUP HEALTH PLAN

Please Read Carefully

Distribute a copy to all your benefits-eligible employees

This *Plan Update* is a summary of the Idaho AGC Health Plan changes that were approved by the Trustees of the Idaho AGC Health Plan effective on January 1, 2027.

Medical Plan Changes:

- HDHP $3,400 plan deductible increasing based on federal guidance
    - Deductible increasing to $3,500 Individual/$7,000 Family
        - In-Network Out of Pocket $7,000 indvidiual/$14,000 Family
    - Members on this plan will receive new medical ID cards for 2027

Please note: *This **Plan** Update is only a summary of the changes. Please review your **Plan** document.*

OPEN ENROLLMENT INFORMATION FOR THE 2027 PLAN YEAR

Open enrollment is your group's annual opportunity for employees to review and make changes to their Idaho AGC Health Plan coverage for themselves and eligible dependents, without showing proof of a life event. This includes new enrollments, changes to coverage tiers, or canceling coverage. **All open enrollment changes will take effect January 1, 2027.**

Renewal and Open Enrollment Timeline

To ensure a smooth renewal and open enrollment process for all groups and members, please note the following key dates:

- **November 20, 2026** – Renewal paperwork due
  Your group's renewal materials must be completed and submitted to the Idaho AGC Health Plan Team by this date. Once received, our team will enter your 2027 plan selections into the SIMON system and open your group's enrollment session.
- **December 1, 2026 (midnight)** – Open enrollment window closes
  All open enrollment sessions in the SIMON Benefit Administration System must be completed by this date. This ensures all members are active in carrier systems and, for those changing medical plans, receive their medical ID cards by **January 1, 2027**.

We understand that early deadlines can feel challenging, but these dates are necessary to allow time for system updates, carrier transmissions, and verification of all member data before the new plan year begins. By meeting these timelines, employees making changes will appear correctly in carrier systems on January 1, 2027, and will have updated medical ID cards in hand so they can use their benefits right away.

Timely submission of renewal and open enrollment materials also allows us to generate January 2027 invoices by mid-December, and ensures you have the information needed to set up your 2027 payroll deductions accurately.

We value your partnership and your input, and we remain committed to making this process as smooth and seamless as possible.

Open Enrollment Process

Once your renewal has been processed, you'll receive a notification that your group's open enrollment window is open. At that time, you or your employees can log in to **https://simon365.com** to review and make changes.

Please note: **2027 renewals are passive**, meaning employees who do not take action will automatically be renewed in their current plan. Employees only need to complete enrollment forms if they wish to make changes to their coverage for 2027.

Groups participating in the Idaho AGC Health Plan must hold their formal open enrollment sessions annually, and complete it by having employees make changes in the SIMON system or by submitting enrollment forms to the Idaho AGC Health Plan **on or before December 1, 2026**.

Forms and Resources

All enrollment and change forms, as well as plan documents, are available at:
https://healthplan.idahoagc.org/benefits-information-forms

Please be sure to use only the most current forms available on the website. Paper forms should only be used if your group is not using the SIMON system for open enrollment.

Forms may be submitted by:

- **Secure email:** healthplanteam@idahoagc.org
- **Fax:** (208) 336-2120

Please follow all HIPAA guidelines when sending documents containing sensitive information such as Social Security numbers, dates of birth, or gender. If a secure email option is not available, please send forms by fax. **The most secure way for your employees to go through the open enrollment process is by granting them access to the SIMON ESS portal.**

Employee Change Examples and Required Forms (if not using SIMON)

Type of Change	Required Form(s)
Adding/Changing Medical, Dental, or Vision Coverage	Idaho AGC Health Plan Enrollment Form
Canceling Coverage for Self or Dependents	Coverage Cancelation Form; Idaho AGC Medical Waiver Form (if canceling employee coverage); Equitable Enrollment Form
Adding or Changing Voluntary Benefits	Equitable Enrollment Form

Employees waiving medical coverage remain eligible for the **group life/AD&D benefit**. Those enrolled in group life/AD&D may also elect **supplemental life, accident, and critical illness coverage**. Employees not enrolled in a medical plan are **not eligible** for basic STD or Buy-Up STD coverage.

Voluntary Life/AD&D Enrollment

Employees may elect or increase Voluntary Life/AD&D coverage for themselves and/or their spouse. **Evidence of Insurability (EOI) is required only for coverage amounts requested over the Guaranteed Issue limits:**

- **Employee Guaranteed Issue:** $100,000
- **Spouse Guaranteed Issue:** $50,000
- Employees may elect or increase **child coverage without EOI**.
- **Spouse coverage may not exceed 50% of the employee's Voluntary Life/AD&D buy-up amount.**
- ***Prior Denials:*** *Employees or dependents who have previously been denied Voluntary Life/AD&D coverage by Equitable are not eligible for coverage under this enrollment opportunity, including Guaranteed Issue coverage.*

EOI can be completed online at:
https://ebadmin.equitable.com/eb-eoi/online-eoi/life/employer-lookup?employerId=020715
Policy number: 020715

The Critical Illness coverage includes an annual wellness benefit of $50. Members who get an annual physical covered under the medical plan can submit for a $50 check/reimbursement!

We appreciate your efforts in helping make open enrollment a success each year. Our goal is to make the process simple, clear, and timely so your employees are covered and ready for the year ahead. If you need assistance or have any questions, please contact the Idaho AGC Health Plan Team for assistance.

SIMON OPEN ENROLLMENT INSTRUCTIONS FOR EMPLOYERS

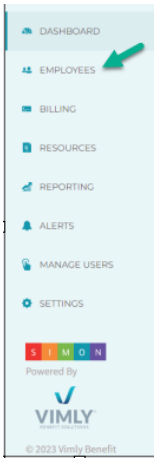
Once your renewal has been processed you will be notified via email when your Open Enrollment period begins. You can then process Open Enrollment changes online at https://simon365.com.

Important note: 2027 Renewals are passive which means your employees will be automatically renewed. Open Enrollment changes need to be entered for changes only.

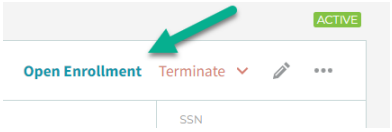
Once you login to SIMON, you will see the **Open Enrollment Status** which shows how much time you have remaining to process OE changes.



To begin the open enrollment process for an **existing employee**, select the employee you wish to make OE changes to from the **Employees tab** on the left side of your SIMON home page:

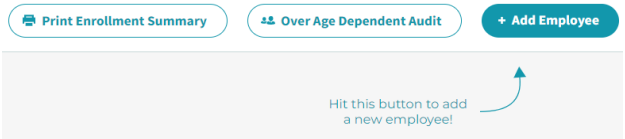


Select the **Open Enrollment** option in the top right corner of the employee's profile:



SIMON will guide you through the remaining steps of the OE process.

To begin the open enrollment process for a **new employee,** select the **Employees tab** on the left side of your SIMON home page then select **Add Employee** in the top right corner:



Select **Open Enrollment** as the qualifying event and SIMON will guide you through the remaining steps of adding a new employee.
Once submitted, any changes you make will become effective as of the Renewal date.

Questions?

Please contact HealthPlanTeam@idahoagc.org for plan year cost and benefit information.
For assistance with SIMON please use the **SIMON Support tile** on your SIMON home page.

IDAHO AGC HEALTH PLAN

RENEWAL AGREEMENT
Plan Year January 1 – December 31

The Idaho AGC Health Plan (the plan) is administered through the Idaho AGC Self-Funded Benefit Trust. The Idaho AGC Self-Funded Benefit Trust provides coverage for medical, dental, and vision benefits. Insurance premiums for fully insured group life, group short-term disability, voluntary life, short-term disability buy-up, and ancillary benefits temporarily flow through the Idaho AGC Self-Funded Benefit Trust and are paid to the applicable insurance company. The Idaho AGC Self-Funded Benefit Trust does not participate in the state guaranty association. The Idaho AGC Self-Funded Benefit Trust is mandated by the Idaho Department of Insurance to provide an annual audit and review certification by an independent third-party accredited actuary.

Legal Name of Business: _____

DBA (if applicable): _____ **SIC:** _____ **(EIN)** _____

Your Group Information:

It is important we have your group's most up-to-date information. Individuals with access to the SIMON system should update their group information such as mailing address, physical address, phone numbers, and contact information.

If you use a payroll service or other third party to pay your contribution and you want them to receive the monthly billing, please attach the contact's name, company name, address, phone, fax, and e-mail to this Agreement.

Employee Eligibility Requirements

The Idaho AGC Health Plan is a **group** health plan. To qualify, a member group must have a minimum of two full-time employees (a full-time employee works 30 or more hours per week), not residing in the same household. A benefit eligible employee is defined as one that has completed their eligibility waiting period and **must work** 30 or more hours per week. Member groups are subject to audits throughout each plan year.

Employee Participation Requirements

This section must be completed using the group's current enrollment numbers for Q4 2026. If there is more than a 10% change in the number of eligible employees, enrolled employees, or employees waiving medical coverage, the group may submit revised counts.

Member groups must offer participation in the Plan to 100% of your benefit eligible employees.

At least 75% of all eligible employees must enroll in The Idaho AGC Health Plan (the plan) or waive coverage due to enrollment in another qualified health plan. Failure to comply with this requirement may result in the group's termination of coverage from the Idaho AGC Health Plan for all employees. Compliance is mandatory throughout the plan year; group termination may occur mid-year. A benefit eligible employee has met their eligibility waiting period and works 30+ hours per week. Employees working less than 30 hours per week are not eligible for coverage under the Idaho AGC Health Plan.

Current number of benefit eligible employees: _____

Current Number of employees within their benefit eligibility waiting period: _____

Current number of employees waiving medical coverage for other qualified coverage: _____

Current number of eligible employees who are declining medical coverage (no other qualifying coverage): _____

The Idaho AGC Health Plan may request a SUTA or payroll report to verify enrollment in the Idaho AGC Health Plan.

Based on the above statement:

I certify that coverage has been extended to all benefit eligible employees, and our organization is meeting the 75% participation requirement. Check One Box: **Yes** ☐ **No** ☐

Nondiscrimination Requirements

Each member group must satisfy the nondiscrimination requirements of the Internal Revenue Code to participate in The Idaho AGC Health Plan. The nondiscrimination requirements of the Internal Revenue Code include, but are not limited to, Code §§ 105(h) and 505(b). Prohibited discrimination may result if highly compensated individuals at an employer receive more favorable treatment than other employees in eligibility to participate or in benefits provided. For these purposes a "highly compensated individual" includes (a) one of the 5 highest paid officers, or (b) a shareholder who owns more than 10% in value of the stock in the employer, or (c) among the highest paid 25 percent of all employees. Each member group must provide information requested by The Idaho AGC Health Plan to demonstrate its compliance with the Code's nondiscrimination rules. A member group's failure to provide information requested by The Idaho AGC Health Plan or failure to satisfy the nondiscrimination rules of the applicable Code provisions will result in termination of the member group's participation in The Idaho AGC Health Plan. Such terminations can occur mid-year.

COBRA

A member group is subject to COBRA during the current calendar year if the employer employed 20 or more employees (part-time employees are counted as fractional) on more than 50% of its typical business days in the preceding calendar year. This number is based on the **total** number of employees and not the number of employees covered by the Idaho AGC Health Plan. Part-time employees are included in the total employee count expressed as a fraction. **Employers that do not qualify (do not have 20 or more employees on more than 50% of their typical business days in the preceding calendar year) MUST mark "NO."** COBRA eligibility is determined on an annual basis.

Based on the above statement, is your member group subject to COBRA? Yes ☐ No ☐

Required Information for Federal Reform

Annual Employer Size Certification (2026 Tax Year)

Employers participating in the health plan must annually certify their size status for IRS reporting purposes, based on the average number of employees during the **2026 calendar year**. An **Applicable Large Employer (ALE)** is defined as an employer with an average of **50 or more full-time and full-time equivalent employees**. A **Small Employer** has **fewer than 50** such employees.

Calculation Method:
Average number of employees = total employees for each month (January–December 2026) ÷ 12.

Employee counts must include all employees and affiliated entities, including owners, officers, full-time, part-time, seasonal, union, and out-of-state employees. **IRS guidance**: https://www.irs.gov/pub/irs-pdf/i109495c.pdf

Average Number of Employees for 2026: _____

Certification (check one):

☐ Yes, Employer is an ALE (50 or more employees). ☐ No, Employer is a Small Employer (fewer than 50 employees)

Eligibility Waiting Periods

Please complete each classification of employees. The effective date of coverage is the first of the month following the completion of the employees' eligibility waiting period. The Affordable Care Act (ACA) mandates all regular employees must have the same eligibility waiting period. To remain compliant, **eligibility waiting periods cannot exceed 60 days**. Please give only one eligibility waiting period for regular employees and one for re-hire, if different.

Please check one for each (Regular & Rehire): Please complete this section, do not leave blank

All Regular Employees:	☐ **0 days**	☐ **30 days**	☐ **60 days**
Rehired Employees:	☐ **0 days**	☐ **30 days**	☐ **60 days**

Notification of Changes: Member groups are required to notify the plan office, in writing, within 30 days of any changes to the eligibility waiting period or eligibility requirements described in this document. These changes will be effective on the first of the month following receipt of the change in the Idaho AGC Health Plan office. Employees hired before the change will be grandfathered under the previous rules set by the member group.

Windows for Changes in Information, Eligibility or Enrollment

The member group is responsible for notifying the Idaho AGC Health Plan within the established timeline from the date of an event that affects an employee's or an employee's dependent's coverage status.

The member group has **30 days**, from the date of the event, to notify the Idaho AGC Health Plan of:

- Change to an employee's or dependent's address
- Change in enrollment or eligibility including but not limited to
  - termination of employment or reduction in hours
  - employee's death or entitlement to Medicare
  - ineligible dependents due to divorce
  - loss of other coverage
- Leave of absence, including when an employee takes FMLA leave or a USERRA leave, or fails to return to covered employment from an FMLA leave or a USERRA leave
- Receipt of Qualified Medical Child Support Orders

The member group has **60 days**, from the date of the event, to notify the Idaho AGC Health Plan of:

- Marriage
- Birth
- Adoption or placement for adoption

The member group will be responsible for reimbursing the Idaho AGC Health Plan for any claims paid on ineligible employees or their dependents that result from a failure of the member group to notify the Idaho AGC Health Plan in a timely manner of such changes or terminations. In addition, the member group will be responsible for reimbursing the Idaho AGC Health Plan for any claims paid on ineligible employees or their dependents who were granted coverage based on inaccurate or incorrect information on a health statement application.

Requirements for Employee Leave of Absence

Employer groups are allowed to grant up to 90-day leave of absence to an employee. The Idaho AGC Health Plan office must be notified, in writing, of the employee, of the date the leave was granted, and the length of the leave within 30 days of the employees' last day worked. A leave of absence can only be allowed when an employee is experiencing a personal or medical situation that requires the employee to be off work for an extended period or for an employee that is working reduced hours but not separated from the company. Employees separated from the company due to lay-offs, and who are working zero hours per week, are not eligible for a leave of absence. Employees not returning to work after the 90-day leave of absence must be terminated from coverage as of the last day of the month when the 90-day leave expires. Short-Term Disability is an "active at work" benefit. Employees on leave of absence are not eligible for short-term disability benefits for injuries or illnesses occurring or diagnosed while on leave. The employer group is responsible for contribution payment for the entire length of the leave of absence. This provision is subject to the FMLA, USERRA, and other applicable federal and state leave laws. Where required, coverage continuation, employee contributions, employer contributions, and reinstatement will be administered under those laws.

Annual Renewal

Member groups receive their renewal rates for the next plan year and a renewal packet in the last quarter of the current plan year. The Annual Renewal Agreement and rate sheets must be completed and returned to the Idaho AGC Health Plan by the date indicated in the Renewal Cover Letter.

Open Enrollment

All member groups must allow an annual open enrollment period for all benefit eligible employees, at least once every 12 months. Open enrollment is a period in which employees can make changes, additions, or cancelations to their enrollments without showing proof of a life event. Open enrollment periods can open as soon as your group has made their 2027 plan year selections and must end on or before the date enrollments are due to the Idaho AGC Health Plan. Refer to the Renewal Cover Letter in your renewal packet for all important timelines and dates actions are due. If an employee does not act during open enrollment, the next opportunity they will have to make changes will be the next open enrollment, unless they or a qualified dependent experience a qualified life event. Any enrollment changes outside open or initial enrollment require proof of a life event.

Changes to Plan Options

The Trustees have the right to make changes to the plan's benefits from time to time, as they deem necessary in the operation and administration of the plan. You will be notified of such changes, and you agree to notify your covered employees and their dependents within 30 days of receipt of such notice of changes from the plan.

Group Contributions

The Trustees of the Idaho AGC Health Plan reserve the right, in their sole discretion, to change or adjust an employer group's contribution amount at any time during the plan year. The minimum group contribution is 50% of the employee rate for the lowest deductible medical plan offered or in compliance with the affordability component of the ACA regulations. Accurate reporting of employer contributions for all medical plans offered are required for the Idaho AGC Health Plan to complete the Prescription Drug Data Collection (RxDC) reporting that is collected annually by the Centers for Medicare and Medicaid Services.

A.) Employer contributions for groups offering a single medical plan *(If the group offers **more than one medical plan**, do not complete- skip to B.):*

_____% per employee per month **OR** $_____per employee per month

_____% per dependent per month $_____per dependent per month

B.) For employer groups offering more than a single medical plan, please insert how the employer contributions are calculated for each medical plan *(add a separate sheet if more than three medical plans are offered).*

1.) Employer Contributions for the lowest cost medical plan**, $**_____ *(deductible amount)*

_____% per employee per month **OR** $_____per employee per month

_____% per dependent per month $_____per dependent per month

2.) Employer Contributions for the next higher cost medical plan**, $**_____ *(deductible amount)*

_____% per employee per month **OR** $_____per employee per month

_____% per dependent per month $_____per dependent per month

3.) Employer Contributions for the next higher cost medical plan**, $**_____ *(deductible amount)*

_____% per employee per month **OR** $_____per employee per month

_____% per dependent per month $_____per dependent per month

Dental and Vision Bundle Contributions

C.) For employer groups offering the dental/vision coverage bundle, please insert how the employer contributions are calculated:

_____% per employee per month **OR** $_____per employee per month

_____% per dependent per month $_____per dependent per month

Plan Documents

The Idaho AGC Health Plan will provide electronic copies of Summary of Benefits and Coverage (SBC), Summary Plan Description (SPD), and any other necessary plan documents to the group administrator. It is the responsibility of the employer to distribute these materials, and other materials required by federal, state, and local laws to your plan participants.

Idaho AGC Membership Requirements

As a condition of participation in the Idaho AGC Health Plan, the employer group must maintain active membership in the Idaho Associated General Contractors (Idaho AGC) in good standing throughout its participation in the Health Plan.
Idaho AGC membership dues must be paid **annually**. Employer groups participating in the Health Plan are not eligible to pay their Idaho AGC membership dues in monthly installments.
If an employer group's Idaho AGC membership is terminated for any reason, the employer group's participation in the Idaho AGC Health Plan will also terminate. Termination of the employer group's participation will result in the termination of coverage for all enrolled employees, eligible dependents, and COBRA participants.
Because termination of Idaho AGC membership results in termination of the employer group's health plan, COBRA continuation coverage through the Idaho AGC Health Plan will also terminate, subject to applicable federal law and the governing Plan documents.

Group Termination of Participation

You understand and agree that your continued participation in the Idaho AGC Health Plan and the continued coverage of your employees and dependents under the Idaho AGC Health Plan is dependent on the member group making timely contributions to The Idaho AGC Health Plan and maintaining your membership in the Idaho AGC. Failure to comply with the payment policy, or retain your membership with the Idaho AGC, in good standing, will result in the termination of the member group from the Idaho AGC Health Plan. If a member group is terminated, coverage for employees and dependents is terminated on the same date. Trustees may terminate a member group from the Idaho AGC Health Plan for any material failure to comply with the terms of this Agreement. A member group may terminate participation in the Idaho AGC Health Plan as of the last day of a month, by giving five (5) days advance written notice to the Idaho AGC Health Plan.

Group Reinstatement

The Idaho AGC may terminate a group for failure to pay contributions or membership dues in compliance with Idaho AGC By-Laws or payment policy. An employer group may be reinstated to an active status one time per every rolling 12-month period. The employer group must bring their account current and pay a reinstatement fee of $150.00. If the employer group is terminated a second time within the rolling 12-month period, there will be no option for reinstatement.

Trustees and Trust Agreements

You understand and agree that the Idaho AGC has the authority to appoint the Trustees of the Idaho AGC Self-Funded Benefit Trust. By entering into this Agreement, you accept the appointment of the current Trustees. You understand and agree that the Idaho AGC has created the Idaho AGC Self-Funded Benefit Trust and has adopted the Trust Agreement governing the operation and administration of The Idaho AGC Health Plan. By entering into this Agreement, you agree to abide by the terms and conditions of the Trust Agreement.

It is agreed that this document supersedes any previous Master Group Applications, Participation Agreements, and Renewal Agreements.

Domestic Partner Coverage

The partner of an eligible employee who is of the same or opposite gender with a relationship that demonstrates the following:

- Partners have executed an Affidavit of Domestic Partnership (and a copy has been provided to the Idaho AGC Health Plan)
- Cohabitation in an exclusive mutual commitment like that for marriage and have been involved in the domestic partnership for a period of not less than six consecutive months
- Neither partner is legally married to any other person nor has another Domestic Partner
- Partners are both ages of consent and are not related by marriage or blood in a way that would otherwise prohibit marriage in the state of their residence

This group will offer coverage to Domestic Partners: **Yes** ☐ **No** ☐

This is an annual election and cannot be changed outside the renewal period.

Member Group Responsibilities

Member groups are required to comply with the terms and conditions agreed upon in the Master Group Application and this Renewal Agreement. Member group responsibilities include, but are not limited to the following:

- Nondiscrimination requirements
- Timely notification for COBRA purposes
- Timely distribution of plan changes and plan documents to employees
- Timely distribution of Medicare Part D Creditable Coverage Disclosure
- Timely distribution of portability and conversion forms to terminated employees
- Timely notifications to the Idaho AGC Health Plan of enrollments, terminations, life events
    - If utilizing the SIMON benefit administration system, entries must be completed within enrollment/termination windows
- Reporting Leaves of Absence within 30 days of the employee's last day worked
- Maintain membership in the Idaho AGC in good standing
- Payments made in compliance with the Payment Policy of the Idaho AGC Health Plan
- Each medical plan offered must have at least 10% of the total group enrollment
- Timely notification of terminated administrative staff for SIMON access security
- Compliance with HIPAA standards for PHI in any form
- If Domestic Partner coverage is elected, timely provide to the AGC Health Plan an executed Affidavit of Domestic Partnership

Affirmation

I affirm the answers given are complete and correct. I understand the Idaho AGC Health Plan will rely on each answer in making certain determinations including, but not limited to, eligibility for employees and their dependents, COBRA eligibility, and group participation compliance. If this Agreement contains any material misstatements or omissions, the Idaho AGC Health Plan or contracted carrier may, within 24 months of coverage, take any other legal action available by law.

I have reviewed all the answers in this Renewal Agreement and acknowledge and agree with all terms and conditions. Regardless of whether an independent producer or other person has completed the answers for me, I verify that all answers are true and complete.

Member Group Authorized Signer

Signature of Officer: _____ **Date:** _____

Print Name: _____ **Title:** _____

Company Name: _____

Broker / Broker Agency

Broker signature: _____ **Date:** _____

Broker Name: _____ **Broker Agency:** _____