



**E-MAILED**  
9/16/10

**FULLY EXECUTED - CHANGE 3**

**Contract Number: 4400002342**  
Contract Change Effective Date: 09/14/2010  
Valid From: 07/01/2008 To: 06/30/2011

All using Agencies of the Commonwealth, Participating Political Subdivision, Authorities, Private Colleges and Universities

**Purchasing Agent**

Name: OA Central  
Phone: 717-787-8191  
Fax: 717-783-4429

Your SAP Vendor Number with us: 114714

**Supplier Name/Address:**  
PRUDENTIAL INSURANCE COMPANY OF AMERICA  
751 BROAD ST  
NEWARK NJ 07102-3714 US

**Please Deliver To:**

To be determined at the time of the Purchase Order unless specified below.

**Contract Name:**  
Prudential Long Term Disability

**Payment Terms**  
NET 30

Solicitation No.: \_\_\_\_\_ Issuance Date: \_\_\_\_\_  
Supplier Bid or Proposal No. (if applicable): \_\_\_\_\_ Solicitation Submission Date: \_\_\_\_\_

This contract is comprised of: The above referenced Solicitation, the Supplier's Bid or Proposal, and any documents attached to this Contract or incorporated by reference.

Item	Material/Service Desc	Qty	UOM	Price	Per Unit	Total
1	Long Term Disability	0.000		0.00	1	0.00

**General Requirements for all Items:**

**Information:**

**Total Amount:**  
SEE LAST PAGE FOR TOTAL OF ALL ITEMS

Currency: USD

Supplier's Signature \_\_\_\_\_  
Printed Name \_\_\_\_\_

Title \_\_\_\_\_  
Date \_\_\_\_\_



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**Contract Number: 4400002342**

Contract Change Effective Date: 09/14/2010

Valid From: 07/01/2008 To: 06/30/2011

**Supplier Name:**

PRUDENTIAL INSURANCE COMPANY OF AMERICA

**Header Text**

DGS RFP Number - CN:00023197

Voluntary Benefits

**Agency Contact: Tara Long**

OA-Executive Offices  
Employee Benefits  
Room 513 Finance Building  
Harrisburg, PA 17120  
ph: (717) 787-9872  
email: talong@state.pa.us

**Vendor Contact: John Hafner**

Account Executive  
The Prudential Insurance Company of America  
2101 Welsh Road  
Dresher, PA 19025  
Telephone: 215-658-5389  
Fax: 973-548-6533

3 year contract, with either 2 1 yr. renewals or 1 2 yr. renewal.

11/05/2008: Amendment #1 is added to incorporate a Group Insurance Contract G-91475-PA (Attachement E)

06/22/2010: Amendment #2 added to alter the way in which liquidated damages are measured. Performance will be reported on a quarterly basis and damage will be assessed on a yearly basis.

08/13/2010: Amendment #3 added to reflect a policy change that allows new hires 60 days to enroll in optional insurances. sjb  
No further information for this Contract

**Information:**

**Total Amount:**

0.01

Currency: USD

**AMENDMENT NUMBER 3 TO  
GROUP CONTRACT G-91475-PA  
COMMONWEALTH CONTRACT NUMBER 4400002342**

**COMMONWEALTH OF PENNSYLVANIA  
GOVERNOR'S OFFICE OF ADMINISTRATION  
AND  
THE PRUDENTIAL INSURANCE COMPANY OF AMERICA**

This Amendment between Prudential Insurance Company of America, Federal Identification Number 22-1211670 and the Commonwealth of Pennsylvania, entered into this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, amends Group Contract G-91475-PA, Commonwealth Contract Number 4400002342, which was executed between the parties effective July 1, 2008.

WITNESSETH:

WHEREAS, The Commonwealth of Pennsylvania wishes to change the number of days from 31 to 60 for enrollment with no evidence of insurability required for Long Term Disability Coverage;

WHEREAS, the terms of contract 4400002342 provide for such changes;

WHEREAS the terms of contract 4400002342 provide that changes in the number of days for enrollment with no evidence of insurability required will not result in a change to the per employee per \$100 of covered bi-weekly payroll rate, unless Prudential's risk is changed by at least 10%, in which case the parties have agreed to enter into good faith negotiations;

WHEREAS the above referenced changes to the number of days for enrollment with no evidence of insurability required for the effected employees does not change Prudential's risk by 10% or greater;

WHEREAS, the forms in the booklet certificates approved by the Pennsylvania Department of Insurance as fulfilling the notice requirements of Pennsylvania Insurance Regulations were incorporated in contract 4400002342;

WHEREAS, the forms in the booklet certificates created by Prudential for compliance with insurance regulations of the Pennsylvania Department of Insurance have not yet been updated to reflect the above stated changes in the number of days for enrollment with no evidence of insurability required;

WHEREAS, the Commonwealth of Pennsylvania and Prudential wish to update the

booklet certificates and notice documents;

WHEREAS, the parties wish to amend the Contract to reflect this change in the number of days for enrollment with no evidence of insurability required and to include current provisions as of May 1, 2010, in certificates for Long Term Disability coverage for all active permanent Full-time and Part-time Employees.

NOW THEREFORE, in consideration of the covenants contained herein, and agreeing to be legally bound, the parties do hereby agree as follows:

- I. The notice of change bearing the code "91475, CNC, LTD, 05-01-2010, 67" is attached, as of May 1, 2010, to the certificate bearing the code "91475, LTD, All Permanent Employees, Ed 5-2008, 12" for Long Term Disability for all active permanent Full-time and Part-time Employees.
- II. The page entitled SCHEDULE OF PLANS is deleted and replaced with the Schedule of Plans attached to this amendment as of May 1, 2010.
- III. The certificate for Long Term Disability for all active permanent Full-time and Part-time Employees, and the notice of change attached to that certificate and bearing the code "91475, BNC, LTD, 05-01-2010, 67" are completely replaced for such employees, as of May 1, 2010, by the certificate bearing the code "91475, LTD, All Permanent Employees, Ed 4-2010, 66".

This Amendment is in addition to, and not in substitution of prior amendments, and except as specifically amended herein, all other items and conditions of the Contract and any prior amendments shall remain unchanged and in full force and effect.

IN WITNESS WHEREOF, the parties have entered into this Amendment as of the date first stated above.

FOR PRUDENTIAL INSURANCE COMPANY OF AMERICA, Inc:  
Federal ID Number 22-1211670

June 29, 2010

By \_\_\_\_\_  
Vice President, Contracts

FOR THE COMMONWEALTH OF PENNSYLVANIA:

Approved as to Form and Legality:

By \_\_\_\_\_  
Office of General Counsel (Date)

Approved as to Form and Legality:

By \_\_\_\_\_  
Deputy Attorney General (Date)

Approved:

By \_\_\_\_\_  
Secretary of General Services (Date)

Approved:

By \_\_\_\_\_  
Office of Administration (Date)

Approved as to Form and Legality:

By \_\_\_\_\_  
Chief Counsel (Date)  
Office of Administration

Approved that funds will be available  
contingent upon receipt from participating  
agencies:

By \_\_\_\_\_  
Governor's Office Comptroller (Date)

# Schedule of Plans

Effective Date: May 1, 2010

Group Contract No.: G-91475-PA

This Schedule of Plans sets forth the Plan of Benefits that applies to each Covered Class under the Group Contract listed below as of the Effective Date. The Plan of Benefits for a Covered Class is determined by: (1) the Group Insurance Certificates that apply to the Covered Class; and (2) any modification to those Certificates, provided the modification is listed below or included in an amendment to the Group Contract. A copy of each Certificate and any modification to it are attached to the Group Contract and made a part of it.

1. **Covered Class:** All Employees included in the Covered Classes of the Group Insurance Certificate(s) listed below.

**Plan of Benefits that Applies to this Covered Class:**

The Coverage(s) described in the Group Insurance Certificate prepared for the Group Contract shown above:

- (a) With the Program Date of May 1, 2010;
- (b) and bearing the code "91475, LTD, All Permanent Employees, Ed 4-2010, 66".

ADMINISTRATIVE SERVICES

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## RIDER TO BE ATTACHED TO YOUR CERTIFICATE

### NOTICE OF CHANGE

**Covered Classes:** All active permanent full-time and part-time Employees.

**Effective Date of Change:** The first day on or after May 1, 2010 on which you are insured (see the section of your Certificate entitled "When Does Your Coverage Begin?"). The section of your Certificate entitled "When Will Changes to Your Coverage Take Effect?" applies to this change.

**Group Contract No.:** G-91475-PA

Your Certificate coded "91475, LTD, All Permanent Employees, Ed 5-2008, 12" is changed as follows:

- The **When Does Your Coverage Begin?** and **When is Evidence of Insurability Required?** sections of the **General Provisions** are replaced by the following:

#### When Does Your Coverage Begin?

When you pay the cost of your coverage under a plan, you will be covered at 12:01 a.m. on the latest of:

- the date you are eligible for coverage, if you enroll for it on or before that date;
- the date you enroll for coverage, if you enroll for it within 60 days after the date you are eligible for coverage;
- the date Prudential approves your application, if **evidence of insurability** is required; or
- the date you are in active employment. If you are not in active employment on the date your coverage would normally begin, it will begin on the date you return to active employment.

The Contract Holder may not waive an evidence of insurability requirement for any reason.

**Evidence of insurability** means a statement of your medical history which Prudential will use to determine if you are approved for coverage.

#### When Is Evidence of Insurability Required?

In any of these situations, you must give evidence of insurability, provided at your expense. This requirement will be met when Prudential decides the evidence is satisfactory.

- When you pay the cost of your coverage under a plan, you enroll for coverage more than 60 days after the date you are eligible for it.
- You re-enroll for coverage after you voluntarily cancelled it.
- You enroll after any coverage ends because you did not pay a required contribution.
- You have not met a previous evidence requirement to become insured under any Prudential group contract covering Employees of the Employer.

An evidence of insurability form can be obtained from Prudential.

All other provisions in your Certificate remain unchanged.

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THE PRUDENTIAL INSURANCE COMPANY OF AMERICA