

APPROVED



E-MAILED
02/24/12

FULLY EXECUTED - CHANGE #
Contract Number: 440002342
Contract Change Effective Date: 02/24/2012
Valid From: 07/01/2008 To: 06/30/2013

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.

Supplier Phone Number: 9735486538

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
*** Validity Period Changed ***						
1	Long Term Disability Item Text OPTIONAL LONG TERM DISABILITY INSURANCE Contract Term: 07/01/2008-06/30/2011	0.000		0.00	1	0.00

*** Validity Period Changed ***						
2	Long Term Disability Item Text OPTIONAL LONG TERM DISABILITY INSURANCE 1st year renewal Contract Term: 07/01/2011-06/30/2012	0.000		0.00	1	0.00

Information:

Total Amount:
SEE LAST PAGE FOR TOTAL OF
ALL ITEMS
Currency: USD

Supplier's Signature _____
Printed Name _____

Title _____
Date _____

**FULLY EXECUTED - CHANGE 3****Contract Number: 4400002342**

Contract Change Effective Date: 02/24/2012

Valid From: 07/01/2008 To: 06/30/2013

Supplier Name:PRUDENTIAL INSURANCE COMPANY OF
AMERICA

Item	Material/Service Desc	Qty	UOM	Price	Per Unit	Total
	*** Validity Period Changed ***					
3	Long Term Disability	0.000		0.00	1	0.00
	Item Text					
	OPTIONAL LONG TERM DISABILITY INSURANCE					
	2nd year renewal					
	Contract Term: 07/01/2012-06/30/2013					

General Requirements for all Items:**Information:****Total Amount:**SEE LAST PAGE FOR TOTAL OF
ALL ITEMS

Currency: USD

**FULLY EXECUTED - CHANGE 3****Contract Number: 4400002342**

Contract Change Effective Date: 02/24/2012

Valid From: 07/01/2008 To: 06/30/2013

Supplier Name:PRUDENTIAL INSURANCE COMPANY OF
AMERICA**Header Text**

DGS RFP Number - CN:00023197

Voluntary Benefits

Agency Contact: Tara LongOA-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

03/03/2011: Contract between the Commonwealth of PA and Prudential for Optional Long Term Disability Insurance has been extended until June 30, 2012. The Letter of Notice was sent and agreed upon by the vendor.

02/23/2012: Contract between the Commonwealth of PA and Prudential for Optional Long Term Disability Insurance has been extended until June 30, 2013. The Letter of Notice was sent and agreed upon by the vendor.

Contract Term: 07/01/2008-06/30/2013

No further information for this Contract

Information:**Total Amount:**

0.01

Currency: USD

4400002342
Long Term Disability



February 8, 2012

John Hafner, Account Executive
Prudential Insurance Company of America
2101 Welsh Road
Dresher, PA 19025

Dear Mr. Hafner:

The contract between the commonwealth and Prudential for optional long term disability insurance is scheduled to expire on June 30, 2012; however, pursuant to paragraph B1 of the agreement, the parties have the option to extend the term of the agreement by letter of notice. Please accept this letter as notice that we would like to extend the term of the agreement to June 30, 2013. If you agree, please sign and date this letter below and return to my attention.

As a reminder, under section 18 of attachment A of the contract, the commonwealth has the right to terminate the agreement without cause and without penalty by delivery of written notice of the intent to do so. As such, this extension is not a guarantee for the entire period. Should you have any questions, please contact Tim Pucino at 717.787.9872 or tpucino@pa.gov.

Sincerely,

A black rectangular redaction box covering the signature of James A. Honchar.

James A. Honchar, SPHK
Deputy Secretary for Human Resources Management

Acknowledged 

By:  2/14/2012
JOHN HAFNER VP & ACCOUNT EXEC PRUDENTIAL

cc: Secretary Kelly Powell Logan, Office of Administration
Maria Geelan, Prudential Insurance Company of America