

Contract Summary Form

OC Expediter Requisition #: 1815152

Kaiser Foundation Health Plan, Inc.

SUMMARY OF SIGNIFICANT CHANGES

1. Term: Extended for one (1) one-year term (to December 31, 2027). Page 4

SUBCONTRACTORS

This contract does not currently include subcontractors or pass through to other providers.

CONTRACT OPERATING EXPENSES

Financial/Payment Terms

1. Premium payment will be based upon the number of subscribers and associated rate as provided by the County to the Contractor on the monthly Premium Report. Payment for the month will be made on or before the 30th day of each month, representing payment for services provided in the current month, i.e. payment for the month of January will be paid by January 30th.
2. The effective date for mid-month enrollments due to a qualified life event for birth/adoption will be the date of birth/adoption. Premiums for mid-month enrollments before or on the 15th of the month will be charged the full month and enrollments after the 15th of the month will be charged first of the month following enrollment.
3. Quotes for annual rates will be net of commissions.
4. Contractor will allow for 45 days grace period for payment and premiums.
5. Contractor will allow for retroactive adjustments for eligibility changes.
6. Contractor agrees to not increase premium rates except on the policy anniversary. Contractor reserves the right to modify the rate and benefits if Contractor receives further clarification of Federal Health Care Reform requirements, or to incorporate other applicable Federal Health Care Reform requirements. In addition, Contractor reserves the right to make any changes in these rates and benefits due to changes in State or Federal legislation or regulatory action. Should this occur, Contractor will work with County of Orange to determine next steps.
7. Travel, travel time, and other related expenses will not to be charged to the County.

Credits/Reimbursements

Contractor will provide the following credits/reimbursements:

Wellness credits of \$15,000 for 2024 to be used with an approved Workforce Health vendor/program.

Payment (Electronic Funds Transfer (EFT):

Attachment F - Contract Summary Form - Kaiser

1. The County of Orange offers contractors the option of receiving payment directly to their bank account via an Electronic Fund Transfer (EFT) process in lieu of a check payment. Payment made via EFT will also receive an Electronic Remittance Advice with the payment details via email. An e-mail address will need to be provided to the County of Orange via an EFT Authorization Form.
2. The County of Orange, Auditor-Controller Agency will control and initiate payment. To request a form, please contact the agency/departments representative listed in the Contract.