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|  Form | **SHORT FORM**For Large Group Negotiated Filings | H:\Project -  Drafts\Desk Book Library\General Procedures and Info\OIC Logos\OIClogo_RGB_landscape.png |
| --- | --- | --- |

 |
| Contract Information |

|  |  |  |
| --- | --- | --- |
| 1 | Issuer name: | Click here to enter text. |
| 2 | Standard Master Contract Information |
| 2a | SERFF tracking number: | Click here to enter text. |
| 2b | Effective date of filing: | Click here to enter a date. |
| 3 | Group’s Negotiated Contract Information |
| 3a | Contract number: | Click here to enter text. |
| 3b | Effective date: | Click here to enter a date. |
| 3c | Date negotiations completed:[[1]](#footnote-1) | Click here to enter a date. |

 |
| Group Information |

|  |  |  |
| --- | --- | --- |
| 4 | Group name: | Click here to enter text. |
| 5 | Group number(s): | Click here to enter text. |
| 6 | Number of employees [RCW 48.43.005]: | Enter a number. |
| 7a | Number of enrolled employees: | Enter a number. |
| 7b | Total enrollees: | Enter a number. |
| 8 | If the number entered on line 6 is fewer than 51, explain how the group is eligible to purchase a large group policy. |
| Click here to enter text. |

 |
| Filing Information |

|  |  |  |
| --- | --- | --- |
| 9 | Filing submission date: | Click here to enter a date. |
| 10a | Number of working days since the date reported on line 3b: | Enter a number. |
| 10b | Number of working days since the date reported on line 3c: | Enter a number. |
| 10c | If the number on line 10a or 10b is more than 30, this filing is late per RCW 48-43-733(2). Provide an explanation for submitting this filing late. |
| Click here to enter text. |

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| Other Form Information |
| 11 | Does this group use the issuer’s standard application? |
| [ ]  | Yes. (The issuer will be using the application form filed with the Standard Master.) |
| [ ]  | No. (The custom application form must be submitted for review on the Form Schedule Tab.) |
| 12 | Does this group use the issuer’s standard enrollment form? |
| [ ]  | Yes. (The issuer will be using the enrollment form filed with the Standard Master.) |
| [ ]  | No. (The custom enrollment form must be submitted for review on the Form Schedule Tab.) |

# Form Deviations

|  |  |  |  |
| --- | --- | --- | --- |
| **Deviation Number** | **Form Number in which Deviations Occurs** | **Section Numbers/ References** | **Deviation Content[[2]](#footnote-2)** |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |
| 5 |  |  |  |
| 6 |  |  |  |
| 7 |  |  |  |
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| 9 |  |  |  |
| 10 |  |  |  |
| 11 |  |  |  |
| 12 |  |  |  |

1. If the date negotiations completed is unknown, use the effective date of the rates. [↑](#footnote-ref-1)
2. ”Form Deviations” – each deviation shall be set forth in clear language with appropriate information to determine how the form of coverage is being modified. Reference information, including section numbers, should be included as appropriate. [↑](#footnote-ref-2)