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Department Head Signature:	l. h.d.tu	Phone:	916-850-7300	
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CONTRACTING DEP	ARTMENT: Risk Manag	ement		
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	renewal date to December			
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CSACExcessInsuranceAuthority

Alliant

April 8, 2014

El Dorado County

RE: EIA Dental Program Renewal

Dear EIA Program Member:

We want to thank you for your continuing participation and support as a valued member and participant in the EIA Dental Program. The EIA Dental Program continues to successfully provide its members with cost stability and the most competitive fixed costs.

Your self funded dental administration is scheduled to renew July 1, 2014 for a period of six (6) months, continuing uninterrupted until December 31, 2014.

To finalize this renewal, please complete the EIA Dental Program Renewal Confirmation notice attached. Renewal confirmations are due by April 25, 2014. If we do not receive your renewal confirmation notice by April 25, 2014 we will assume that you agree with the renewal and we will continue your coverage with no plan changes.

If you would like to make any plan changes, let your Alliant Account Executive know by March 28, 2014. Thank you for the opportunity to meet your employee benefit needs.

Sincerely,

Michelle Kangiszer Program Account Executive Alliant Insurance Services, Inc

cc: Sidney DiDomenico, EIA Benefits Manager Alliant Service teams

CSAC	CExcessInsuranceAuthority	AA ERITAD
April 8, 20	014	
	EIA DENTAL RENEWAL CONFIRMATION El Dorado County	
	Effective Period: July 1, 2014 through December 31, 2014	
	Option A: Renew with no plan changes Option B: We would like to confirm our renewal with the following plan changes Image: Stress of the st	nges-
	Signature:	
	Printed Name:	
	Title:	
	Date:	

Please send your confirmation to Alliant Insurance Services by April 25, 2014.

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El Dorado County - Renewal Action

EIA Administration

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Group Number Current Administration Self Funded 353 7.20% of Claims + \$0.85 PEPM

Group Number Renewal Administration Effective: July 1, 2014 Self Funded 353 7.20% of Claims + \$0.85 PEPM