



Signature ___

For purposes of determining the number of employees in a group health benefit plan, Oregon law requires insurers and producers to follow specific guidance as outlined in Oregon Administrative Rule 836-053-0015. The number of employees reported on this form will help determine employer eligibility to purchase coverage in the small or large group market. Please complete this form and return it promptly to your producer or Kaiser Permanente sales executive.

and return it prompti	y to your producer or Kaiser reimanente	sales executive.	
SECTION 1 — G	ROUP INFORMATION		
Group name	Company address _		
Renewal date	Billing address if different from ab	ove	
Group contact name	9		
Title	Email	Phone	Fax
Producer name			
SECTION 2 — D	ETERMINING GROUP SIZE UNDER	OREGON LAW	
	ative Rule (OAR) 836-053-0015 establish ecific details about how to count employ		
full-time employee and full-time-equi	g, a small employer in Oregon is one thates, including full-time-equivalent employ valent employees. Companies with a cor Internal Revenue Code are generally co	rees. A prescribed calculation det mmon owner or that are otherwis	termines the number of full-time e related under certain rules of
• To be considered common law emp	a small employer under Oregon law (OA loyee <u>who is enrolled on the plan at the</u>	R 836-053-0015), the employer r beginning of the plan year.	nust employ at least one
For more informatidentify controlled	ion on how to count employees toward in groups, refer to any of these sources:	the 1–50 threshold, which employ	yees to count, and how to
o OAR 836-053 processLogin	3-0015 and Exhibit B to OAR 836-053-00 action.)	015. (Search for this OAR at https	://secure.sos.state.or.us/oard/
o IRS Publication <u>employers/de</u>	on, "Determining if an Employer is an Ap etermining-if-an-employer-is-an-applicak	plicable Large Employer," <u>www.i</u> <u>ble-large-employer</u> .	rs.gov/affordable-care-act/
	refer to healthcare.gov or your legal coent, and eligible employees.	ounsel for information on calculati	ng the number of full-time, full-
in which the s relationship k spouse. For r	e is considered a common law employee services are performed by the individual out they are not an owner, partner in the more information, see Exhibit B to OAR & ocessLogin.action.)	; they perform services for the fire firm, independent contractor, or	m under an employer-employee its sole proprietor or their
SECTION 3 — E	MPLOYER INFORMATION (Use refere	nces outlined in Section 2 to answer	these questions)
subsidiaries to th	a controlled group? Yes No (For c e controlled group.) ntrolled group, who is the employer for t	ontrolled groups, answers to que	estions 2 and 3 should include all
•	ime and full-time-equivalent employee		rior calendar vear?
3. Will there be at I "no" to this quest	least one common law employee enroll ion indicates the employer is not eligible	led on the plan at the beginning	of the plan year? (Answering
	tal number of employees on payroll that applicable state and federal law for the s		•
	owledge, I certify that all the information of		

_ Date _