

STATE HEALTH PLAN SPEAKER REQUEST FORM

Thank you for your interest in the State Health Plan! The Plan reviews each request carefully to make the best use of our limited resources. Please complete the form below to assist us with our review. The form must be completed in its entirety so we can determine how the Plan can best meet your needs.

Name: _____ **Title:** _____

Organization: _____ **Address:** _____

Contact Number: _____ **Contact Email:** _____

Type of Event: _____ **Date and Time:** _____

Specific Location: _____

Subject of Interest: _____

Estimated Attendance: _____

Please note:

- Because of limited resources the Plan, based in Raleigh, will be able to attend Triangle-area events with an estimated attendance of at least 50 members, and events in other parts of the state with an estimated attendance of at least 70 members.
- The Plan reserves the right to cancel an appearance, with advance notice, due to unexpected circumstances such as adverse weather, emergency state business or change in expected attendance.
- During and immediately before our annual Open Enrollment period in October, the Plan is extremely busy. For that reason, the best time to request speakers is from January through August. Requests outside that time frame will be determined based on available resources.
- Don't forget that the Plan has several informational resources on our website at www.shpnc.org, including medical and pharmacy benefit information, webinars, videos, and a wealth of information on protecting your health and saving on health care costs.
- Don't forget to sign up for our Member Focus monthly e-newsletter to stay up-to-date on benefits, changes and policies. Just go to www.shpnc.org to get started!