

# QUOTING PROCESS

Our quoting team at Network Health assists with the quoting process by retrieving the necessary information and walking it through the system engaging all parties from beginning to end. Please use the following process when requesting a quote. Contact any member of our sales team with questions. We appreciate the opportunity to work with you and look forward to a continued relationship.

## Mid-Large Groups

Please send all quotes for groups 51+ employees to [largegroupquotes@networkhealth.com](mailto:largegroupquotes@networkhealth.com).

Please include the following information.

### Agency Name

### Agent Name

Contact information such as name, email address and telephone number of the person you would like us to follow up with for additional information or questions.

## Below are the criteria for the different types of quotes.

### GROUP SIZE = 51-100 BASE QUOTE

- Census (DOB, gender, zip code, coverage type such as EE, ES, EC, F)
- Plans requested
- Current rates or most recent prior carrier bill

### GROUP SIZE = 51-100 FINAL QUOTE

*The final quote is contingent if any requirements are not submitted.*

- Three-page Network Health application for all full-time employees, including waivers (to include reason for waiving)
- Current wage and tax (Employment status needed to determine participation such as FT, PT, termed)
- Most recent prior carrier bill
- Plans requested
- Census

To issue the group, the below items are also needed.

- Employer group application
- Signed rate sheet
- Deposit check (ACH form)
- Miscellaneous forms if needed (Common Ownership, ECF – Employee Certification Form)
- If multiple plans selected, Employee Plan election

### GROUP SIZE = 101+

*If less than 101 enrolling, follow requirements for 5 1-100 Final Quote*

- Census (DOB, gender, zip code, coverage type such as EE, ES, EC, F)
- Plans requested
- Last two years of claims experience
- Last two years of contracts and members (premium vs. claims)
- High dollar claims information
- Current benefits
- Current rates and rate history (minimum two years); renewal information if available

## Small Groups

Small group ACA (2-50) quotes can be run in JET or emailed to [smallgroupquotes@networkhealth.com](mailto:smallgroupquotes@networkhealth.com).

- Include census (DOB, gender, zip code, coverage type such as EE, ES, EC, F)

