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HIGH DEDUCTIBLE HEALTH PLAN BENEFIT REQUEST FORM

Health Tradition Health Plan - 2 – 49 total employees

Producer : _____ Sales office: _____

Proposed Effective Date: _____ Date & Time needed: _____

Prospect Business Name: _____

Contact person: _____ Telephone #: _____

Address (Street, City, State, Zip): _____

Nature of Business: _____ Current Carrier: _____

Total Employees: _____ Total Eligible Employees: _____ Total Employees electing coverage: _____

Contribution Levels: Employer agrees to pay _____% of the employee's premium.

Requested waiting period for new employees (**standard minimum—30 days**) _____

Please attach: 1) Uniform applications & 2) Census & 3) Disclosure of Rating Factors form

Premier - HMO

FSH Only	Community Option	
[]	[]	HH15 -- \$1,500/\$3,000 Ded; 80%; OV, ER and Rx subject to ded/coins; OOP \$3,000/\$6,000
[]	[]	HH20 -- \$2,000/\$4,000 Ded; 90%; OV, ER and Rx subject to ded/coins; OOP \$3,000/\$6,000
[]	[]	HH21 -- \$2,000/\$4,000 Ded; 80%; OV, ER and Rx subject to ded/coins; OOP \$4,000/\$8,000
[]	[]	HH25 -- \$2,500/\$5,000 Ded; 80%; OV, ER and Rx subject to ded/coins; OOP \$5,000/\$10,000
[]	[]	HH26 -- \$2,500/\$5,000 Ded; 90% OV, ER and Rx subject to ded/coins; OOP \$4,000/\$8,000
[]	[]	HH30 -- \$3,000/\$6,000 Ded; 90%; OV, ER and Rx subject to ded/coins; OOP \$5,000/\$10,000
[]	[]	HH31 -- \$3,000/\$6,000 Ded; 100%; OV, ER and Rx subject to ded/coins; OOP \$3,000/\$6,000
[]	[]	HH50 -- \$5,000/\$10,000 Ded; 100%; OV, ER and Rx subject to ded/coins; OOP \$5,000/\$10,000

Premier Plus – POS

FSH Only	Community Option	
[]	[]	PH15 – IN--\$1,500/\$3,000 Ded;90%; OV, ER and Rx subject to ded/coins; OOP \$2,500/\$5,000 OUT--\$2,500/\$5,000 Ded; 70%; OV, ER and Rx subject to ded/coins; OOP \$4,000/\$8,000
[]	[]	PH20 – IN--\$2,000/\$4,000 Ded; 90%; OV, ER and Rx subject to ded/coins; OOP \$3,000/\$6,000 OUT--\$4,000/\$8,000 Ded; 70%; OV, ER and Rx subject to ded/coins; OOP \$5,000/\$10,000
[]	[]	PH30 – IN--\$3,000/\$6,000 Ded; 90%; OV, ER and Rx subject to ded/coins; OOP \$4,000/\$8,000 OUT--\$4,000/\$8,000 Ded; 70%; OV, ER and Rx subject to ded/coins; OOP \$5,000/\$10,000

COMMENTS: _____

Notes and conditions:

- Preventive Benefits will continue to be 100% paid by the Health Plan –In-Network only
- Employer MUST offer an HSA account alongside these plans
- These plans are not eligible for employers who simply “self-insure” the deductible difference