**51-99 RFP details**

**When sending the 51-99 RFP packet to brokers, feel free to utilize the below wording template in your email and adjust as needed:**

We’d be happy to help you shop other carriers! Since this is a Large Group, we will need the following to complete our 51+ RFP to the carriers:

* Aetna, CareFirst, Cigna and United HealthCare 51+ Risk Screeners (attached)
* Census (template is attached).
  + Aetna requires Employee Work Zip Codes
  + Waivers should also be listed, including reason for waiving
* Renewal document with rates
* Benefit Summaries
* Claims data (Large Claim Report) if available
* FTE (Full Time Equivalent) calculation forms– utilizing prior year’s employment data (attached) Cigna does not require this.
* Affiliated Companies Form (attached) –For CareFirst and/or UHC if they have multiple locations and/or companies with common ownership
* Last Month’s invoice (required by Aetna only)

Please feel free to give us a call directly if you have any questions.

\*\* If this is a current GBS group, we would be happy to generate a member-level census and premium invoice from our systems.

**Carrier Details:**

**Aetna**

**Broker must be located in MD, DC or VA only – group can be located anywhere.**

**Member-Level Census must contain work zip codes.**

**Risk Screener:** for groups located in MD, DC, VA and PA

**Virgin Groups:** Individual health screeners are required for Aetna to generate a firm/underwritten rate quote – they will accept another carrier’s EE health screener (1/16/2018 Per John Brennan they will accept UHC’s IMQ).

**Participation issues:**

* If there are less than 20 employees currently enrolled on the census, Aetna will require that those currently enrolled complete individual health questionnaires.
* Aetna can no longer decline to quote for participation, but they can load the rates for low participation.  When participation falls under 50% on a 51-99 group they will begin to load the rates.  The lower the participation is the higher the rate load will be (per Dan Fitzgerald @Aetna).

**CareFirst**

**Broker can be located anywhere – group must be located in the CareFirst network region**

**Member level census required as they are using GRx Intelliscript through Milliman.**

**Risk Screener:**

* Prince Georges and Montgomery County group locations require a different Risk Screener specifically for those locations.
* Section B, if the medical condition does not apply to the group, a “0” should be placed on the line in front of the medical condition.
* CareFirst will accept another carrier’s Group Risk Screener to quote, but would need their Screener completed if the group moves past a quote.

**Virgin Groups:** CareFirst does not have a participation rule and will quote underwritten rates without individual medical questionnaires.

**Participation issues:** CareFirst does not have a participation requirement.

**Cigna**

**Broker must be located in MD, DC or VA only – group can be located anywhere.**

**Member level census required.**

**Risk Screener:** for groups located in MD, DC, VA and PA

**Virgin Groups:** Cigna will only quote Level Funded for virgin groups. They will NOT quote FULLY-INSURED for Virgin groups (even if the employees complete individual risk screeners, so no need to obtain those.

**Participation issues:**

* Cigna will only quote on groups that currently have at least 20 enrolled.
* Cigna will automatically quote Level-Funded plan if the group has less than 50 eligible (under 50 is too small for Fully-Insured at Cigna). Rates will be firm and no individual underwriting is necessary for LF under 50.

**United HealthCare**

**Brokers must be located in MD, DC or VA.**

**Member level census required.**

**Risk Screener:** We use the Employer Group Application as the risk screener for UHC.

**Virgin Groups:** UHC will release preliminary rates, but will need individual medical questionnaires to provide firm/underwritten rates. UHC will accept another carrier’s screener if the group completes the UHC HIPAA Disclosure Authorization Form. FTE must also be supplied.

**Participation issues:** If there are less than 20 employees currently enrolled on the census, UHC will require that those currently enrolled complete individual health questionnaires. They will provide illustrative/preliminary rates without IHQs. With IHQ’s final underwritten rates will be released.

**Note: UHC AllSavers can only be quoted on 2-99 ELIGIBLE life groups. However, GBS is NOT able to administer the AllSavers plan.**

It generally takes between 7-10 business days for carriers to provide proposals.