

# Tall Tree Administrators | Proposal Submission Worksheet

Basic Information	
<b>Basic Information</b>	Name of Company: _____  Address: _____ _____  Nature of business: _____  No. of employees: _____  No. of plan participants: _____  Proposed effective date: _____
Please include the following attachments:	
<b>Current Census</b>	<input type="radio"/> Current Census: Age, Sex, Dependent status, current coverage level
<b>Claims Experience</b>	<input type="radio"/> Claims experience by month including census by month <input type="radio"/> Most recent 12 months <input type="radio"/> Previous 12 months <input type="radio"/> Claims over \$10,000 information including total claims, dx, prognosis
<b>Current Coverage Information</b>	<input type="radio"/> Current coverage information: Identify Carriers, TPA, Networks, Benefit information & copy of SPDs, specific deductible, aggregate factors, policy pages from excess loss policy.
<b>Current Employee Contribution</b>	<input type="radio"/> Current employee contribution by tier
<b>COBRA information</b>	<input type="radio"/> COBRA Info: List of all COBRA participants including start and end dates, rate tiers
<b>Desired Plan Designs</b>	<input type="radio"/> Desired Plan Designs, i.e., dual option, match current, etc.