

Agent Licensing

Before you sell your first case, you must have a current license. Evergreen requires you be contracted and appointed by the state before you can sell your first case. (Note: No producer contract will be authorized unless proof of Errors and Omissions coverage is provided.)

Commission Information

Agents will receive monthly commissions, as earned, subject to the terms and conditions of the Producers Agreement. Commission checks are mailed on the 15th of the month provided the particular case stays effective and pays their premiums on time and you continue to actively service the group.

Employer Contributions

It is required that a participating employer contribute a portion of the premium under the plan. The minimum contribution is 50% of the employee cost.

Participation Requirements

In the large group environment (any group over 50 employees) Evergreen may be one of several options available to the employees. If we are an alternate option for the Benefit plans, then our participation goes down to 25% of net eligible. If we are the only option, a minimum 50% of the net eligible is required.

Small group minimum requirements. Evergreen requires 100% participation for groups of 1 to 5 net eligible employees, 75% of groups 15 to 50 net eligible employees.

<u>Net Eligible</u>	<u>Minimum Requirements</u>
5	All
6	5
7	6
8	6
9	7
10-50	75%

Net Eligible – Employees passing the eligibility requirements less those eligible employees covered by a spouse or parent (we require evidence of other coverage).

How to Apply

Applications must be completed and signed prior to the requested effective date.

Evergreen Health Plan, Inc. must have all information necessary to process the case by the fifth working day of the month to be considered for a first-of-the month effective date. Any case arriving after these dates will be considered for an effective date of the 1st of the following month.

For employer groups with 2-50 employees, each employee must complete the entire application, sign and date the form. For employer groups with 50 or more employees, the medical history section of the application is not required, except for late applicants.

The employer must complete the entire employer's application, sign and date it. Include the employer's check for the first month's premium. (The agent information section is to be completed, signed and dated by the writing agent).

A copy of the employer's most recent state quarterly unemployment tax report including employee names, social security numbers, and earnings must be submitted with all cases.

Premium Calculations

Rates are determined by the employee's attained age. When both employee and spouse are full-time employees of the same employer and are each eligible for coverage under the group plan, both must be insured as employees. Their children, if any, may be insured as dependents of either employee.

Grace Period-Premium Payments

A grace period of 31 days is allowed for any premium after the 1st premium. If any participating employer fails to pay the premium before the expiration of the 31-day grace period, coverage shall automatically terminate (lapse) as of the due date.

Premiums are due on the 1st day of the month. Payments should be received in Evergreen's offices no later than the 10th of the month for which the premium is due.

If not paid on or before the expiration of the 31-day grace period, coverage will cease (lapse) automatically as of the due date. Lapsed coverage cannot be reinstated. A

lapsed case would have to be re-written as a new case, subject to underwriting. Additionally, all past due premiums, current month's premium, and a one time non-refundable reinstatement fee of \$500.00.

Underwriting

Certain types of business groups are considered as "non-standard," however HIPAA prohibits a PSHCC from denying coverage to a small group based on Industry. There are no such limitations on groups with over 50 employees. The following list contains industries that are not eligible (this list may not be all inclusive):

Bars/Nightclubs and Taverns
Taxi Companies and Bus Lines
Mining/Logging/Hunting/Trapping/Fishing Operations
Junk and Scrap Dealers
Athletic Teams
Car Washes
Oil/Gas Drilling or Exploration
Entertainers
Beauty Salons/Barber Shops
Motorcycle Dealers
Liquor Stores
Adult Only Businesses

The following may be declined as ineligible, on a group by group basis:

Metal Manufacturing
Restaurants/Diners
Hotels and other Lodging Places
Laundries and Garment Cleaners
Amusement and Recreation Services
Temporary Aid Supply Services
Legal Services

Evergreen may not write a group that has been in business less than a year. Groups that have been in business longer than one year, but have never been insured will also require additional underwriting. Underwriting may require medical applications, regardless of group size.

Evergreen will require that large groups provide evidence that they have workers' compensation insurance, and will not write groups that do not have workers' compensation insurance.

It may be difficult to require minimum participation in a large group where

Evergreen is an alternate plan. However, Evergreen will require that employers do not tilt premiums to steer eligible employees away from our plan.

Sold Case Submission

The following items need to be submitted on a sold case. Incomplete submissions will only delay the underwriting/issue process:

- Completed application for group insurance.
- Completed application/enrollment forms from each employee including a signed waiver from employees who choose not to participate in any aspect of coverage.
- First month's premium on employer's business check (no personal checks accepted.)
- Copy of prior carrier's last billing and a copy of the current plan giving employee's effective date with prior carrier.
- Copy of company's most recent state quarterly compensation (wage & tax) report containing employee names, social security numbers and earnings.
- Copy of proposal submitted to the client with verification of actual sold rates.
- If broker does not have a current broker contract, then we need a completed agent/broker agreement.
- HIPAA – Certification list for employees that were covered by the prior carrier, and the length of time covered by that carrier or any other prior carriers if you had more than one in the last 12 months.