



## **Managing Your Guardian Benefits Offering:** **A guide for self-administered plans**

Guardian Group products are underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage.

#2014-12892 Exp. 10/2016.



## Table of Contents

- I. Introduction & Overview of Employers' Responsibilities.....pg 3
  - Eligibility Submissions.....pg 4
  - Billing & Payments.....pg 5-7
  - Quarterly/Annual Reconciliation.....pg 8
- II. Appendix 1: Electronic benefits administration from Guardian.....pg 9-13
- III. Appendix 2: How to calculate volumes & premium.....pg 14-16
- IV. Appendix 3: Sample census.....pg 17



## Introduction

When it comes to your self-administered plans, employers have three key responsibilities to ensure your plans run smoothly. Below is a quick overview of what to expect.

Further details about how to get each of them done quickly and easily are within this guide.

	1. Eligibility Submissions	2. Billing & Payments	3. Eligibility Validation/Reconciliation
Definitions	Eligibility information includes your employees' and their dependents' enrollments and ongoing changes to their benefit elections.	Billing is summary of covered lives, volumes, rates and amount of premium due for a certain period of time	Guardian reviews your group's eligibility information and finalized billing statements to determine if any adjustments to your account are needed.
Employer's Responsibility	<p><b>Maintain &amp; submit eligibility information</b></p> <p>You are responsible for managing eligibility information and submitting this information to Guardian to help ensure accurate claims processing and billing of your plan(s)</p>	<p><b>Finalize &amp; pay bill online via Guardian Anytime</b></p> <p>Upon notification that your Guardian billing statement is available online, you must finalize your bill by inputting certain plan information. Payment may also be submitted at this time online.</p> <p><b>OR</b></p> <p><b>Mail a Guardian approved statement and payment</b></p>	<p><b>Submit employee census (if applicable)</b></p> <p>A census is required each year only if you do not submit eligibility information weekly or as changes occur for a plan. Census may also be requested on any occasion where Guardian's review identifies a significant variance in Dental covered lives. Otherwise, no action is needed and Guardian uses eligibility on file.</p>
Timing	Varies based on plans	Varies (monthly, quarterly, semi-annually or annually)	Annually or As needed based on quarterly reviews. (6 months before plan's renewal date)
Guardian's Responsibility	Update all eligibility received into our systems.	Once payments are received compare month to month for lives, volume or premium variance.	Complete annual reconciliation and send variance findings to Planholder

**[www.GuardianAnytime.com](http://www.GuardianAnytime.com): Pay your bill faster and more...**

- Receive e-mail notifications when billing statements are available
- View, finalize and pay current bill
- Check status of billing statements you are finalizing
- Review past billing statements and payment history
- View eligibility, claims history and more!\*

\*Available if eligibility is submitted weekly or as changes occur.



## Eligibility Submissions

Submissions of your employees’ and their dependents’ eligibility information – enrollments, updates to benefits or terminations from your plan -- help ensure accurate claims processing and billing of your self-administered plans. Requirements for submitting this information depends on what Guardian benefits plans you offer.

Does your benefits offering include...	SUBMISSION REQUIREMENT
<input type="checkbox"/> <b>only Dental and/or Vision benefits?</b>	<ul style="list-style-type: none"> <li>• Must be submitted to Guardian weekly or as changes occur</li> </ul>
<input type="checkbox"/> <b>only these types of benefits?</b> <ul style="list-style-type: none"> <li>-- Accidental Death &amp; Dismemberment</li> <li>-- Accident</li> <li>-- Cancer</li> <li>-- Critical Illness</li> <li>-- Life</li> <li>-- Long-term and Short-term Disability</li> <li>-- Stop Loss</li> </ul>	Either: <ul style="list-style-type: none"> <li>• Submit to Guardian as changes occur <u>OR</u></li> <li>• Provide employee census annually</li> </ul>
<input type="checkbox"/> <b>both a Dental and/or Vision benefit and other type of benefit(s)?</b>	<ul style="list-style-type: none"> <li>• Must be submitted to Guardian weekly or as changes occur</li> </ul> <p><i>Note: If you are unable to submit eligibility information weekly or as changes occur for <u>all</u> benefits:</i></p> <ul style="list-style-type: none"> <li>○ Two group IDs will be set up for your benefits offering (one for Dental and/or Vision and another for your other benefits). You will receive two billing statements requiring finalization.</li> <li>○ An employee census must be provided annually for your non-Dental/Vision benefits.</li> <li>○ You will only be able to access information online for your Dental and/or Vision benefits.</li> </ul>

No matter what your situation, Guardian has easy solutions to help you get eligibility information to us: web, electronic eligibility feed or excel file/census via secure e-mail. To determine which option is a good fit for you, refer to “Appendix I: Electronic benefits administration from Guardian”.

### Benefits of Regular Submissions

Our benefits website is updated with information you provide – giving you a one-stop source to view current benefits information, billing statements and premium history for all your Guardian plans.

Plus, when it comes time to do an annual reconciliation on your account, you won’t need to provide an employee census.



# GUARDIAN®

## Billing & Payments

Payments and statements can be made using either of the below methods:

Online through Guardian Anytime

Mail to Guardian at PO Box 677458, Dallas, TX 75267-7458

### Submitting online through Guardian Anytime

Approximately ten days prior to your payment due date, all individuals who are registered on our website to administer your benefits offering will receive an e-mail titled “Guardian Statement Summary Notification”.

*\*Please note that Stop Loss is not available for submission through Guardian Anytime at this time.*

You'll need to finalize your billing statement online in 3 easy steps:

#### Step 1: Log on to [www.GuardianAnytime.com](http://www.GuardianAnytime.com)

Under the Billing Tab, click on “View Billing Statements”. Clicking a due date listed allows you to enter necessary information to finalize your billing statement (or review information already submitted via the web for that bill).

The screenshot shows the Guardian Anytime website interface. At the top, there is a navigation menu with tabs: Home, Member Self Enroll, Home2, Eligibility, **Billing**, Forms & Materials, Reports, Disability Claim Status, and Discounts & Savings. Below this is a sub-menu with: Current Bill, View Estimated Bill, **View Billing Statements**, View Payment History, Change Billing Option, and Make a Payment. The main content area is titled 'View Billing Statements' and includes a user profile picture. Below the title are dropdown menus for 'Group ID: 00123456' and 'Division ID: 0000'. A message states: 'Your current billing statements are listed below. Please select the due date you wish to view. You may also sort by Due Date and Division.' Below this is a table with columns: Due Date, Division ID, Division Name, and Totals.

Due Date	Division ID	Division Name	Totals
03/01/2012	0000	NB SELF ADMIN TEST SEMI ANNUAL 1	
02/01/2012	0000	NB SELF ADMIN TEST SEMI ANNUAL 1	Submitted
01/01/2012	0000	NB SELF ADMIN TEST SEMI ANNUAL 1	\$ 907.77
12/01/2011	0000	NB SELF ADMIN TEST SEMI ANNUAL 1	\$ 636.66
11/01/2011	0000	NB SELF ADMIN TEST SEMI ANNUAL 1	\$ 424.44
10/01/2011	0000	NB SELF ADMIN TEST SEMI ANNUAL 1	\$ 212.22

Below the table, there is a legend for the status of the statements:

- Total Amount Displayed (\$ xx,xxx.xx):** Amount paid.
- Submitted:** Statement was submitted to Guardian but has not yet been processed.
- Pended:** Statement information was entered but not submitted.
- Blank:** Statement is open for submission.
- Due Date:** This is the date your billing statement is due. Clicking on the date will show details. If the statement details were not submitted via Guardian Anytime additional details will not be available.



# GUARDIAN®

### Step 2: Enter basic information to calculate and finalize total premium due.

**Premium Summary** CANCEL RESET THIS PAGE SAVE CONTINUE

Group ID: 00474359 Division ID: 0000  
 Division Name: NB SELF ADMIN TEST SEMI ANNUAL 1  
 Due Date: 02/01/2012  
 Statement Period: 02/01/2012 - 02/29/2012

Benefit	Lives	Volume	Rate	Premium
<b>Dental - DentalGuard Pref - Philadelphia, PA - Rate A</b>				
Member	3		\$7.770	\$23.31
Member/Spouse	1		\$9.870	\$9.87
Member/Child(ren)	1		\$11.010	\$11.01
Full Family	1		\$13.550	\$13.55
<b>Dental - DentalGuard Pref - Philadelphia, PA - Rate B</b>				
Member	0		\$12.120	\$0.00
Member/Spouse	1		\$14.960	\$14.96
Member/Child(ren)	0		\$15.880	\$0.00
Full Family	0		\$17.010	\$0.00
Member Basic Life	5	123000	\$0.050	\$6.25
AD&D	5	125000	\$0.020	\$2.50
Short Term Disability	5	10000	\$3.100	\$3100.00
Long Term Disability	5	10900	\$1.120	\$122.08
<b>Total</b>				\$ 3,303.53

CALCULATE

**Retro Adjustments**

Retro Adjustments include information not captured in the data fields above and that is necessary to process this statement. Adjustments may be entered for lives, volume, and/or premium and will adjust your total amount due for the current statement. To reduce the number of lives, volumes, or premium enter the amount including the minus (-) sign (ex. to indicate a reduction of lives enter -5).

If you do not see the benefit you need to adjust, after submitting your current statement information, please send an email to [appletonbilling@glc.com](mailto:appletonbilling@glc.com) with the additional information to be updated.

Benefit	Lives	Volume	Premium
Dental - DentalGuard Pref - Philadelphia, PA - Rate A			\$
Dental - DentalGuard Pref - Philadelphia, PA - Rate B			\$
Member Basic Life			\$
AD&D			\$
Short Term Disability			\$
Long Term Disability			\$
<b>Retro Adjustments Total</b>			\$ 0.00

**Grand Total** \$ 3,303.53

CANCEL RESET THIS PAGE SAVE CONTINUE

Enter # of lives and volumes (if applicable) for each plan.

Once entered, premium is automatically calculated when you tab out of this field except if you offer a plan with any of following rate types:

- Age banded
- Gender based
- Preferred/Non-preferred

If a rate type above applies, you must manually enter premium for that plan.

See Appendix 2: "How to calculate volumes & premium".

**Helpful Tip:** If you offer a benefit (i.e., Dental) with different options or that is available to different classes at the same rate, you'll only see the benefit displayed once.

If you have retroactive adjustments enter them here.

### Step 3: Once your information has been processed, you'll be prompted to make a payment.

### Submitting by mail.

Each month (or billing period), a self administered statement and payment will need to be mailed\* to Guardian at PO Box 677458, Dallas, TX, 75267-7458. A template in Excel format (see example below), specific to your group, will be provided upon request. To request the template, contact our Customer Response Unit at 1-800-627-4200 or via email to [GuardianMaintenance\\_billing@glic.com](mailto:GuardianMaintenance_billing@glic.com). If the Guardian template is not utilized, the statement being sent in will need to be approved by Guardian.

\*The statement may also be emailed to the above email address.

 <b>GUARDIAN</b> The Guardian Life Insurance Company of America, New York, NY 10004		<b>00999999 - GROUP NAME</b>					
					Current Premium Due Date:		
Current Premium Due Date:					Retro	Totals	
BENEFIT	LIVES	VOLUME	RATE	PREMIUM	ADDITIONS/CREDITS (use "-" for credits)		
Dental - Employee				\$0.00		\$0.00	
Dental - Employee+Spouse				\$0.00		\$0.00	
Dental - Employee+Child(ren)				\$0.00		\$0.00	
Dental - Full Family				\$0.00		\$0.00	
Vision - Employee				\$0.00		\$0.00	
Vision - Employee+Spouse				\$0.00		\$0.00	
Vision - Employee+Child(ren)				\$0.00		\$0.00	
Vision - Full Family				\$0.00		\$0.00	
Member Basic Life				\$0.00		\$0.00	
Dependent Basic Life (per employee)				\$0.00		\$0.00	
Dependent Basic Life (per volume)				\$0.00		\$0.00	
Member Voluntary Life			(Age Banded)	\$0.00		\$0.00	
Spouse Voluntary Life			(Age Banded)	\$0.00		\$0.00	
Child Voluntary Life				\$0.00		\$0.00	
Member Basic AD&D				\$0.00		\$0.00	
Member Voluntary AD&D				\$0.00		\$0.00	
Spouse Voluntary AD&D				\$0.00		\$0.00	
Child Voluntary AD&D				\$0.00		\$0.00	
Short Term Disability				\$0.00		\$0.00	
Short Term Disability, Administrative Services				\$0.00		\$0.00	
Long Term Disability				\$0.00		\$0.00	
Voluntary Long Term Disability				\$0.00		\$0.00	
Voluntary Long Term Disability			(Age Banded)	\$0.00		\$0.00	
Member Critical Illness			(Age Banded)	\$0.00		\$0.00	
Member Critical Illness Rider			(Age Banded)	\$0.00		\$0.00	
Spouse Critical Illness			(Age Banded)	\$0.00		\$0.00	
Spouse Critical Illness Rider			(Age Banded)	\$0.00		\$0.00	
Member Critical Illness				\$0.00		\$0.00	
Member Critical Illness Rider				\$0.00		\$0.00	
Spouse Critical Illness				\$0.00		\$0.00	
Spouse Critical Illness Rider				\$0.00		\$0.00	
Child Critical Illness				\$0.00		\$0.00	
Child Critical Illness Rider				\$0.00		\$0.00	
Member Accident Coverage				\$0.00		\$0.00	
Spouse Accident Coverage				\$0.00		\$0.00	
Child Accident Coverage				\$0.00		\$0.00	
Member Cancer Coverage				\$0.00		\$0.00	
Spouse Cancer Coverage				\$0.00		\$0.00	
Child Cancer Coverage				\$0.00		\$0.00	
Individual Stop Loss Employee				\$0.00		\$0.00	
Individual Stop Loss Employee+Spouse				\$0.00		\$0.00	
Individual Stop Loss Employee+Child(ren)				\$0.00		\$0.00	
Individual Stop Loss Full Family				\$0.00		\$0.00	
Aggregate Stop Loss Employee				\$0.00		\$0.00	
Aggregate Stop Loss Employee+Spouse				\$0.00		\$0.00	
Aggregate Stop Loss Employee+Child(ren)				\$0.00		\$0.00	
Aggregate Stop Loss Full Family				\$0.00		\$0.00	
					TOTAL PREMIUM DUE:	\$0.00	
<p>Premiums are due prior to the end of the contractual "Grace Period". If not paid your plan will cancel and Guardian will not be liable for claims incurred after the end of the grace period. Claims incurred during the grace period will remain our obligation and payment of the premiums for the grace period is your responsibility.</p>							



GUARDIAN®

Eligibility  
Validation/Reconciliation

## Quarterly / Annual Reconciliation

**For plans where eligibility information is submitted weekly or as changes occur**, the reconciliation is based on the eligibility received to date. Unless we have questions, no further action is needed on your part.

**For plans where eligibility is not submitted weekly or as changes occur**, a detailed census\* for all employees and their dependents covered under the plan is required to conduct the annual reconciliation. We will contact you by e-mail with details for how to submit this census.

### Quarterly Reconciliations:

Every three months Guardian reviews your group's Dental covered lives. A review of eligibility information and finalized billing statements are compared, if there is a discrepancy, we will reach out for a census\*. If no discrepancy is found, a census will not be requested.

### Annual Reconciliation:

Six months prior to your plan's renewal date, Guardian reviews your group's complete eligibility information and finalized billing statements to determine if any adjustments to your account are needed.

## Employee census information

A census (in Excel) is required annually if you do not submit eligibility information weekly or as changes occur for a benefits plan. The following are the information fields that must be included in your census.

- Employee name
- Employee Social Security Number
- Gender
- Date of Birth
- Salary (for Disability and/or salary based benefits)
- Class (if more than one class)
- Employee benefits elections
- Dependent benefits elections
- Benefit volume amounts (Life and Disability benefits)
- Total number of employees eligible for coverage

\*Refer to Appendix 3 for an example of a census.



## Appendix I

### Electronic benefits administration from Guardian

Guardian offers companies easy ways to manage enrollment and eligibility information.

No matter what size your business, enrolling employees, updating their benefits information or terminating them from a plan should never be complicated or time-consuming. Guardian has an easy solution for managing enrollments and ongoing employee changes.

Through a variety of options – web, electronic feeds or e-mail – Guardian makes managing your benefits easier, faster, safer and cheaper. You are assured of finding an option that fits your business demands.

All of our options are complimentary and available to employers of all sizes. Learn more and get started today.

#### The advantages of electronic options

- Secure, faster processing of information
- No postage and less paper hassles
- Reduced errors and redundancy
- Easier tracking of activity

#### A guide to employers' options

**Option 1: Website**

**Option 2: Electronic Eligibility Feed**

**Option 3: Excel File/Census Via Secure E-mail**



## Option I: Website

Through our simple group benefits website, [www.GuardianAnytime.com](http://www.GuardianAnytime.com):

- Employers can enroll, terminate and update benefits information for an employee or submit an Excel file of multiple updates.
- Employees can update their own personal information and benefits elections.

### Key highlights

- 100% of updates are fully processed and ready to view online within 1 – 2 business days.
- Employers can assign access to appropriate staff to manage eligibility updates online or allow employees to make their own updates.
- Easy access to view history of employer's and employees' online activity.
- Convenient feature to e-mail Guardian with questions as you work.
- Easy to use – no manuals!

### It's a great fit for employers who...

- Have low- to high-volume enrollment and eligibility changes
- Like the ability to submit information when it's convenient for them or allow employees to submit the changes themselves
- Do not work with a third party or aggregator to submit changes

### Get started. It's easy:

Employers can register in two minutes at [www.GuardianAnytime.com](http://www.GuardianAnytime.com) and start managing their enrollment and eligibility information right away.

To give employees the option to enroll or update their benefits elections, employers must activate Guardian's Employee Online Enrollment service.\*

**Take a tour!** [www.guardianenrollmentdemo.com/employer/](http://www.guardianenrollmentdemo.com/employer/)



## Option 2: Electronic Eligibility Feeds (also known as Electronic Data Interchange or EDI)

Enrollment and eligibility information can be automatically submitted from an employer's or aggregator's data systems to Guardian on a scheduled basis. A designated communication protocol is established through which information, in a specific file format, is easily transferred (preference is full file vs change file).

### Key highlights

- High volumes of changes are sent quickly at one time.
- 100% of updates are fully processed and ready to view within 1 – 2 business days online ([www.GuardianAnytime.com](http://www.GuardianAnytime.com)).
- Supports a range of file formats, from the HIPAA 834 format to a proprietary Guardian format to one-off custom formats.
- Connections directly with employers, aggregators or third parties can be accommodated. Guardian works with over 90 different third parties for eligibility exchanges!

### It's a great fit for employers who...

- Have high-volume enrollment and eligibility changes
- Like the hassle-free convenience of automatic, scheduled submissions
- Have an Information Systems (IS) department or work with a third party/aggregator

### Get started. It's easy:

Refer to the checklist on the next page to get started.



## An easy checklist for setting up and using Electronic Eligibility Feeds (EDI)

Steps	Timeframe
<p><b>Employer or aggregator/third party completes online set-up request.</b> From GuardianLife.com, click on “Employers” to access the “Electronic Enrollment” link (in the bottom right corner) to complete our online Statement of Interest Form.</p>	N/A
<p><b>Guardian sends the requestor an e-mail which outlines the following:</b></p> <ul style="list-style-type: none"> <li>• Requirements specific to their plan offering</li> <li>• How to submit a test file to Guardian</li> </ul>	Within 2 business days (from date of request)
<p><b>Employer works with aggregator/third party to:</b></p> <ul style="list-style-type: none"> <li>• Load eligibility information into aggregator’s system</li> <li>• Submit a test file to Guardian</li> </ul>	1 – 3 weeks
<p><b>Guardian tests the Electronic Eligibility Feed connection.*</b> Please note: if a test file is not error-free, additional files may need to be submitted to Guardian.</p>	Within 2 business days*
<p><b>Employer or aggregator/third party confirms go live for first official file submission.</b> When the requestor is notified his/her Electronic Eligibility Feed connection is implemented, the employer or aggregator will need to respond to the e-mail they receive to confirm the first file production date and ongoing file frequency.</p>	Varies by requestor

### It’s automatic from here!

Scheduled Electronic Eligibility Feeds are automatically sent to Guardian. Changes are processed within 1 – 2 business days from the time Guardian receives each file.

\*Custom formats that do not use HIPAA 834 or Guardian’s proprietary format require additional time to test and set up..



## Option 3: Excel file/census via secure e-mail

Employers also have the option to submit a spreadsheet or census (in Excel file format) of enrollment and eligibility information to Guardian via secure e-mail.

### Key highlights

- 100% of updates are fully processed and available to view online within 2 – 3 business days.\*
- Excel template is provided for easy submissions.

### It's a great fit for employers who...

- Prefer the convenience of an electronic option, but have limited Internet access or cannot support Electronic Eligibility Feeds

### Get started. It's easy:

Ask your local Guardian sales representative for a template specific to your plan offering.



## Appendix 2

### How to calculate volumes & premium

Step 1: In the “Benefit” column, identify the benefit you offer

Step 2: Moving to your right, select the plan type.

Step 3: Continue moving to your right, to identify the corresponding volume and/or monthly premium formula.

**Reminder** – please check your benefits relating to age cutbacks and benefit maximums

Benefit	Type	Volume	Monthly Premium
Basic Life and AD&D	Flat Volume	Volume x # of employees	Volume / 1000 x rate
	Salary Based	Annual Earning x % of benefit	
Basic Dependent Life	Flat Volume	Volume if calculated or zero	Total # of employees electing coverage x rate
Basic & Voluntary Short Term Disability	Flat Volume	Volume x # of employees	Volume / 10 x * rate
	Weekly Benefit	Annual Earnings / 52 x %	*rate may need to be determined by age of employee
	Monthly Benefit	Annual Earnings / 52	
	Covered Payroll	Based on type of coverage	Total # of employees electing coverage x rate
Basic & Voluntary Long Term Disability	Flat Volume	Volume x # of employees	Volume / 100 x * rate
	Monthly Benefit	Annual Earning / 12 x %	*rate may need to be determined by age of employee
	Covered Payroll	Annual Earnings / 12	
	Charge per insured	Based on type of coverage	Total # of employees electing coverage x rate
Voluntary Member Life and AD&D	Flat Volume	Volume x # of employees	Volume / 1000 x * rate
	Salary Based	Annual Earning x % of benefit	*rate may need to be determined by age of employee
Voluntary Spouse Life and AD&D	Flat Volume	Volume x # of spouses	Volume / 1000 x * rate
	Salary Based	Employee Annual Earning x % of benefit	*rate may need to be determined by age of employee or spouse

<b>Benefit</b>	<b>Type</b>	<b>Volume</b>	<b>Monthly Premium</b>
<b>Voluntary Child Life and AD&amp;D</b>	Flat Volume	Volume x # of employees insuring children	Volume / 1000 x rate
<b>Voluntary Family AD&amp;D</b>	Flat Volume	Volume x # of employees insuring spouse and/or children	Volume / 1000 x rate
<b>Basic &amp; Voluntary Member Critical Illness</b>	Flat Volume	Volume x # of employees	Volume / 1000 x rate *rate may need to be determined by age of employee
<b>Member Critical Illness Rider</b>	Charge per insured.	Not applicable	Total # of employees electing coverage x rate *rate may need to be determined by age of employee
<b>Basic &amp; Voluntary Spouse Critical Illness</b>	Flat Volume	Volume x # of spouses	Volume / 1000 x rate *rate may need to be determined by age of employee
<b>Spouse Critical Illness Rider</b>	Charge per insured.	Not applicable	Total # of employees electing spouse coverage x rate *rate may need to be determined by age of employee
<b>Basic &amp; Voluntary Child Critical Illness</b>	Flat Volume	Volume x # of employees insuring children	Volume / 1000 x rate
<b>Child Critical Illness Rider</b>	Charge per employee electing	Not applicable	Total # of employees electing child coverage x rate
<b>Member Accident Coverage</b>	Charge per Insured	Not applicable	Total # of employees electing coverage x rate
<b>Spouse Accident Coverage</b>	Charge per Insured	Not applicable	Total # of employees electing spouse coverage x rate
<b>Child Accident Coverage</b>	Charge per employee electing	Not applicable	Total # of employees electing child coverage x rate
<b>Member Cancer Coverage</b>	Charge per Insured	Not applicable	Total # of employees electing coverage x rate
<b>Spouse Cancer Coverage</b>	Charge per Insured	Not applicable	Total # of employees electing spouse coverage x rate
<b>Child Cancer Coverage</b>	Charge per employee electing	Not applicable	Total # of employees electing child coverage x rate

Benefit	Type	Volume	Monthly Premium
<b>Dental</b>	<p><b>Family Rate</b> EE EE + Family</p> <p><b>Multi Rate</b> EE EE + Spouse EE + Child(ren) Full Family</p> <p><b>Counted Rate</b> EE EE + 1 dependent EE + 2 dependents EE + 3 or more dependents</p>	Not Applicable	# of individuals per rate x rate
<b>Vision</b>	<p><b>Family Rate</b> EE EE + Family</p> <p><b>Multi Rate</b> EE EE + Spouse EE + Child(ren) Full Family</p> <p><b>Counted Rate</b> EE EE + 1 dependent EE + 2 dependents EE + 3 or more dependents</p>	Not Applicable	# of individuals per rate x rate
<b>Individual Stop Loss</b>	<p><b>Family Rate</b> EE EE + Family</p> <p><b>Multi Rate</b> EE EE + Spouse EE + Child(ren) Full Family</p> <p><b>Counted Rate</b> EE EE + 1 dependent EE + 2 dependents EE + 3 or more dependents</p>	Not Applicable	# of individuals per rate x rate
<b>Aggregate Stop Loss</b>	EE	Not applicable	Total # of employees electing coverage x rate



## Appendix 3

### Sample census

Plan Number :		Group Name :			Sales Office :											
Member SSN	Last Name	First Name	MI	Relationship	Date of Birth	Gender	Class	Division	Salary	Salary Mode	Life Volume	AD&D Volume	Voluntary LTD Volume	Voluntary LTD Volume	Voluntary Life Volume	Voluntary AD&D Volume
REQUIRED (xxx-xx-xxxx)	SMITH	JOHN	J	M	01/01/1967	M	1	1	53,001	A	50000	50000	22000	10000	25000	50000
REQUIRED (xxx-xx-xxxx)	SMITH	JENNA	C	W	12/12/1969	F										
REQUIRED (xxx-xx-xxxx)	JONES	PENNY	A	M	11/01/1980	F	1	1	15.25	H	50000	50000	25000	24000	50000	
REQUIRED (xxx-xx-xxxx)	WEBER	BETH	P	M	06/25/1979	F	2	1	433.2	W	50000	50000				44444
<u>Please use examples above as a guide to entry</u>																
<u>Begin entering data below this line</u>																