

Missouri Educators Unified Health Plan (MEUHP) 2010 – 2011 Plan Year

This information will be used for preliminary quotes only. Additional information may be needed, and if so, will be communicated at the appropriate time.

1. Complete the MEUHP Proposal Checklist
2. Complete the census form **email electronic census to moeducators@ftj.com**
3. Please send all items to:

By Mail: Forrest T. Jones & Company, Inc.
Attn: Missy Maxwell
3130 Broadway
Kansas City, Mo, 64111

By Fax: Attn: MEUHP Fax# 816-751-6051

By E-mail: moeducators@ftj.com

Questions?

Contact: Missy Maxwell
800-821-7303 ext 1179
mmaxwell@ftj.com

The Missouri Educators Unified Health Plan Proposal Checklist

School District: _____ Date: _____

Current Health Carrier: _____ Renewal Date _____

Contact Person: _____ Phone: _____

Fax: _____ Email: _____

CENSUS (Sample census form attached)

- Include all *eligible* employees currently offered medical benefits
- Include currently enrolled retirees and COBRA participants
- Provide the following for each *eligible* employee, covered retiree and COBRA participant:
 - Date of Birth
 - Gender (M/F)
 - Coverage election (Waived coverage, Single, EE/spouse, EE/child(ren), Family)
 - Plan option elected (if multiple benefit plan options are offered)
 - Employee status (Active, Retired or COBRA)
 - Employee home zip code

MEDICAL PLAN BILLING

- Please provide a copy of the most recent billing received

BENEFIT SUMMARY

- A Schedule of Benefits from the current plan or Summary Plan Description is sufficient.
- If multiple plan options are offered, please provide a Schedule of Benefits for each option. Put the primary plan rates in the first table below and the alternate plan rates in second table.

RATE HISTORY

- Please provide the information requested in the chart(s) below for each plan option

Plan 1	2004-05 Rates	2005-06 Rates	2006-07 Rates	Renewal Rates

Plan 2	2004-05 Rates	2005-06 Rates	2006-07 Rates	Renewal Rates

CLAIMS EXPERIENCE

If current carrier provides claims experience, please provide the last two years of any claims reports you receive. Typically, carriers will provide these reports for groups over 100 lives.

If you have any questions, contact Mark Iglehart at 800-821-7303 ext 298.