

## 51+ Checklist for Quoting

CAREFIRST ONLY: DC/VA

### 51-199 Enrolling:

- Group Screener/Questionnaire
- Full Census in EXCEL to INCLUDE:
  1. All Eligible Employees in Group
  2. DOB
  3. Gender
  4. Coverage Type
  5. Current Benefit( if group offers more than one)
  6. Home Zip Code
  7. Waiver reasons( to make sure the group meets participation)
  
- Current Rates & Benefits
- Renewal Rates & Benefits
- If available any large claimant or monthly claims

\*\*\*\*\*WITH ALL GROUP SIZES IF THERE ARE ANY CHANGES TO THE CENSUS, THE GROUP NEEDS TO REPEAT THE UNDERWRITING PROCESS\*\*\*\*\*