

CO Level Funded Carrier Matrix



	Aetna Funding Advantage	Anthem Balanced Funding	Cigna Level Funding	UnitedHealthcare Level Funded
Group Size (minimum enrolled & maximum eligible)	2 enrolled To 100 FTE	10 enrolled To 250 FTE	20 enrolled To 250 FTE	10 enrolled To 300 FTE
Participation Requirements	2-9 eligible employees 50% total eligible employees 10-100 eligible employees 30% total eligible employee	75% excluding valid waivers 50% of total eligible employees	45% of total eligible employees	The group must have 50% participation of total eligible employees post valid waivers. Waivers reason is required
Employer Contribution Requirement	50% of employee only premium per month	50% of employee only premium lowest cost plan	50% of employee only premium per month	50% of employee only premium per month
Underwriting Type	IMQ (2-24 if fully insured or PEO) GRX (25+ if fully insured or PEO, 5+ if self-funded)	Group Risk Questionnaire, CURV tool utilized	GRx	>10 Claims experience (if applicable), member census
Will Accept Another Carrier IMQs	Yes (for quoting not implementation)	Yes	Yes, IMQs and broker created IMQs to UW	Yes IMQs and broker created IMQs to UW
Virgin Group Eligibility	Yes (IMQs required)	Yes (IMQs required)	Yes	Yes, 10-50 and not groups over 51
Sold Submission Cutoff Dates	AFA will accept group paperwork until last day of the month prior to effective date	ABF will accept group paperwork until last day of the month prior to effective date	Cigna will accept group paperwork until last day of the month prior to effective date	Groups must be submitted by the 10 th of the month for a first of the month effective date
Ineligible SIC Codes	7361, 7363	None	None	Will not quote SIC codes classified as ineligible under ERISA
Maximum Number of Plans	2-4 life groups 2 plans. 5+ can offer up to 4	4 Plans	20-75 Enrolled 2 Plans 75+ Enrolled: 3 Plans	Negotiable. Please try to sell 5 or less
Contract Options	12/12 with 48-month terminal reserve	12/12 with additional pre-funded 15-month runout	12/27 Extended or short contracts offered on a case by case basis	12/60 incurred Extended contracts to move anniversary date
Surplus Options	Standard surplus refund 50% 100% option with rate load	Standard 50% Other options are 70% and 100%	Standard 66% Other options are 50% and 100%	Varies by state. 51-99 and 100+ options: 2/3, 50% and 100% <50 cases are 2/3 surplus only in CO
Renewal Required to Receive Surplus	Yes	Yes	Yes	Yes
Surplus Refund Type	Debited into employer's bank account 4 months after renewal	Issued within 120 days of renewal	Credited 90 days after renewal is finalized	Check sent to employer in the 16th month
Claims Reporting Frequency	Monthly	Monthly	Monthly	Monthly
Standard Broker Commissions	\$30 PEPM	\$28 PEPM but can quote any commission desired	5%	\$28 PEPM but can quote any commission desired

Warner Pacific believes this information to be accurate as of the revision date. However, it is subject to change and therefore accuracy cannot be guaranteed. Please contact your Warner Pacific Analyst or Sales Executive for more information or refer to the [Carrier 411](#).

You can find more information on the Level Funded 411. warnerpacific.com | (800) 801-2300

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	Kaiser Permanente	healthEZ	Gravie	Allstate Benefits
Group Size (minimum enrolled & maximum eligible)	20 enrolled to 100 eligible employees	25 enrolled employees	15 enrolled employees	2+ enrolled
Participation Requirements	75% excluding valid waivers	No participation requirement	50% of eligible including valid waivers	50% of total eligible employees or 75% excluding valid waivers
Employer Contribution Requirement	50% of employee only premium	No contribution requirement Employer based	50% of lowest option meeting affordability requirements.	50% of employee only premium
Underwriting Type	GRQ (fully insured) Renewal, 12mo Claims Experience (Level Funded) Member Census, CURV tool utilized	IMQ's for virgin and fully insured groups with no data.	12+ months of claims data OR IMQs	<51 enrolled – IMQs >51 – claims
Will Accept Another Carrier IMQs	KP LF does not use IMQs to underwrite	Yes	Yes	Yes, for baseline quotes No for installation
Virgin Group Eligibility	Yes Must be in business for 3 years	IMQs required for manual rates	Yes, IMQs are required	Yes Additional documents required
Sold Submission Cutoff Dates	30 days before effective date	15 th of the month prior to the effective date	30 days prior to effective date	Last day of the month prior to effective date
Ineligible SIC Codes	None	None	Cannabis Industry	None
Maximum Number of Plans	3 plans within service area 1 POS plan, 2 plans for out-of-area-employees	4 plans: 20+ enrolled *As a group increases in size, more options can be added*	34 Comfort plans; in addition to traditional, HSA and Preferred options	<15 – 2 plans 16-24 – 3 plans >25 – 4 plans
Contract Options	12 months; we do not offer an extended or short contract year	Standard is 12/18. Other options are 12/15, 12/24, 15/12, 18/12, and 12/12	Standard is 12/24. Other options are 12/15, 12/18, 15/12, 18/12, 12/12	Network Plans – 12/18 Core, Value, Access – 12/21 Meritain – 12/24
Surplus Options	Standard 50% with a 67% Option	100% on all groups	Standard surplus return is 50%	Standard 50% 100% of claims refund
Renewal Required to Receive Surplus	Yes	Contracts reviewed on Case by Case basis	Yes	Yes
Surplus Refund Type	Credit on future bill 5 months following end of plan year after renewal	Via Check, ACH, or Roll Over Standard surplus return is 100%	Standard surplus return is 50%	Via Check Network =6 months Core =9 months Meritain =12 months
Claims Reporting Frequency	Monthly	Monthly	Monthly and Quarterly	Monthly
Standard Broker Commissions	PEPM Options: \$25; \$30, \$35, \$40	Standard: \$30 but we can accommodate any comp requested	\$30 PEPM or % as requested	PPO-7% Core – 8% Dial up Options

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