

IU Health Plans Quote Checklist

Thank you for the opportunity to provide a quote for your customers. At IU Health Plans, we understand insurance rates are important, but we also know that employers are faced with multiple issues that greatly impact their bottom line like low productivity, unengaged workforce, employees with an increase in chronic disease, fragmented health and wellness

programs, and more. So employer groups need an insurance partner who is able to address them all. IU Health Plans provides employers in Indiana with a more effective approach to healthcare.

Quote checklists			
Small Group (2 – 50 eligible employees)	Large Group (51 – 99 eligible employees)	Large Group (100+ enrolled employees)	Self-Funded
To obtain a quote, login to the IU Health Plans Quoting Tool. Remember to complete the IU Health Plans census, which can easily be accessed from within the quoting tool. All census fields must be completed. Some features of our quoting tool are not compatible with Internet Explorer. Please log in through Google Chrome or Mozilla Firefox to generate a quote.	To obtain a quote in a timely manner, please submit all required information to quotes@iuhealth.org.		
	Completed parts A and B of the Group Risk Questionnaire	Completed parts A and B of the Group Risk Questionnaire	To obtain Stop Loss quote(s): Completed self-funded questionnaire
	Member level census with plan elections, date of birth (DOB), gender, zip codes, enrollment tier and dependent type	 Member level census with plan elections, DOB, gender, zip codes, enrollment tier and dependent type 	 Member level census with plan elections, DOB, gender, zip codes, enrollment tier and dependent type
	 The SOB(s), SBC(s), or other documents with detailed current plan designs Complete part C of Group Risk 	■ The SOB(s), SBC(s), or other documents with detailed current plan designs and requested benefits to quote	■ The SOB(s), SPD(s), or other documents with detailed current plan designs and requested benefits to quote
	Questionnaire or claims experience If experience is available, 24 months of paid claims data broken out by medical and	 24 months of paid claims data broken out by medical and pharmacy, with the latest month of claims no older than 90 days 	 24 months of paid claims data broken out by medical and pharmacy, with the latest month of claims no older than 90 days
	pharmacy, with the latest month of data no older than 90 days—or Bulletin 174 including this data • Separate large claimant reports run on a rolling 12 month—a report for the current 12 month period and a report for the prior 12 month period	Separate large claimant reports run on a rolling 12 month—a report for the current 12 month period and a report for the prior 12 month period	 Separate large claimant reports run on a rolling 12 month—a report for the current 12 month period and a report for the prior 12 month period
			To obtain administrative fee only: A census file indicating the total number of subscribers and members currently on the plan