Agent Licensing
Before you sell your first case, you must have a current license. Evergreen requires you be contracted and appointed by the state. (NOTE: No producer contract will be authorized unless proof of Errors and Omissions coverage is provided).
Any and all changes in agent information such as address, tax I.D. number, telephone number; license status should be reported to Evergreen within 30 days of the event.

Commission Information
Agents will receive monthly commissions as earned, subject to the terms and conditions of the Producers Agreement. Commission checks are mailed from our office on the 15th of each month provided the case stays effective and pays their premiums on time and you continue to actively service the group. The Producer Agreement requires an open enrollment be conducted every 24 months.

Agent Commission Schedule
(Fully Insured Coverage)
Group Size in Employee Lives:

2-29	10%
30-49	7%
50-99	6%
100+	Agreed upon by Evergreen Health Plan and the agent.

Employer Contributions
It is required that participating employers contribute a portion of the premium under the plan. The minimum contribution is 50% of the employee cost or 25% of the employee and dependant cost.

Participation Requirements
For small groups (less than 50 employees) there are some minimum requirements. Evergreen requires 100% participation for groups 1-5 net eligible employees, 75% of groups 15-50 net eligible employees.

Net Eligible	Minimum Requirements
5	All
6	5
7	6
8	6
9	7
10-50	75%

Net Eligible-Employees passing the eligibility requirements less those eligible employees covered by a spouse or parent. (Proof of the coverage must be submitted with the Group Application). All employees must fill out an enrollment form, **even if the employee is waiving coverage**. The agent is responsible for obtaining all enrollment forms from the group.

How to Apply
Applications must be completed and signed prior to the requested effective date. Evergreen Health Plan, Inc. must have all the necessary information to process the case by the fifth working day of the month to be considered for a first-of-the month effective date. Any case arriving after these dates will be considered for an effective date of the 1st of the following month.

For employer groups with 2-50 employees, each employee must complete the entire application, sign and date the form, **even if they are waiving coverage.** For employer groups with 50 or more employees, the medical history section of the application is not required, except for late applicants.
A copy of the employer's most recent state quarterly unemployment tax report including names, social security numbers and earning must be submitted with each cases.

Premium Calculations
Rates are determined by the employee's attained age. When both employee and spouse are full time employees of the same employer and are each eligible for coverage under the group plan, both must be insured as employees. Their children, if any, may be insured as dependants of either employee.

Grace Period- Premium Payments
A grace period of 31 days is allowed for any premium after the 1st premium. If any participating employer fails to pay the premium before the expiration of the 31-day grace period, coverage shall automatically cancel (lapse) as of the due date. Lapsed coverage is not automatically reinstated. A

lapsed case would have to be re-written as a new case, subject to underwriting.

Underwriting
Certain types of business groups are considered "non-standard", however HIPPA prohibits a PSHCC from denying coverage to a small group based on industry. There are no such limitations on groups over 51 employees. The following list contains industries that are not eligible (this list may not be all-inclusive).

Bars/Nightclubs and Taverns
Taxi Companies and Bus Lines
Mining/Logging/Hunting/Trapping/Fishing Operations
Junk and Srap Dealers
Athletic Teams
Car Washes
Oil/Gas Drilling or Exploration
Entertainers
Beauty Salons/Barbershops
Motorcycle Dealers
Liquor Stores
Adult Only Businesses

The following may be declined as ineligible, on a group by group basis:

Metal manufacturing
Restaurants/Diners
Hotels and other Lodging Places
Laundries and Garment Cleaners
Amusement and Recreation services
Temporary Aid Supply Services
Legal Services

Evergreen will not write a group that has been in business less than 12 months (a copy of the employer's business license must be submitted with application). Employers that have been in business for more than 12 months, but have never been insured will require additional underwriting. Underwriting may require medical applications, regardless of group size.

Evergreen will require that all groups provide evidence of Workers Compensation insurance, and will not write groups that do not have Workers Compensation Insurance coverage.

All employees must live or work in the Evergreen service area. Evergreen does not provide any coverage for employees who live or work outside of our service area.

Sold Case Submission Requirements
The Following items are required to be submitted on every sold case. Incomplete submissions will only delay the underwriting / issue process.

1. **Completed Group Application**
2. **Completed applications/enrollment forms from each employee including a signed waiver from employees who choose not to participate in the coverage**
3. **First months premium on company check (no personal checks are accepted)**
4. **Copy of prior carriers last bill and a copy of the current plan giving the employee's effective date with prior carrier**
5. **Copy of the employer's most recent state quarterly compensation (wage & tax) report containing employee names, social security numbers and earnings**
6. **Proof of workers Compensation Insurance**
7. **Copy of employer's business license**
8. **Copy of proposal submitted to client with verification of actual sold rates**
9. **HIPPA-Certification list for employees that were covered by the prior carrier and the length of time covered by that carrier or any other prior carriers if you have more than one carrier in the past 12 months.**