AGENT HEALTHCARE PLAN QUESTIONS AND ANSWERS

HOW MANY PLAN OPTIONS ARE THERE?

There are five plan offerings: three with Cigna PPO, and two HSA plans with Blue Cross / Blue Shield.

HOW CAN I GET THE RATES AND PLAN DESIGNS?

The Cigna plans and rates are attached to this communication.

The Blue Cross plans are awaiting final rates and may not be available until November 1, 2019.

Please call toll free (800) 838-8135 for more information.

WHO DO I CALL TO COMPARE PLANS AND RATES AND START THE ENROLLMENT PROCESS?

Call BenAdvance at 1-800-838-8135. If all lines are busy or if it is after hours or on the weekend, please leave a message and they will return your call within 24 hours Monday through Friday.

WHO DO I CALL, CIGNA OR BLUE CROSS, FOR QUESTIONS ONCE I ENROLL?

As with most large healthcare plans, these plans have a Third Party Administrator or TPA. The TPA responsible for administering this plan is Daniel H Cook Associates and they will handle any questions that you have. Their contact information as well as important plan information will be mailed to you in a welcome package once you enroll.

ARE THE PLANS GUARANTEED ISSUE?

No, you must call and speak to a licensed agent at BenAdvance to complete a questionnaire. The carrier has the right to decline you based on health issues. It is important to keep in mind that being underwritten protects the longevity of the plan. The plan has been in existence for 20+ years, and has experienced small increases only, due to proper underwriting.

WHAT IS REQUIRED TO JOIN THE PLAN?

You must be a self-employed REALTOR and have an EIN number. If you do not have an EIN number, we will provide you the instructions on how to obtain one free of charge. This is a special purpose EIN and will not create additional tax filings by you. If you are an LLC, S Corp or C Corp and already have an EIN you can use it to enroll in the plan.

IS THERE AN OPEN ENROLLMENT PERIOD?

No, you can join anytime, but applications must be accepted by the 15th of the month to be effective the 1st of the following month. If you miss that date your enrollment will be effective the 1st of the next month which will be approximately 6 weeks later.

WHAT ARE THE COSTS ASSOCIATED WITH JOINING THE PLAN?

There is a one-time set up fee of \$125 that is paid to Elevate to Wellness which is the association that provides the plans. In order to gain access to the plans you must join a special purpose union and pay monthly dues of \$20. A portion of the dues will be credited to your and will come back to you at retirement. In addition, you will be receiving \$12,000 of life insurance coverage included with your application.

DOES THE PLAN INCLUDE PRESCRIPTION DRUG COVERAGE?

Yes, see the Summary Plan Description for important information and details.

WHEN DOES THE PLAN RENEW? AND WHAT TYPE OF INCREASES HAS THE PLAN EXPERIENCED?

January 1st is the annual renewal date. You can expect your renewal information to be mailed to you mid to late November. While no one can predict renewals, the plan has thousands of enrolled members and has experienced only a very small increase the last several years. Should a rate increase ever be necessary, the rate change would take effect January 1st.

CAN I DEDUCT PREMIUMS FROM MY TAX RETURNS?

As a self-employed individual or company, you may be eligible to deduct your premiums. Please see your CPA or tax preparer for tax advice.

IF I HAVE A TEAM, CAN MY TEAM MEMBERS ALSO GET COVERAGE UNDER THIS PLAN?

As long as you are enrolled in the plan, your licensed and unlicensed team members are also eligible to enroll. If you apply but are denied coverage your team members will not be able to obtain coverage.