



# ARKANSAS 51-100

## Quote Request Checklist

Email to [sesub@uhc.com](mailto:sesub@uhc.com) and cc your Account Executive

### 51-100 Average Total Number of Employees

- Agency and writing Agents name and address
- Account Executive Name you work with at UnitedHealthcare
- **MEMBER LEVEL CENSUS** – must include employee and dependent names, dates of births and genders and employees home zip code
- 51-100 Coversheet (attached). Please make sure completed in full.
- Claims vs Premiums for prior 12 months
- Large Loss Report for prior 12 months
- Employer application completed
- For ancillary quote we will need member level census including waivers, current rates, summary of benefits and employer contribution.