

# Employee Benefits Program Review: Data Sheet

In order to complete the employee benefits review process, please submit as much of the information listed below as possible. It is important to have all items requested under Employee Census.

## Employee Census

Complete payroll list to include:

- Gender
- Date of Hire
- Date of Birth
- Family Status (i.e., single employee, employee & spouse, employee & child(ren), family)
- Employee Status (i.e., full time or part time)
- Employee participation for each plan (company sponsored & voluntary)
- Compensation, including all components covered for benefits (i.e., base salary, bonuses, overtime or commissions)
- Occupation
- Geographic Location (home zip code, city & state)
- Notation of employees in waiting periods or continuing coverage under COBRA

## Program Documentation

For fully insured contracts:

- Medical/Health Plan Master Contract (booklet certificate)
- Life/AD&D certificate
- Dental Master Contract
- Vision Master Contract
- Long-Term Disability certificate
- Long-Term Care Contract
- Employee communication pieces for past 24 months
- Section 125 (Cafeteria Plan) document, if applicable
- Current rates for all plans if set up on self billing statement
- Copy of current billing statement by line of coverage

For partially insured contracts:

- Master document for each plan (medical, dental, vision)
- Copy of each reinsurance (stop-loss) policy
- Third Party Administration (TPA) agreement
- Employee communication pieces for past 24 months
- Current administrative fees, reinsurance rates and factors

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## Loss Experience

For fully and partially insured contracts:

- Paid premiums and claims for each of past 24 months
- Enrolled employees for each of past 24 months
- Individual claims exceeding \$15,000 during the past 12 month with diagnosis and prognosis
- Ongoing medical conditions with diagnosis and prognosis
- Life insurance and LTD claims history

## Retirement Benefits

- Type of organization (c-corporation; s-corporation; partnership, non-profit)
- Single location or multiple sites
- Type of plan(s) (profit sharing; 401(k); defined benefit, etc.)
- Size of employer match (automatic or discretionary)
- Size of plan(s) (number of participants; percentage of participation; assets' and annual contributions (employee plus employer)
- Vesting schedule
- Who holds the assets? Are they daily valued or balance forward? Are there restrictions on moving assets?
- Trustees?
- Any unusual plan features?

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MAY LOSE VALUE	ARE NOT INSURED BY ANY FEDERAL GOVERNMENT AGENCY	