PLEASE READ BEFORE SUBMITTING TO RFP@COMPLETECAPTIVE.COM

This page will not be reviewed by the underwriting team — it exists only to help your submission move through medTRANS's automated intake without delay. Three quick things to check before you click send:

1 One Employer Group Per PDF

If you're submitting for multiple employer groups, please complete and send a separate RFP Questionnaire PDF for each one. Our intake team can only process one request per email — a combined submission will delay processing for everyone in it.

2 Confirm Your Files Are Attached

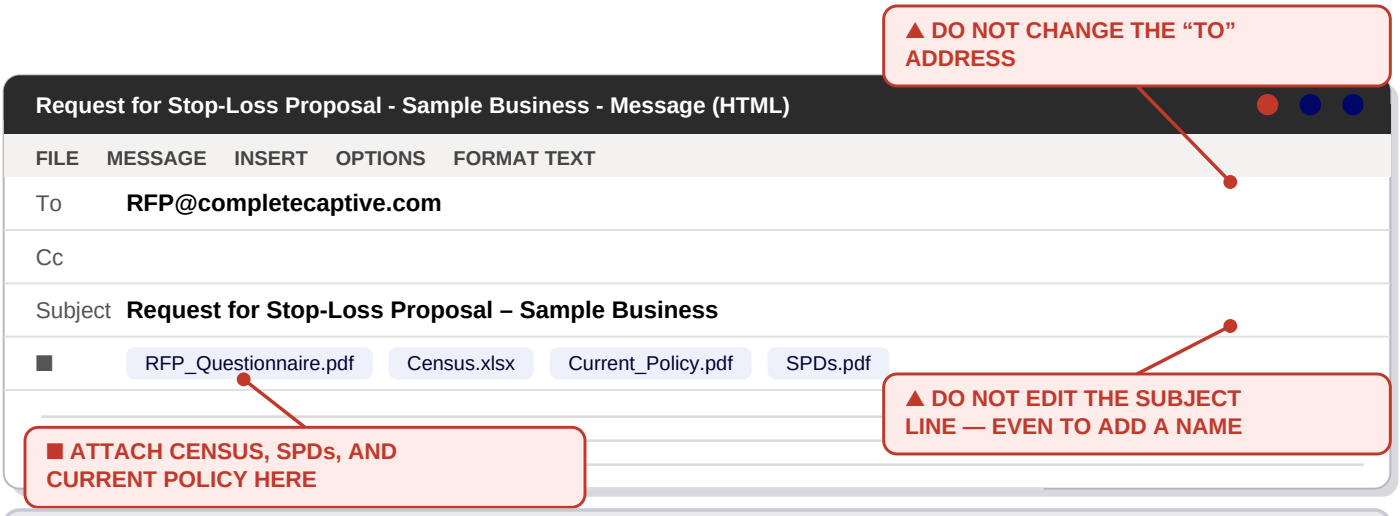
Clicking the button below normally attaches this completed PDF to a new email automatically. Either way, please manually attach:

- **Current Census — required**
- SBCs / SPDs (plan documents) — strongly recommended
- Current Policy / Renewal offer — strongly recommended

The button may open an email with no attachment, or nothing at all, depending on your PDF viewer and email setup. If either happens, use your PDF viewer's own Save/Download option to save this file, then attach it yourself along with the files above. See page 4 for details.

3 Don't Touch the To: or Subject Line

The email button pre-fills the recipient and subject line for a reason: our intake system reads both to route your submission automatically. Editing either one — even to add a reference number or your client's name — can prevent the form from being picked up at all. See the example below.



BEFORE YOU CLICK SEND

- ☐ This PDF covers exactly one employer group
- ☐ Census file is attached (required for any tier)
- ☐ SBCs/SPDs and current policy/renewal are attached, if available
- ☐ The To: address still reads rfp@completecaptive.com
- ☐ The Subject line is unedited

Request for Stop-Loss Proposal

Fields marked with * are required in order to enable the email button at the end of this form.

Requested Response Date: **Requested Output: ***

◯ **Illustration** ◯ **Indication** ◯ **Proposal**

Check the output your client needs right now. See the reference table below for what each tier requires — medTRANS will confirm which tier the submitted data actually supports.

	Illustration	Indication	Proposal
Nature	Non-binding ballpark	Non-binding, near-final	Binding offer
Census needed	Name, gender, DOB, tier, zip	Full census incl. plan elections	Full census + dependents
Current SL / FI data	Optional	Required for rating	Required & verified
Claims through 9 months	Optional	Preferred	Required
Incumbent renewal	Optional	Preferred	Required
Deductible request	Optional	Required (up to 3 levels)	Required
TPA / PBM / Network	Optional	Preferred	Required
Turnaround	3 business days	5 business days	7–10 business days

DATA SUPPLIER: BROKER / CONSULTANT

Entity Name * Entity Type*

Contact Name * Email / Phone *

Per the medTRANS Outbound Communication and Recipient Protocol, submitting data does not by itself make this entity the Primary Relationship holder or entitle it to receive all future medTRANS/CCMS communications. Recipient status is confirmed by the Client Authorized Representative at each plan-year renewal.

Relationship to Insured * Deliver Output To*

TPA Attestation (if Primary Relationship)

If the Third-Party Administrator is asserting Primary Relationship status, it must be able to resolve, with authority, all health plan claims, policy compliance matters, and administrative actions on behalf of the insured. A TPA unwilling to act in this capacity cannot hold Primary Relationship status.

INSURED INFORMATION

Legal Name *

Street Address

City State * Zip *

INSURED PROFILE

Nature of Business SIC

Participating EEs *

COVERAGE DETAIL — Current / To Be Proposed

Effective Date (Current)

Funding Type (Current)*		Funding Type (Proposed)	
EITHER / OR	Incurred / Run-out (Current)†	Incurred / Run-out (Proposed)	
	Run-In / Incurred (Current)†	Run-In / Incurred (Proposed)	*Not currently offered*

† At least one of these two fields is required.

Specific Ded. (Current)

Aggregate Coverage (Current)	○ Yes	○ No	Aggregate Coverage (Proposed)	○ Yes	○ No
Agg Spec Ded. (Current)			Agg Spec Ded. (Proposed)	*Not currently offered*	

COVERAGE OPTIONS

Aggregate Accommodation requested?	COBRA EE Coverage included?
Retiree Coverage included?	
Ancillary Organ Transplant Policy in Place?	

HEALTH PLAN SERVICE PROVIDER STACK

Select the provider in place today and the provider desired for the proposed term. Choose “Other/Unlisted” if the provider is not shown, and note the name in the margin.

Category	Current Provider	Desired Provider (for this submission)
Third-Party Administrator (TPA)		
Pharmacy Benefit Manager (PBM)		
PBM Overlay / Rebate Program		
Network / Reference-Based Repricer		
Network Overlay		
Reference-Based Pricing (RBP) Firm		
Severity Claims Mitigation Program		

REQUESTED COVERAGE DETAILS

Deductible Option 1	Option 2	Option 3
Desired Renewal Date *	Policy Term*	
Policy Duration *	Desired Tiers	
Special Requests		

SUPPORTING DOCUMENTATION

Incomplete submissions and excluded back-up will likely result in delivery delays. If data is missing or needs clarification, a member of the underwriting team will reach out.

- ☐ **Current Census** *
  All eligible employees & dependents: Employee/Sub Identifier, Gender, DOB, Relation, Zip, Applicable Tier, Covered Plan.
- ☐ **SBCs & SPDs**
  For all available Health Plans.
- ☐ **Current Policy / Renewal**
  Current stop-loss policy and rates, incumbent renewal offer, and any prospective proposals received.
- ☐ **Claim Reports**
  Previous full year & current YTD (min. 9 mos.) Medical & Pharmacy: Agg claims, detailed 50% report, spec claims.
- ☐ **Clinical Reports**
  Trigger diagnosis report, lasers clinical & enrollment update, pended claims, pre-cert/prior auth, denied yet payable, CM/UM.
- ☐ **Other / Misc.**

MEDTRANS UNDERWRITING APPROACH

medTRANS underwrites on a data-driven, risk-based standard set by the Underwriting Committee, and applies the same discipline regardless of which output tier is requested. The following summarizes the governing underwriting policies (02-01-02 and 02-01-03) as they apply to this submission.

Output Tiers & Binding Status

• Illustration — a preliminary, non-binding pricing scenario built on partial data to demonstrate manual rating methodology. Used to facilitate discussion on a case that would otherwise lack sufficient data to quote.
• Indication — a near-bindable rate estimate relying on substantially complete data, but possibly missing minor details. Non-binding, and intended to drive the submission toward a full Proposal.
• Proposal — a fully underwritten, bindable offer contingent on all underwriting requirements being met. A Proposal is medTRANS's offer to bind an insurance policy between the client's captive and the client, and requires the complete underwriting dataset described on pages 1–2 of this form.

Data Priority & Conservative Assumptions

• Submitted data is reviewed in order of priority: (1) employee census, (2) current in-force carrier premiums and stop-loss policy attributes, (3) opportunity details (desired TPA/PBM/network, recipient of output), then (4) requested coverage details.
• When data is incomplete, medTRANS applies conservative assumptions rather than declining to quote — for example, an employee's gender defaults to female when not stated. Conservative assumptions are permitted but must be documented, and they generally limit the output to an Illustration or Indication until the missing data is received.

Clinical Review Standard

• Every Proposal requires a clinical review before issuance. For a renewal of an existing client, that review must occur before the Proposal is released to the insured or its designee, regardless of whether the review happens before or after underwriting work begins.
• For new opportunities (not a current client), the timing of clinical review is left to underwriter discretion — generally warranted where there is a high frequency of severity claims or a trigger diagnosis known for high cost, per the Trigger Diagnosis schedule maintained in the TPA Administration Guide.

Eligibility Standards & Quote Denial

• A Proposal cannot be issued if the average age of the covered employee population is 50 or older as of the first day of the requested effective date.
• Underwriter discretion alone does not justify declining to quote. Denials — including for average age of 50 or older, or an ineligible class of trade — are reviewed with underwriting leadership before being communicated back to the intermediary.

Turnaround Times

• Illustration: within 3 business days. Indication: within 5 business days. Proposal: within 7–10 business days once the complete dataset is received.
• “Busy season” — generally mid-September through early December, driving the January 1 renewal cycle — may extend these timelines. The Client Success Manager is responsible for tracking aging, incomplete submissions during this period.

Escalation & Dispute Resolution

• Disputes or quote denials are escalated to Underwriting Leadership, coordinated with the Director of Captive Strategies, and resolved jointly with executive leadership — they are never resolved by a single underwriter’s discretion.

Submission Routing, Data Security & Distribution

• All requests are submitted or forwarded to rfp@completecaptive.com. The Client Success Manager triages the submission and communicates status by file tagging, folder color-coding (yellow = not started, pink = in progress, green = complete), or direct email — a verbal status update alone is not sufficient.
• All PHI/PII must be transmitted through a secure channel in compliance with HIPAA and medTRANS’s internal data security standards.
• Delivery of the resulting Illustration, Indication, or Proposal follows the Data Supplier section on page 1 of this form and the medTRANS Outbound Communication and Recipient Protocol — submitting this data does not, by itself, entitle any party to receive communications beyond the requested output.

CERTIFICATION

By submitting this form, the Data Supplier named above certifies that the information provided is accurate and complete to the best of their knowledge.

Name * Date * Title

Email Completed Form to CCMS

This button runs a required-field check in Adobe Acrobat or Reader, then attaches this completed PDF to a new email addressed to RFP@completecaptive.com — please still manually attach the Census, current policy, SBCs/SPDs, and any other files checked off on page 3. Depending on your PDF viewer and email setup, the button may instead open an email with no attachment, or do nothing at all. If so, use your PDF viewer's own Save/Download option to save this file, then attach the saved file along with the files above, and send directly to RFP@completecaptive.com.