



ENROLLMENT INSTRUCTIONS FOR EMPLOYERS ELECTING STAFF COVERAGE

Thank you for your interest in electing staff coverage for your employees. This document is designed to help you enroll your staff in the PHBP.

For staff coverage beginning after January 1st, 2015, please take note of the following important dates/steps in order to make this happen smoothly.

STEP 1.

Once PHBP receives your signed Participation Agreement and Staff Election Form, an electronic enrollment kit will be forwarded to you.

STEP 2: Once you have received your electronic enrollment kit, you will proceed with steps 2, 3, 4 and 5:

Have your employees complete the following forms, sign and date them:

Each of your employees must complete the PHBP Benefits Enrollment Form for submission. All employees must complete a form even if they are declining coverage. Employee forms must be complete or coverage may be delayed or rejected. Please make sure they complete the correct enrollment form, for the plan the employer has elected-Option 1 – medical only or Option 2, medical, dental and vision.

STEP 3: Provide a census or list of your current COBRA participants along with their application forms:

- a. Contact all your COBRA participants through your COBRA administrator and make sure they are notified of the fact that your group is moving from your current plan to the new Anthem Blue Cross plan and the effective date. Enrollments will need to be submitted on COBRA members.
- b. Make sure that when you submit your packet all your COBRA and in California, Cal-COBRA participants are accounted for.

STEP 4: Prepare a payment in the form of a check to cover the first month's contribution by the 15th of the prior month your coverage is set to start:

Make check payable to PHBP, Producers Health Benefits Plan:

- a. The check should be for the full amount of the contribution due, based on how many people in your group are enrolling and any dependents that may be covered. Please find the attached calculator for worksheet.
- b. Please note that Employers are responsible for submitting gross amounts for all staff employees and dependents covered from their company each month. Any deduction or payroll contribution to the employer by the employee for the either the individual cost (up to 25% of actual cost – as decided by the employer), or dependent cost should be arranged through your own financial systems.

STEP 5: Send in your application materials containing items in Steps 2, 3, 4 and 5 :

Originals must be sent (including the check) by traceable mail (UPS, FedEx, Express Mail, Courier, etc.)
to: BeneSys Administrators
Attention: Barry Osharow, Assistant Plan Manager
1050 Lakes Drive, Suite 120 West Covina, CA 91790.
Telephone Number- 855-696-2909

Please see below for Monthly Contribution Rate to PHBP for 2014:

:	Employee	Employee + SP /DP	Employee+ Child(ren)	Family
Option 1- Medical only	\$397.76	\$875.08	\$715.97	\$1,233.08
Option 2 Medical, Dental Vision	\$441.76	\$962.62	\$813.35	\$1,370.14

As a reminder to our Participating Employers offering staff coverage please make note of some of the important facts of the Employer Contribution Policy:

Monthly contributions are due on the 15th of the preceding month. Failure to remit timely can result in the termination of coverage. You will receive an email on the first of the month, indicating your statement is ready. You will need to create a log in on www.phbp.org.

Once your group has been enrolled terminations or new enrollees must be reported to BeneSys on the date of hire or the date of the qualifying event.

You can download an enrollment form for new hires or report a termination on a Cobra Qualifying event Form, by visiting the www.phbp.org website. Both forms are posted for your convenience.

If you have any questions, please contact the PHBP Office at 646-370-1431 or dianan@phbp.org.

This memo is intended for general information purposes only. Actual benefits, terms and conditions of participation are subject to the final Anthem/Policy, related PHBP/Anthem Documents and the revised Participation Agreement.

c/o Raleigh Studios, 650 North Bronson Ave. #223B, Los Angeles, CA 90004