

Warner Pacific Ease Setup Support

Checklist

- ✓ Completed Intake Form
- ✓ Ease excel/csv employee census template for new groups to Ease. For renewing groups already in Ease, any updates to the census need to be completed by the Broker and/or Group Administrator
 - Required fields: First and Last name, Birthdate, State, Zip Code, Email and Hire Date
 - Compensation Amounts are required for salary-based benefits (i.e., Voluntary life, Disability, etc.)
 - Job Class/Divisions/Departments must be included for each employee if multiple eligibility/contribution rules apply
- ✓ Medical plan details
 - Sold Proposal for large groups
 - SBCs/Benefit Summaries for large groups
 - Moving to new carrier: If you would like Ease mapped to like medical plans, include the specific plan mapping details on the intake form under Notes (page 3)
- ✓ Ancillary plan details
 - Monthly rates (carrier proposal and/or renewal)
 - Benefit summaries
 - Life/AD&D: rates per 1000 unit
- ✓ Warner Pacific Broker Disclaimer – this is only required if this is the first time Warner Pacific is assisting your agency with an Ease build

Submit the above applicable items to OnlineEnrollmentSupport@WarnerPacific.com in order for the online enrollment support team to get started with the Ease build process.

Submit the completed intake form, employee census and rates to: OnlineEnrollmentSupport@WarnerPacific.com

Online Enrollment Intake Form (Page 1 of 3)
Medical, Dental, Vision

Broker Information

Broker Name:	Contact at Broker's office:
Contact Phone:	Contact Email:

Employer Information

Type of Enrollment: New to Ease: New Business:		Renewing on Ease:		New to Ease: Renewal:	
Company Name:			DBA:		
Physical address:					
City:		State:	ZIP Code:	County:	

Benefit Enrollment Information

Pay Cycle (<i>default monthly</i>):	Federal COBRA eligible: Yes No
Open Enrollment Start & End date:	
Eligibility Information: Job Class/Divisions/Department Classifications, if multiple eligibility/contribution rules apply: Yes No	
If Yes (specify here):	

Medical

New Business:	Renewal:	Wait Period:	Waive for initial enrollment:
Medical Carrier(s):		Effective Date:	
Sold Plans:			
<i>Employer Contribution: employee / dependent(s) Base Plan (if applicable):</i>			
Allow extra amount rollover to dependent(s) (default in Ease is yes): Yes No			
Other/Notes:			

Dental

New Business:	Renewal:	Wait Period:	Waive wait period for initial enrollment:
Renew as is in Ease (no rate or benefit changes):		Effective Date:	
Dental Carrier:			
Sold Plans:			
<i>Employer Contribution: employee / dependent(s) Base Plan (if applicable):</i>			
Allow extra amount rollover to dependent(s) (default in Ease is yes): Yes No			

Vision

New Business:	Renewal:	Wait Period:	Waive wait period for initial enrollment:
Renew as is in Ease (no rate or benefit changes):		Effective Date:	
Vision Carrier:			
Sold Plans:			
<i>Employer Contribution: employee / dependent(s) Base Plan (if applicable):</i>			
Allow extra amount rollover to dependent(s) (default in Ease is yes): Yes No			

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Online Enrollment Intake Form (Page 2 of 3) Life, Disability, HSA/FSA	
Group Sponsored Life	
New Business: Renewal:	Wait Period:
Renew as is in Ease (no rate or benefit changes):	Waive wait period for initial enrollment:
Life Carrier:	Effective Date:
<i>Employer Contribution: employee / dependent(s)</i>	
Voluntary Life/AD&D	
New Business: Renewal:	Wait Period:
Renew as is in Ease (no rate or benefit changes):	Waive wait period for initial enrollment:
Voluntary Life Carrier:	Effective Date:
Short Term Disability	
New Business: Renewal:	Wait Period:
Renew as is in Ease (no rate or benefit changes):	Waive wait period for initial enrollment:
Carrier:	Effective Date:
<i>Employer Contribution: employee / dependent(s)</i>	
Long Term Disability	
New Business: Renewal:	Wait Period:
Renew as is in Ease (no rate or benefit changes):	Waive wait period for initial enrollment:
Carrier:	Effective Date:
<i>Employer Contribution: employee / dependent(s)</i>	
FSA (include applicable vendor flyers)	
<i>Agency must import pay schedule(s)</i>	
New Business: Renewal:	Wait Period:
Renewing FSA in Ease, push enrollment? (default is no) Yes No	Waive wait period for initial enrollment:
Plan(s) offered: FSA HealthCare FSA DependentCare FSA Limited Purpose Parking/Transit	
FSA Vendor:	Effective Date:
Annual FSA HealthCare/Limited Purpose Employee Contribution (default is current IRS Maximum):	
Annual FSA DependentCare Employee Contribution (default is current IRS Maximum):	
Monthly Parking/Transit Employee Contribution (default is current IRS Maximum):	
Is employer contributing to any Flexible Spending Accounts? (default is no) If so, list details here:	
HSA (include applicable vendor flyers)	
<i>Agency must import pay schedule(s)</i>	
New Business: Renewal:	Wait period:
Renewing HSA in Ease, push enrollment? (default is no) Yes No	Waive wait period for initial enrollment:
HSA Vendor:	Effective Date:
<i>HSA Employer Contribution: employee / family (if left blank, employer contribution default is \$0)</i>	

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Online Enrollment Intake Form (Page 3 of 3)
Worksite

Accident

New Business: Renewal:	Wait Period:
Renew as is in Ease (no rate or benefit changes):	Waive wait period for initial enrollment:
Carrier:	Effective Date:
<i>Employer Contribution: employee / dependent(s)</i>	

Cancer

New Business: Renewal:	Wait Period:
Renew as is in Ease (no rate or benefit changes):	Waive wait period for initial enrollment:
Carrier:	Effective Date:
<i>Employer Contribution: employee / dependent(s)</i>	

Hospital

New Business: Renewal:	Wait Period:
Renew as is in Ease (no rate or benefit changes):	Waive wait period for initial enrollment:
Carrier:	Effective Date:
<i>Employer Contribution: employee / dependent(s)</i>	

Critical Illness

New Business: Renewal:	Wait Period:
Renew as is in Ease (no rate or benefit changes):	Waive wait period for initial enrollment:
Carrier:	Effective Date:
<i>Employer Contribution: employee / dependent(s)</i>	

Other

Notes:
