Flume Health RFP Checklist

To Flume Health partners: use this checklist as a step-by-step requirements guide to get the most competitive proposal for your clients. We use this information to quote stop-loss, build renewal plans, and expedite the process of winning cases

For every plan proposal, provide the following information:

- [ ] **Current Census**
  In Spreadsheet format include: age, DOB, sex, & zip codes. Must identify by employee: plan option selected, and enrollment tier (EE, EE/Sp, etc.)
- [ ] **Current/Expiring Plan**
  Plan design and rates (premium and accumulators) for each plan offered (past 2 years)
- [ ] **Renewal Plan**
  Plan design and rates (same premium and accumulators as above) for each plan offered (2 years if possible)
- [ ] **Large Claimant Information**
  - [ ] List claimants with $25,000 or more in claims (include paid amount), or that exceed 50% of the Specific deductible, if applicable
  - [ ] Any information (in narrative form) about known large claimants, past or present, including diagnosis, prognosis and expected course of treatment
- [ ] **SIC Code**
- [ ] **Client Objectives**
  What are their goals, preferences,and risk tolerance? We use this to design a proposal
- [ ] **Advisor Compensation**
  Current planned advisor compensation (and GA if applicable) compensation as PE/PM

In addition, include either one of the following depending on plan size:

100+ Enrolled

- [ ] **Two Years' Carrier Reporting**
  ALL of the above EXCEPT medical questionnaires
  Two years of carrier reporting that includes:
  - Active members enrolled by month
  - Medical Claims by month
  - Rx claims by month
  - Large Claimant information

OR

Under 100 Enrolled

- [ ] **Medical Questionnaires**
  Include COBRA employees
  IF carrier reporting is available, 2 past years

flume health

Submit all requests for proposals to RFP@flumehealth.com