

Delta Dental Plan of Wisconsin Quote Request Checklist

Use this handy checklist each time you submit a quote request to Delta Dental Plan of Wisconsin to make sure we have the information we need to give you a fast, reliable proposal. Note: Items in *italics* are very useful for quoting, but not required. For questions, please contact Sales at 800.236.3713.

Send RPF requests to: Sales@deltadentalwi.com or FAX 715.343.7623

General

- | | |
|---|---|
| <input type="checkbox"/> Group name, address and phone number | <input type="checkbox"/> Effective date of coverage |
| <input type="checkbox"/> Nature of business | <input type="checkbox"/> Date proposal is needed |
| <input type="checkbox"/> Census information -- include date of birth or age, ZIP codes and coverage type (single/family, or tier) <i>Electronic census data in an Excel spreadsheet is preferred.</i> | <input type="checkbox"/> <i>Name of Agent of Record</i> |
| <input type="checkbox"/> Your name | <input type="checkbox"/> <i>12 months of claims experience and enrollment, if available</i> |

Plan design

- | | |
|---|---|
| <input type="checkbox"/> Fully-insured, self-funded, or both | <input type="checkbox"/> Rate structure requested (single/family, 3 tier, 4-tier) |
| <input type="checkbox"/> Deductibles | <input type="checkbox"/> Employer contribution percentage by coverage type |
| <input type="checkbox"/> Maximums | <input type="checkbox"/> Oral surgery covered under dental only, or in medical too? |
| <input type="checkbox"/> Dependent age limitations | |
| <input type="checkbox"/> Coinsurance percentages | |
| <input type="checkbox"/> Orthodontic coverage, maximum, dependent age limitations | |

Competitive information

- Name of current carrier, if applicable
- Number of years with current carrier, if applicable
- Plan design – if matching an existing plan (co-pays, maximums, deductibles, etc), then appropriate information is required. For full duplication of an existing plan, current group handbook is required
- Current and renewal rates, if known
- Key issues – why you are marketing this group (prospect, rates, service issues, etc.)*