



Appendix A:

Required questions for full-length applications for individual health benefit plans.

1. Are any of the premiums for this policy paid from employer funds specifically for the purchase of insurance or health care expenses such as money from a health reimbursement account or extra wages specifically provided by the employer for the purchase of insurance or health care expenses?

___ Yes ___ No

If you answered "yes", please continue. If you answered "no", you may stop and complete the individual health application.

2. Did the employer offer health insurance coverage to any employee in the six months prior to the date of this application?

___ Yes ___ No

If the answer to question 1 is "yes" and the answer to question 2 is "no", please complete the individual health application.

If the answer to both questions 1 and 2 is "yes," the applicant may not be issued an individual policy with the premiums, or portion thereof, paid or reimbursed by the employer, unless, the employee is part-time (works less than 30 hours per week), seasonal, or a temporary employee not eligible for health insurance.

Signed: _____

Date: _____