

Aetna® 2-100 new sale notification

Group information							
Legal business name			DBA name (if applicable)				
Effective date	Federal ta	ax ID		Number of eligible employees			
Street address		City		State	ZIP		
Company contact name	Compan	Company contact phone C			Company contact email		
Enrollment platform-employee NAVIGATOR Yes No		Will the group offer a Joint Venture (JV) plan? Yes No If yes, which JV?					
Sold products: Medical (Aetna Funding Advantage SM plan) Medical fully-insured 51-100 Dental Vision							
Agency 1 information							
Agency name			Selling agent name				
Street address	City	<u>I</u>		State	ZIP		
Broker tax ID/NPN	Percent commission split (Aetna Funding Advantage only)						
Admin contact	Admin contact email - or broker email if no admin						
Agency 2 information (if applicable)							
Agency name	Selling agent name						
Street address		City			State	ZIP	
Broker tax ID/NPN		Percent commission split (Aetna Funding Advantage only)					
Admin contact		Admin contact email - or broker email if no admin					
General agent information (if applicable)							
General agency name			Selling agent name				
Street address		City			State	ZIP	
GA tax ID							
Admin contact			Admin contact email				
Aetnainformation							
Aetna sales representative			Aetna sales support contact				