



## To obtain a TransConnect illustration, please provide the following:

Group Information	
✓	1. Census with date of birth
✓	2. Coverage Type:      E = Employee      S = Spouse      C = EE+child      F = Family
✓	3. Payroll Frequency
✓	4. Employer Contribution Percentage or Dollar Amount
Medical Information	
✓	1. Current Rates (if available)
✓	2. Renewal Rates (if available)
✓	3. Current Plan Design
✓	4. Alternate Quotes & Plan Designs