



● Total Benefit Solutions

How to Request an Aetna AFA Quote

Send your RFP request to Utah@tbsmga.com along with the following information:

- Client Name
- Address
- SIC Code (or nature of business)
- Effective Date
- Anyone on COBRA?
- Current Plan Designs
- Current Rates & Renewal Rates*

Full Dependent Level Census

- First/Last Names of Subscribers
- First/Last Names of Dependents
- Dates of Birth
- Gender
- Zip Code
- Enrollment Tier (EE only, EE+CH, EE+SP or family)
- Note if waiving coverage or not eligible

*If currently age rated then most recent prior bill is needed

● **Contact Us**



1-800-514-4850



Utah@tbsmga.com



www.tbsmga.com