

HOW TO USE THE TRANSMITTAL FORM:

- Column 1: Enter the name(s) of subscriber(s) you are Adding, Changing, or Deleting. Then enter A (Add), C (Change) or D (Delete), as appropriate, to the right of the name. You must attach a properly completed and authorized Enrollment Form for each addition and termination listed.
- Column 2: Enter the subscriber ID number (Social Security No.).
- Column 3: Enter the effective date of the Add, Change or Delete.
- Column 4: Enter the amount of money billed for new members only (current month).
- Column 5: Enter the new rate and the old rate if changing a tier code. Possible tier codes are single S, husband and wife HW, parent and child PC, parent and children PN, and family F; use tier codes applicable to your group.
- Column 6: Enter the amount billed for terminated members.
- Column 7: Enter the amount being added to or deducted from your bill for retro adds or terminations. Exclude current month.
- Comments: If you checked New Rate or Old Rate (Column 5), please give reason for the change in rate. For example, dropped a dependent, added a dependent, etc.

Overview:

- Send a Transmittal form whenever a change is necessary. **Please retain pink copy for your records.**
- Make all changes on the Transmittal Form, do not use your premium invoice.
- If you have any questions about your bill, contact your Marketing Representative.
- There is a place for the COBRA Group No. at the top of the form.
- Transmittals can be processed quickly when all the information is clearly indicated in the appropriate spaces and boxes.
- Transmittals should be sent directly to the Enrollment Department at the address printed at the top of the form.



SUBMIT TO:
 Keystone Health Plan East
 P.O. Box 8240
 Philadelphia, PA 19101-8240

TRANSMITTAL FORM
(Please Print)

Group No.	Report For Month Of
COBRA Group No.	
Group Name	Tel. No.
Group Address	
Authorized By	Date

1. NAME A=Add C=Changes D=Deletes	2. SUBSCRIBER ID NO.	3. EFFECTIVE DATE	4. ADDITIONS	5. CHANGE IN RATE		6. DELETES	7. RETROACTIVE ADJUSTMENTS		COMMENTS
			(NEW MEMBER ONLY)	NEW	OLD	TERMINATES	ADDS+ (DUE KHPE)	DEDUCT-	
			\$	\$	\$	\$	\$	\$	
CURRENT MONTH PREMIUM			\$						
TOTALS			\$	\$	\$	\$	\$	\$	
			+	+	-	-	+	-	= NET PAY

Send To Address Above, Return White and Yellow Copies, Retain Pink Copy For Your Records.
(SEE INSTRUCTIONS ON REVERSE SIDE.)