

Colorado Medical Carrier 411

SMALL GROUP 1-50	ANTHEM Employee Elect	ANTHEM BeneFits	PACIFICARE	AETNA	KAISER
PARTICIPATION	75% of net eligible employees.	60% of net eligible employees.	75% of net eligible employees.	70% of net eligible employees.	75% of the employer-determined eligible employees without any other health coverage must enroll with KP, when KP is the sole carrier.
CONTRIBUTION	50% of lowest single rate or \$125.00	25% or \$50/employee/month	50% toward the employee only premium	PICK-A-PLAN 3 50% of the lowest single rate or \$120 VALUE-PICK 25% of the lowest single rate of \$50	At least 50% of employee premium of the lowest cost plan must be paid by employer. If a group uses a dollar amount as minimum contribution, the following phrase must be included on Group Application "\$____ or 50% of the Employee Only Rate, whichever is greater." An employer must continue to meet the 50% requirement as long as the group offers Kaiser Permanente coverage to its employees.
MULTI-COVERAGE DISCOUNT (ancillary)	6% Discount off 25K life and dental 2-50. 1% discount off medical if dual or triple option.	6% Discount off 25K life and dental 2-50. 1% discount off medical if dual or triple option.	NONE	NONE	NONE
COMMON LAW SPOUSE FORM	Yes	Yes	No	May Be Required	Included in Employee Application.
DOMESTIC PARTNERS	No	No	No	No	No

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ELIGIBLE WAIVERS	<p>Legitimate waivers include:</p> <ul style="list-style-type: none"> ➤ Other group coverage <u>that includes the carrier name and ID #.</u> ➤ Individual coverage if obtained prior to being eligible for a group plan provided by this employer ➤ COBRA or State Continuation ➤ Medicare / Medicaid ➤ State Health Risk Pool 	<p>Legitimate waivers include:</p> <ul style="list-style-type: none"> ➤ Other group coverage <u>that includes the carrier name and ID #.</u> ➤ Individual coverage if obtained prior to being eligible for a group plan provided by this employer ➤ COBRA or State Continuation ➤ Medicare / Medicaid ➤ State Health Risk Pool 	<p>Legitimate waivers include:</p> <ul style="list-style-type: none"> ➤ Other group coverage <u>that includes the carrier name and ID #.</u> ➤ Individual coverage if obtained prior to being eligible for a group plan provided by this employer ➤ COBRA or State Continuation ➤ Medicare / Medicaid ➤ State Health Risk Pool 	<p>Legitimate waivers include:</p> <ul style="list-style-type: none"> ➤ Other group coverage <u>that includes the carrier name and ID #.</u> ➤ Individual coverage if obtained prior to being eligible for a group plan provided by this employer ➤ COBRA or State Continuation ➤ Medicare / Medicaid ➤ State Health Risk Pool 	<ul style="list-style-type: none"> • Waivers need to be submitted for all eligible employees if waiving coverage, including reason why declining coverage. • All waivers need to be signed and dated by employee.
DEPENDENT WAIVERS	<ul style="list-style-type: none"> • Waivers need to be submitted for spouses and dependents of all eligible employees who are waiving coverage, including reason why declining coverage. • All waivers need to be signed and dated by employee. 	<ul style="list-style-type: none"> • Waivers need to be submitted for spouses and dependents of all eligible employees who are waiving coverage, including reason why declining coverage. • All waivers need to be signed and dated by employee. 	<ul style="list-style-type: none"> • Waivers need to be submitted for spouses and dependents of all eligible employees who are waiving coverage, including reason why declining coverage. • All waivers need to be signed and dated by employee. 	<ul style="list-style-type: none"> • Waivers need to be submitted for spouses and dependents of all eligible employees who are waiving coverage, including reason why declining coverage. • All waivers need to be signed and dated by employee. 	<ul style="list-style-type: none"> • Waivers need to be submitted for spouses and dependents of all eligible employees who are waiving coverage, including reason why declining coverage. • All waivers need to be signed and dated by employee.
RATE GUARANTEE	12 months	12 months	12 months	12 months	12 months
EFFECTIVE DATES	1st	1 st	1st	1st OR 15TH Groups that take the 15th will get the prior month's rates and will be able to keep the 15th as their renewal	1st
DEPENDENT ELIGIBILITY Full-Time Students Overage Dependents	<p>Disable dependents are covered at any age Dependent children between ages of 19-24 who are full-time students (Verification form required) Dependent children between the ages of 19-25 who are not full-time students and financially dependent on the subscriber or have the same legal residence as the subscriber (Verification form needed)</p>	<p>Disable dependents are covered at any age Dependent children between ages of 19-24 who are full-time students (Verification form required) Dependent children between the ages of 19-25 who are not full-time students and financially dependent on the subscriber or have the same legal residence as the subscriber (Verification form needed)</p>	<p>Disable dependents are covered at any age Dependent children between ages of 19-24 who are full-time students (Verification form required) Dependent children between the ages of 19-25 who are not full-time students and financially dependent on the subscriber or have the same legal residence as the subscriber (Verification form needed)</p>	<p>Disable dependents are covered at any age Dependent children between ages of 19-24 who are full-time students (Verification form required) Dependent children between the ages of 19-25 who are not full-time students and financially dependent on the subscriber or have the same legal residence as the subscriber (Verification form may be required)</p>	<p>Disable dependents are covered at any age Dependent children between ages of 19-24 who are full-time students (Verification form required) Dependent children between the ages of 19-25 who are not full-time students and financially dependent on the subscriber or have the same legal residence as the subscriber (Verification form needed/additional cost may apply)</p> <p>Kaiser loads premium 5%</p>

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WAIVING WAITING PERIOD -Initial Enrollment -New Hire	The employer may waive the waiting period for all new hires at the initial group enrollment only if the group did not have prior coverage within the last 90 days. Small employer groups of 1-50 are not guaranteed an effective date . No, for new hires	The employer may waive the waiting period for all new hires at the initial group enrollment only if the group did not have prior coverage within the last 90 days. Small employer groups of 1-50 are not guaranteed an effective date. No, for new hires	At initial submission of the group the benefit waiting period may be waived upon the employer's request. This should be checked on the Employer application. No, for new hires	At initial submission of the group the benefit waiting period may be waived upon the employer's request. This should be checked on the Employer application. No, for new hires	At initial submission of the group the benefit waiting period may be waived upon the employer's request. This should be checked on the Employer application. No, for new hires
MAXIMUM WAITING PERIOD	6 month max	6 month max	Up to 12 monthsr	6 month max	None
AGE BRACKET PREMIUM CHANGE	At groups renewal	At groups renewal	At groups renewal	At groups renewal	At groups renewal
RETIREEES	Retirees are eligible for Medicare supplement products only. They cannot be on the small group plan.	Retirees are eligible for Medicare supplement products only. They cannot be on the small group plan.	Retirees are eligible for Medicare supplement products only. They cannot be on the small group plan.	Retiree coverage is not available.	Can be covered on the health plan if the company has a written policy in place.
RATES FOR MEDICARE	No Premium Discount	No Premium Discount	Will discount on groups under 20	Will discount on groups under 20	Will discount on groups under 20
LENGTH OF TIME SIGNATURES ARE VALID	60 days	60 days	60 days	60 days	60 days
LIFE INSURANCE	Not required. Discount is available when packaged with medical.	Not required. Discount is available when packaged with medical.	Not required	Not required	Not required
24 HOUR COVERAGE	If the owner is a contract holder and waives workers comp Anthem will pay as primary.	If the owner is a contract holder and waives workers comp Anthem will pay as primary.	Individuals not eligible for workers compensation (owners and officers) PacifiCare will pay as primary.	If a small group does not have Worker's Compensation Insurance Aetna pays as primary for owners and officers.	For owners and officers Kaiser will pay as primary.

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<p style="text-align: center;">START-UP BUSINESS REQUIREMENTS</p>	<p>The group must establish ER/EE relationship – submit first payroll or UTR. For BG1, at least 1 yr.</p> <p>All groups that have been in business for three or more months should have a quarterly wage and tax statement. In the situation that they do not have the prior quarters quarterly wage and tax statement and when they expect to file one. This statement over company letterhead signed by the employer should be submitted along with a minimum of two weeks work of payroll records. The payroll records should reflect the names of all employees, hours worked, taxes withheld, check number and wages earned.</p>	<p>The group must establish ER/EE relationship – submit first payroll or UTR. For BG1, at least 1 yr.</p> <p>All groups that have been in business for three or more months should have a quarterly wage and tax statement. In the situation that they do not have the prior quarters quarterly wage and tax statement and when they expect to file one. This statement over company letterhead signed by the employer should be submitted along with a minimum of two weeks work of payroll records. The payroll records should reflect the names of all employees, hours worked, taxes withheld, check number and wages earned.</p>	<p>Requires 6 weeks of payroll documentation. Articles of organization are also required.</p>	<p>There is no requirement for a minimum amount of time a new group must be in business however a newly formed business (groups in business less than three months that have not filed a quarterly wage and tax statement) must provide:</p> <ul style="list-style-type: none"> • Business License (not a professional license). If not available, provide a copy of the Partnership Agreement or Articles of Organization; and Employer Identification Number/Federal Tax I.D. Number; and Quarterly Wage and Tax statement. If not available, when will one be filed?; and The most recent two consecutive weeks worth of payroll records which includes hours worked, taxes withheld, check number and wages earned; or a letter from Certified Public Accountant listing the names of all employees (full and part-time), the number of hours worked each week, dates of hire and weekly salary. 	<p>Date ER first generated taxable income will be used as start date for the business. Must be in business for min. of 6 weeks prior to submitting group for coverage. Must provide: Articles of Inc., Articles of Organization, LLC papers, Partnership Agreements, whichever is relevant to business type.</p> <p><u>Proof of employment:</u></p> <ul style="list-style-type: none"> -Minimum of 6 weeks payroll for current employees. -New Hires not on payroll yet: Completed W-4 to include ER information and EIN on form, along with projected earnings for each new hire. Projected number of EEs group estimates will be "average number of EEs they can reasonably expect to employ during the coming year." 10-16-105(12) <p><u>Proof of business:</u></p> <p>Quarterly Wage & Tax or Federal/IRS related documents such as Form 941, if available.</p> <p>-If quarterly wage and tax document is unavailable, then provide the following items:</p> <ul style="list-style-type: none"> •Application for Federal EIN. •Financial Statements, verified by CPA, which includes Balance Sheet, Income Statement and a Cash Flow Statement (Cash Flow Statement is optional and not required for group approval). <p>For owners with no payroll and have met the requirement of being in business for a min. of 6 weeks, provide ALL of the below information: Proof of ownership (e.g. articles filed with Secretary of State, or tax filing, etc.).</p> <ul style="list-style-type: none"> + Business bank statements. + Sales tax license, if applicable. + Copy of draws for a min. of 6 weeks (front and back of checks).

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<p>MULTI LOCATION -Available? -Rated</p>	<p>Yes, if the majority of eligible employees are in CO. Only the PPO plans are available out of state.</p> <p>Rated off the home office location. Only PPO plans available out of CO.</p> <p>No more than 50% of the eligible employee can reside out of state.</p>	<p>Yes, if the majority of eligible employees are in CO. Only the PPO plans are available out of state.</p> <p>Rated off the home office location. Only PPO plans available out of CO.</p> <p>No more than 50% of the eligible employee can reside out of state.</p>	<p>Yes, if the majority of eligible employees are in CO.</p> <p>PacifiCare has their own network in CO, AZ, CA, NV, TX, OK, OR, WA If greater than 10% outside one of these core states, the group can pick from 3 plans. Basic, Standard or 70/50 2000. If less than 10% outside these core states, then group can have any plan.</p>	<p>Yes, Aetna does not have a rule that limits the number of employee that are out of state. However, Small Group Reform (SGR) or dominant state is based on the work location containing more than 50% of the eligible lives. If there is no state where more than 50% of the eligibles are located (work location), the dominant state would standardly be the state where the employer group is incorporated and where they file their taxes</p> <p>All out of state employees that live/ work in an out of state network area will receive in-state rates and products (inclusive of any required Exterritorial Benefits. All out of state employees that do not live/work in an out of state network area will receive the in-state Standard Indemnity Product (inclusive of any required Exterritorial Benefits).</p> <p>Use the same apps for out of state indemnity plans.</p>	<p>If a small employer has employees in more than one state, with no state containing a numerical majority of its employees, and if the primary business location of the small employer is in Colorado, then the employer is eligible to apply for small group coverage.</p> <ul style="list-style-type: none"> • If a small employer has employees in more than one state and the majority of its employees are employed in Colorado, whether the primary business location is in Colorado or not, then the employer is eligible to apply for small group coverage. • If majority of employees are located outside Colorado, or no state contains the majority and the primary business location is outside of Colorado, then the employer is not eligible to apply for small group coverage. Groups with more than one office may have rates that vary depending on location of business office. • In the Denver/Boulder service area, rates would be the same. • Office in Denver and one in Colorado Springs, rates would be different. • Office in Denver and one outside the service area; the office outside the area would need OOA rates.

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DEDUCTIBLE -Credit -Carryover	Anthem provides credit for deductibles met under the prior group health plan for the same calendar year. EOB required to receive credit. No 4 th QTR carry over.	Anthem provides credit for deductibles met under the prior group health plan for the same calendar year. EOB required to receive credit. No 4 th QTR carry over.	Available on Signature Options PPO and HSA for the same calendar year products but NOT on the Signature Freedom plans. No 4 th QTR carry over.	For new group submissions, Aetna provides credit for deductibles met under the prior group health plan for the same calendar year. EOB required to receive credit. Member must fax it to claims dept. No 4 th QTR carry over.	Deductible takeover is given when groups/members are moving from a PPO to a POS plan for the same calendar year. EOB required for this credit within 90 days. Excludes Pharmacy. No 4 th QTR carry over.
NETWORKS IN CO AND NATIONALLY	Anthem proprietary network in CO and nationally.	Anthem proprietary network in CO and nationally.	PacifiCare/UHC proprietary network in CO and 7 other states. PacifiCare uses PHCS and UHC's network nationally.	Aetna proprietary network along the front range and mesa county in CO. Aetna owns a proprietary Sloan's Lake network outside the Aetna proprietary network. Anthem has a National network in all states except the following: AK, HI, ID, IN, ME, MT, NE, PR, RI SD, WY (These state would need an indemnity product)	In-network – Colorado Permanente Physicians Nationally – PHCS (excluding Boulder)
AVAILABLE NETWORKS WHEN TRAVELING OUT OF STATE	The Blue Card Network. Member should call customer service number on ID card or check for providers online.	The Blue Card Network. Member should call customer service number on ID card or check for providers online.	PacifiCare Network or PHCS. Member should call customer service number on ID card or check for providers online.	Aetna Network. Member should call customer service number on ID card or check for providers online.	Urgent/Emergent care outside of the Kaiser service area is paid as billed – less the members applicable copay
MULTI OPTION -Age Banded Rates -Composite Rates	Employee Elect is offered down to 2 enrolled. 12 plans to select from. Excludes Basic and Standard plans. Age banded or composite rates on groups of 10 enrolled employees. But case is re-composited after the final enrollment based on enrollment in each selected plan.	5 Plan options available. Employers may offer one plan, a mix of plans or all the BeneFits health plans along with dental, vision and life coverage HMO Select uses Centura Hospitals Only Age banded or composite rates on groups of 10 enrolled employees. But case is re-composited after the final enrollment based on enrollment in each selected plan.	10 enrolled employees may combine up to 4 PPO/HDHP/SDHP plans. No Basic Standard HMO or Association plans can be combined. Only age banded rates on multi option groups.	5 enrolled employees may select Pick a Plan 3. (Excludes Basic and Standard). 1-4 enrolled employees must select one plan. Group can combine PPO H.S.A. and Value plans. If you have value plans in the mix, the Pick-a-Plan 3 rules for participation and contribution apply. If you have Value-Pick plans only, the rule for Value-Pick apply. Age banded or composite rates on group of 10 enrolled employees. Does not recalculate based on actual enrollment. Entire census quoted in all plans.	Available as specified is Plan Combinations worksheet Age banded or composite rates are available on groups of 10 enrolled employees. Sole carrier in groups 2 – 20. When a new group purchases a dual option for their employees, all plans must be offered to all eligible employees. A group cannot carve out and offer one plan to some and not to everyone.

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CARVE OUTS	<p>Class carve-outs such as management only or salary vs. non-salary may be considered with underwriting approval. A list of the job classifications the employer wants to insure will be required with the initial group submission. All employees must be accounted for, and those in the carved-out classification must be identified. A minimum of 2 eligible employees are required in the carve-out class. These carve-out groups are subject to underwriting approval and may be declined if they do not meet Anthem Blue Cross and Blue Shield's underwriting criteria.</p>	<p>Class carve-outs such as management only or salary vs. non-salary may be considered with underwriting approval. A list of the job classifications the employer wants to insure will be required with the initial group submission. All employees must be accounted for, and those in the carved-out classification must be identified. A minimum of 2 eligible employees are required in the carve-out class. These carve-out groups are subject to underwriting approval and may be declined if they do not meet Anthem Blue Cross and Blue Shield's underwriting criteria.</p>	<p>Class carve-outs such as management only or salary vs. non-salary may be considered with underwriting approval. A list of the job classifications the employer wants to insure will be required with the initial group submission. All employees must be accounted for, and those in the carved-out classification must be identified. These carve-out groups are subject to underwriting approval and may be declined if they do not meet PacificCare's underwriting criteria.</p>	<p>Carve outs/excluded classes are allowed on groups that include Medical. The employer must provide the following:</p> <ul style="list-style-type: none"> • A copy of the UTR with the job titles next to each employee, signed and dated by the employer; or • A letter from their attorney with the job titles and number of hours worked; or • List of the employees and their job titles on the application or on a separate piece of paper signed and dated by the employer. 	<p>Carve outs of employee classes require groups to show all eligible employees, even though some will be excluded. Total 24+ hour eligible employees cannot exceed 50 in order to qualify under the small group regulations.</p> <p>Groups will need to identify on Quarterly Wage & Tax documentation all eligible employees, along with those who are included in the carve out and enrolling or waiving.</p>
1099 EMPLOYEES	<p>Persons compensated on a 1099 are eligible for coverage. No more than 50% of the group employees may be 1099. Employer must have at least 2 taxed employees and contribute the same amount for the 1099 employees. A complete list of all 1099 employees must be included with the new group submission. Same eligibility and contribution guidelines must apply to all 1099 employees</p>	<p>Persons compensated on a 1099 are eligible for coverage. No more than 50% of the group employees may be 1099. Employer must have at least 2 taxed employees and contribute the same amount for the 1099 employees. A complete list of all 1099 employees must be included with the new group submission. Same eligibility and contribution guidelines must apply to all 1099 employees</p>	<p>Must have at least 2 regular permanent employees on the UTR. No more than 15% of the group can consist of 1099 employee. 1099 employee must have been employed at the group for at least 1 year. 100% of the 1099 employee's income must be derived from the employer. Employer must complete the employee eligibility verification contractor form and contribute the same contribution as the regular full time employees.</p>	<p>Must have 2 or more full time W2 employees on payroll, or they will be treated as a business group of one. Any 1099 employee (contracted or commissioned) must complete a 1099 contractor form. Form must be signed by both the employer and the employee.</p> <p>Group cannot have more than 25% of total eligible employees 1099.</p>	Not allowed

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HUSBAND & WIFE WHO WORK FOR THE SAME COMPANY	<p>If a husband and wife both work for the same employer, they may apply separately as employees, or one may be a dependent on the other's coverage. The children may apply as dependents of only one employee not both. The contract holder under a single contract will be the employee whose date of birth falls first in the year.</p> <p>This is not dependent on group size and a waiver is not needed for the employee enrolling as a dependent because we can verify the enrollment.</p>	<p>If a husband and wife both work for the same employer, they may apply separately as employees, or one may be a dependent on the other's coverage. The children may apply as dependents of only one employee not both. The contract holder under a single contract will be the employee whose date of birth falls first in the year.</p> <p>This is not dependent on group size and a waiver is not needed for the employee enrolling as a dependent because we can verify the enrollment.</p>	<p>Husband and Wives can enroll together or separately.</p>	<p>Husband and Wife (both eligible employees) can enroll together or separately. When enrolling together a waiver form must be completed by the dependent spouse not enrolling as an employee.</p>	<p>Husband and wife groups must provide proof of separate income from their business in the form of tax filing documents. DOI states small group carrier can request up to 2 quarters of earnings to validate husband and wife groups.</p> <p>2 employees, who are married, can either submit two applications, or one can submit an application with the spouse as a dependent. The dependent spouse must complete and submit a waiver.</p>
2 LIFE GROUP WITH 1 ELIGIBLE WAIVER	<p>If both employees can prove eligibility and there is other creditable coverage for the employee waiving.</p>	<p>If both employees can prove eligibility and there is other creditable coverage for the employee waiving.</p>	<p>If both employees can prove eligibility and there is other creditable coverage for the employee waiving.</p>	<p>If both employees can prove eligibility and there is other creditable coverage for the employee waiving.</p>	<p>If both employees can prove eligibility and there is other creditable coverage for the employee waiving.</p>
1 W-2 EMPLOYEE ON THE UITR	<p>If the UITR only has 1 employee and the owner is not on UITR but taking income and you want to prove a group of 2 you must submit the last 2 UITR's and tax return showing owner's income.</p>	<p>If the UITR only has 1 employee and the owner is not on UITR but taking income and you want to prove a group of 2 you must submit the last 2 UITR's and tax return showing owner's income.</p>	<p>If the UITR only has 1 employee and the owner is not on UITR but taking income and you want to prove a group of 2 you must submit the last 2 UITR's and tax return showing owner's income..</p>	<p>If the UITR only has 1 employee and the owner is not on UITR but taking income and you want to prove a group of 2 you must submit the last 2 UITR's and tax return showing owner's income..</p>	<p>W-2 and related tax information show the owners are receiving taxable income from this business (draws or K-1's that ties them back to the company). The documentation needs to provide us with a minimum of 3 weeks of income.</p>

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