

HOSPITALITY HEALTH INSURANCE

BROKER RESOURCE AND UNDERWRITING GUIDE

Updated January 2026

Please note that this guide is for informational purposes only. It is not to be construed as an insurance contract, booklet, or a certificate of insurance. The actual terms of your group plan can be found in your detailed plan documents which you receive from the Insurance Carrier(s).

We are here to support you, so please let us know if there is anything we can do to help. We look forward to working with you.

**Sincerely,
The Total Benefit Solutions Team**

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Visit the HHI Website [HERE](#)

You can find all summaries and HHI forms [HERE](#)

HOSPITALITY HEALTH INSURANCE TRUST BENEFITS BUFFET 2026



H.H.I. Eligibility

- Restaurants, bars, hotels, travel, attractions, entertainment, recreation, and more!
- 2+ enrolled employees
- Groups headquartered in Washington state
- 50% employee participation and 50% employer contribution
- Triple Choice with 10+ enrolled employees
- Must be an active WHA member at point of sale

Hospitality Health Insurance Trust is the exclusive benefits trust for employers and employees who work in the hospitality industry. Plans are specifically crafted to meet the unique needs of hospitality employers.

MEDICAL

Kaiser

17 Plans Available

- 6 PPO Plans
- 8 HMO Plans
- 3 Virtual Plus Plans
- Kaiser Virtual Coverage on all plans
 - 24/7 Care Chat & advice line
 - Video and Phone visits
 - Email for non-urgent issues
- Kaiser Washington Network
 - Core and PPO Coverage Area
 - Access PPO Plans also have access to the First Choice and First Health network

Aetna

10 Plans Available

- 10 Standard PPO Plans
- All non-HDHP options have Copay for office visits
- Aetna Hospitality Vertical Benefits
- Aetna Concierge Program
- Aetna Open Choice PPO Network

ADDITIONAL BENEFITS

Dental

- Ameritas Dental
 - 8 Plans Available
- Willamette Dental
 - 2 Plans Available

Vision

EyeMed
VSP
No Network Options

Other

ComPsych EAP
Teladoc
TransAmerica Life

For additional information, please email hhi@tbsmga.com



HHI Contacts

Tatiana Schnadenberg

HHI Account Manager

 (425) 354-3618

 Tatianas@tbsmga.com

Total Benefit Solutions

General

 (800) 514-4850

 HHI@tbsmga.com

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BROKER CONTACT AND RESOURCE SHEET



Broker and Employer Contact: 206-456-9940 or hhi@vimly.com

Vimly is the Third Party Administrator (TPA) for HHI. As TPA, they administer all billing and eligibility for the Trust.

Vimly owns the SIMON platform, which is where Producers/Brokers and Employers go to manage their group(s) billing and eligibility.

****Please note that Vimly can only provide information to the current broker and approved group admins for which they have a signed SIMON authorization form on file. To add access, use this form: [SIMON Access Form](#)**

Billing and Enrollment - Inquires can be sent to hhi@vimly.com. Please copy in hhi@tbsmga.com.

Online Portal - To add or remove a SIMON User at any time, use the SIMON Access Form and return to hhi@vimly.com

COBRA - Vimly also will handle any Cobra inquiries. As HHI is a large group, this group will be COBRA eligible. They can be reached at cobra@vimly.com.

CARRIERS



Broker and Employer Contact: 866-899-4378, option 3 or selectanswerteamwest@aetna.com

Member Services and Claim Specific Questions: Call number on back of ID card or **877-204-9186**

[Summary Aetna Plans](#)

[Aetna Provider Finder](#)

[Aetna Broker Site](#)

[Aetna Employer Site](#)

[Aetna Member Login](#)

[Apple Aetna App Download](#)

[Google Aetna App Download](#)



KAISER PERMANENTE®

Broker and Employer Contact: 855-327-0507 or wa.kp.ebs@kp.org

Member Services: Benefits questions, claims status, ID cards, provider questions, etc, **888-901-4636**

[Summary Kaiser Plans](#)

[Kaiser Provider Finder](#) - For Out Of Washington Kaiser care, [find a provider here](#)

[Kaiser Broker Site](#)

[Kaiser Employer Site](#)

[Kaiser Member Login](#)

[Kaiser Ways To Get Care](#) – Virtual Access

[Apple Kaiser App Download](#)

[Google Kaiser App Download](#)



Broker and Employer Contact: Donna Kozakiewics, **800-659-2223 ext 82091** or

dkozakiewics@ameritas.com

Member Contact: 800-487-5553

[Vision Plans Summary](#)

[Dental Plans Summary](#)

[English VSP Vision Claim Form](#)

[English EyeMed Vision Claim Form](#)

[English Ameritas Vision Claim Form](#)

[Spanish Ameritas Vision Claim Form](#)

[English Dental Claim Form](#)

[Spanish Dental Claim Form](#)

[Ameritas Provider Finder](#)

[Ameritas Broker Site](#)

[Ameritas Member Login](#)



Broker and Employer Contact: Kim Bolden, **360-790-5618** or kbolden@willamettedental.com

Member Contact: 855-433-6825

[Willamette Dental Low Option Summary](#)

[Willamette Dental High Option Summary](#)



Broker and Employer Contact: Kristi Jackson, **312-983-3641** or kjackson@compsych.com

Member Contact: **844-837-9296**

[ComPsych Summary](#)

[Online ComPsych Access – Web ID: HIHIT](#)

[Apple ComPsych App Download](#)

[Google ComPsych App Download](#)



Broker and Member Contact: **866-509-8954** or clientservices@teladoc.com

[Teladoc Summary](#)

[Online Teladoc Access](#)

[Apple Teladoc App Download](#)

[Google Teladoc App Download](#)



Broker and Employer Contact: **800-400-3042, Option 3**

Member Contact: Customer Service at **800-251-7254**

[Death Claim Form](#)

[Life Benefit Summary](#)

New Group Submission Checklist

Email Completed Paperwork to: HHI@tbsmga.com and your Account Executive

All pages should be completed and signed by the plan sponsor and broker. Ensuring all fields are complete will speed up the process.

☐ **Employee Enrollment Census** - Needed first to run a final sold quote

- All employee and dependent information should be provided including physical home address (PO box can only be used as mailing address).
- Waiver forms should be indicated on the census.
- COBRA eligible and active participants must submit an enrollment form to enroll along with all other active employees. Hospitality Health Insurance reserves the right to deny coverage due to late submissions.
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☐ **Hospitality Health Insurance Participation Agreement**

☐ **SIMON Access Form**

- This will list of anyone you want to have access to billing and eligibility in SIMON. Anyone on the PA Form will also get an invite for SIMON

☐ **Notice of Late Submission Form** (if applicable)

- All paperwork should be submitted by the 20th of the month prior to the requested effective date for Kaiser.
This date is the 15th of the month for Aetna. Any pending item(s) or document(s) submitted after this deadline; late submission form will be required. This form should be signed by both plan sponsor and broker.

☐ **Signed Final Rates Page**

- To confirm the sold rates and plan election, please submit the plan sponsor signature page for each line of coverage (medical, and ancillary) and plans elected should be marked with an X.

☐ **Aetna Additional Group Requirements**

- **Aetna Initial Enrollment Spreadsheet**
- **Aetna ARI Form**

☐ **Prior Carrier Invoice** (if applicable)

☐ **Prior Dental Benefits Summary** (if applicable)

- Required to receive credit for major and orthodontic coverage (if elected).

If you're a new broker to HHI, please ensure you send the following items:

- In order to pay commissions, you will need to be appointed with the carriers your group is accepting.
- We will need a [State of WA W-9](#), current E & O Policy information, State license where policies will be sold (i.e. WA), [Vimly ACH Form](#) .

Implementation takes about **2-4 weeks**. Please ensure all forms and documents are complete before sending to TBS to ensure efficacy and accuracy. Send all inquiries to hhI@tbsmga.com.

****Please note that all required documents must be signed by the same group representative.***

HHI UNDERWRITING GUIDE

WHAT IS NEEDED TO QUOTE A GROUP

Send info to HHI@tbsmga.com. Quoting also available via Wired Quote.

If group is less than 100 lives (total):

- [RFP Form](#) - with current and renewal medical rates
- [Census](#)
- Current and Renewal Plan Summaries

If group is 100 or more lives:

- All of above
- Claims information

WHAT IS NEEDED TO INSTALL A GROUP

- See page 8 of this guide

PARTICIPATION REQUIREMENTS

- At least 2 enrollees at initial installation and must be at least 50% of eligible employees. At least 1 required at renewal to keep plans through HHI.
- Must be a member of Washington Hospitality Association by point of sale

EMPLOYER CONTRIBUTION

HHI requires 50% employer contribution on the least expensive EE only tier.

EMPLOYER ELIGIBILITY

- Coverage is available to current Employer members of the Washington Hospitality Association and Employer must be domiciled (headquartered) in Washington state.
- At least 50% of an employer's eligible employees must enroll in the plan to establish an employer account in the Trust, excluding those with a valid waiver.
- At implementation, groups must have at least 2 eligible employees. At least one enrollee required at renewal.
- There is Kaiser coverage for all counties in Washington except for groups domiciled in Clark or Cowlitz counties. There is, however, visiting member coverage in Clark and Cowlitz counties, and California.
- There is Aetna coverage for all counties in Washington (where the HHI group must be domiciled). There is no visiting member coverages in other states.

HHI UNDERWRITING GUIDE

EMPLOYEE ELIGIBILITY

Each employer establishment determines if part-time EEs are eligible for coverage. PT employment is less than 30 hours/week. Full-time is 30+ hours/week and benefits must be offered. Ancillary lines can be offered to Part-time EEs at the Employer's discretion.

Individuals not eligible for coverage include: employees not in a class listed in the Participation Agreement, retirees, 1099 contractors, temporary / seasonal / substitute or uncompensated employees, employees making less than equivalent to minimum wage, volunteers, inactive owners, shareholders, officers or managing members who are not active, investors, or silent partners.

DEPENDENT ELIGIBILITY

The employee, their legal spouse, including state registered domestic partners as required by Washington State law, and/or children up to the age of 26 are eligible to enroll. Grandchildren are eligible if court ordered (copy of order must be submitted). There is no age limit for dependents who are incapable of self-sustaining employment by reason of developmental disability or physical handicap and (2) chiefly dependent upon the employee or member for support and maintenance. When the child works for the same company as the parent, the child may enroll separately as an employee or as a dependent under the parent's plan. Employee must enroll for dependents to enroll.

Domestic partners who are not registered with the State of Washington can also be eligible dependents under the Trust, if the employer elects to include them, by marking "yes" on the domestic partner election option on the Participation Agreement.

OUT OF STATE EMPLOYEES

No more than 20% of eligible enrollees can live out of the Kaiser service area to have Kaiser. No more than 50% of eligible enrollees can live out of the State of Washington for Aetna.

HHI UNDERWRITING GUIDE

EFFECTIVE DATE & NEW BUSINESS SUBMISSIONS DEADLINE

Effective date will always be the 1st of the month. The effective date requested by the employer may be up to 60 days in advance. **All plans in HHI renew January 1**, regardless of implementation date.

Deadline for New Business paperwork for Aetna is the 15th of the month prior to the groups effective date. All other carriers have a deadline of the 20th. Allow 1 to 2 extra weeks for processing during Q4, our busiest time.

CARVE OUTS

Management carve-outs are allowed via classification. Please speak with your Account Executive to make sure your group qualifies.

BENEFIT WAITING PERIOD (BWP)

The BWP, sometimes known as the probationary period, may be the:

- first of the month following date of hire
- first of the month following 30 days
- first of the month following 60 days

The waiting period may be waived at initial installation, per employer's request and if checked on the PA. Up to 3 classes of employees with unique waiting periods are allowed.

CHANGES IN OWNERSHIP

When an in-force group has been sold to new owners, the new owners must be a member of WHA and establish coverage through their broker and HHI. Please reach out to your Account Executive for options of coverage. A full census with location delineation is required to be submitted. A new Participation Agreement will also need to be completed with updated info and EIN.

PURCHASES/ACQUISITIONS

The in-force rates assume that the employer group whom is the legally signing entity, has at least 51 percent or more ownership over any entity or entities.

HHI UNDERWRITING GUIDE

ADDITIONAL LOCATIONS ADDED

Groups can be added on as simply another location (billing still goes to the same place as before). They can also be added on as a separately billed location and thus, will require set up with the carrier as a new group with common ownership.

- **Kaiser:** For an additional location added with Kaiser, whereas the same benefits will be offered to the acquisition, the Kaiser Permanente Common Ownership Certification Form must be completed by the group and submitted to Kaiser Permanente. A new page 1 of the PA will also need to be sent to Vimly with a census, informing them of the new group with Common Ownership to already in-force group.
- **Aetna:** All acquisitions that increase the number of covered have to be ran by the team at Aetna to ensure no rate changes are necessary PRIOR to installation. Be sure to submit a full census of all enrolled and to-be-enrolled with the quote request.

AFFILIATED, ASSOCIATED, COMMONLY OWNED, OR MULTIPLE COMPANIES

- All persons treated as a single employer under subsection (b), (c), (m), or (o) of section 414 of the Internal Revenue Code of 1986 shall be treated as one employer.
- Employers who have more than one business with different tax identification numbers (TINs) may be eligible to enroll as one group if the following are met:
- One owner has controlling interest of all business to be included; or
- The owner files (or is eligible to file) an Affiliations Schedule, IRS Form 851, a combined tax return for all companies to be included. If they are eligible but choose not to file Form 851, please indicate as such. A copy of the latest filed tax return must be provided; and
- All businesses filed under one combined tax return will be considered a single group. For example, if the employer has three businesses and files all three under one combined tax return, then all three businesses must be enrolled for coverage.
- Businesses with equal controlling interest may be considered, if the owners of the company designate an individual to act on behalf of all the groups.
- Underwriting reserves the right to final underwriting review, and may consider common ownership on a case-by-case basis.
- Common Ownership Form (Kaiser) is completed and on file to link businesses together.

HHI UNDERWRITING GUIDE

SELF-EMPLOYED / SOLE PROPRIETOR

A self-employed individual or sole proprietor must be a common law W-2 employee and:

- Verify that they derive at least 75% of his or her income from a trade or business (51% in agriculture) through which the individual has attempted to earn taxable income and for which they have filed the appropriate Internal Revenue Service (IRS) form 1040, schedule C or F, for the previous taxable year.
- The signer for the employer group application for the group must be a resident for tax purposes in WA.
- At installation, there must be at least one enrolled common law W-2 employee who is not an owner and not an owner's spouse.
- Partners and LLCs filing as a partnership are eligible even if there are no common law W-2 employees. Owner and spouse groups are not eligible.
- Non-guaranteed associations, Taft-Hartley groups, employee leasing firms and closed groups (groups that restrict eligibility through criteria other than employment) and groups where no employer/employee relationship exists are not eligible.

BROKER COMPENSATION

All lines of coverage have a 5% compensation percentage. Commissions to Brokers are paid by the TPA for the Trust, Vimly. You must be set up with Vimly to install a new group. A W-9, E&O, state license, and the Vimly ACH Form must be on file before group can be installed. A BOR letter is always required, whether for block transfers or one-off broker transfers.

BROKER APPOINTMENT

Brokers/Producers need to be appointed with the carriers that they plan to utilize.

COBRA

All employer groups are subject to COBRA benefits. COBRA is provided for medical, dental, and vision. It is the responsibility of the employer group to distribute COBRA general notice. Vimly administers and distributes COBRA materials after employee termination.

HHI UNDERWRITING GUIDE

MEDICARE

Medicare pays secondary on claims when members are enrolled in both HHI medical and Medicare. Kaiser/Aetna pay as primary.

PAYMENTS

- After the initial payment, regular monthly payments are due on or before the 1st day of the month of coverage.
- Participating employers are subject to late payment fees and termination of participation in the Trust if payments are not received in a timely manner.
- If payment is not received the month following the premium coverage month, a late fee of 1.5% of premiums or \$20, whichever is greater.

DUAL OR TRIPLE OFFERINGS

All lines of coverage are ala carte and independent of one another.

Groups with 2-9 enrolling lives can have up to 2 (two) medical plans. Groups with 10+ enrolling may have up to 3 medical plan options, as long as there are no more than 2 PPO plans. Aetna and Kaiser cannot be offered side by side.

Dental and vision can have up to 2 plans each. Willamette dental and Ameritas dental may be offered side by side.

TERMINATION

- Members & groups can be retro-termed up to 60 days.
- Participant coverage obtained through this application may be terminated for the following reasons:
 - Non-payment of premiums;
 - Participant eligibility requirements are no longer met, or
 - Membership with the Washington Hospitality Association is terminated.

Please note that the group is considered a new group if termed and re-enters the Trust, they will be treated as a new group with paperwork and quote requirements.

HHI UNDERWRITING GUIDE

EMPLOYER REPORTING NEEDS

MEDICARE PART D: Vimly sends the creditable coverage notice out to groups, as well as files the designation on the CMS website for all HHI groups

5500 Filings: Vimly does this on behalf of the groups in HHI.

1095 Forms: Carriers send these out to groups directly.

SPD / Wrap Doc: Neither the carriers nor HHI/Vimly create or keep these for groups.