



Addendum to New Business Input Documents Mandatory Requirement for Health Care Reform

Aetna is collecting employee count information to comply with the health care reform law.

We are asking you to provide the average number of people you employed in the prior calendar year. We need this information so we can accurately report your data and calculate any potential rebates to which you and your covered subscribers may be entitled under the new medical loss ratio requirements set forth in the Affordable Care Act (ACA).

The law defines the number of employees as "the average number of employees employed by the employer's company during the preceding calendar year." An employee is defined as any person for whom the company issues a W-2, including full-time, part-time, and seasonal workers, and regardless of insurance eligibility (sample calculation below). We need the average number of total employees for your company in 2010 to support the 2011 calculations and reports and the payment of any rebates due in 2012.

How to calculate the average number of total employees*

To calculate average number of employees for the year, determine the average number of employees for each month in 2010, add them together and then divide the total by twelve. In the example below, 253 / 12 = 21. Round up or down to the nearest whole number.

Month	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Average
Full Time	15	14	14	15	14	15	16	16	15	14	14	14	
Part Time	5	6	5	5	6	6	7	7	5	5	5	5	
Seasonal	0	0	0	0	0	2	3	3	2	0	0	0	
Total	20	20	19	20	20	23	26	26	22	19	19	19	21

*Subject to change based on future regulatory guidance

Please enter your calculated average number of employees in the box below.

Average Employees in 2010 (whole numbers only; please print legibly)

By signing below I certify that:

- I am an authorized representative of the plan(s) for which this information is being provided.
- The information I have provided is true and correct.
- Aetna may rely on the responses I have provided.

First Name (Please Print):

Last Name (Please Print):

Title:

Company Name:

Email Address (optional):

Signature:

Today's Date:

Aetna reserves the right to audit all information provided. Providing false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company, may violate applicable insurance statutes.