

FSL MediBridge Forms

Product	State	Brochure	Indiv App	EE App	ER App
No	AL	N/A	N/A	N/A	N/A
Yes	AK	HB-GEN-1103	A-01025	N/A	N/A
Yes	AZ	HB-GEN-1103	A-01025	A-01026	A-01027
Yes	AR	HB-GEN-1103 ¹	N/A	A-01026	A-01027
Yes	CA	HB-GEN-1103 ¹	A-01025CA	A-01026CA ³	A-01027CA ³
Yes	CO	HB-GEN-1103 ⁴	N/A	A-01026CO ⁴	A-01027CO ⁴
No	CT	N/A	N/A	N/A	N/A
Yes	DE	HB-GEN-1103	A-01025	A-01026	A-01027
Yes	DC	HB-GEN-1103	A-01025DC	A-01026DC	A-01027DC
No	FL	N/A	N/A	N/A	N/A
Yes	GA	HB-GEN-1103 ¹	N/A	A-01026GA	A-01027GA
Yes	HI	HB-GEN-1103	A-01025	A-01026	A-01027
No	ID	N/A	N/A	N/A	N/A
Yes	IL	HB-GEN-1103	A-01025	A-01026	A-01027
Yes	IN	HB-GEN-1103	A-01025	N/A	N/A
Yes	IA	HB-GEN-1103	A-01025	A-01026	A-01027
No	KS	N/A	N/A	N/A	N/A
Yes	KY	HB-GEN-1103	A-01025KY	A-01026KY	A-01027KY
Yes	LA	HB-GEN-1103 ¹	N/A	A-01026LA	A-01027LA
Yes	ME	HB-GEN-1103 ¹	N/A	A-01026ME	A-01027ME
Yes	MD	HB-GEN-1103 ¹	N/A	A-01026	A-01027MD
No	MA	N/A	N/A	N/A	N/A
Yes	MI	HB-GEN-1103 ¹	N/A	A-01026	A-01027
No	MN	N/A	N/A	N/A	N/A
Yes	MS	HB-GEN-1103 ¹	A-01025	A-01026	A-01027 ²
Yes	MO	HB-GEN-1103	A-01025	A-01026	A-01027

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No	MT	N/A	N/A	N/A	N/A
Yes	NE	HB-GEN-1103	A-01025	A-01026	A-01027
Yes	NV	HB-GEN-1103	A-01025	A-01026	A-01027
No	NH	N/A	N/A	N/A	N/A
Yes	NJ	HB-GEN-1103	A-01025	N/A	N/A
Yes	NM	HB-GEN-1103	A-01025NM	A-01026NM	A-01027NM
No	NY	N/A	N/A	N/A	N/A
Yes	NC	HB-GEN-1103	A-01025	A-01026	A-01027
No	ND	N/A	N/A	N/A	N/A
Yes	OH	HB-GEN-1103	A-01025	A-01026 ⁵	A-01027OH ⁵
Yes	OK	HB-GEN-1103	A-01025	A-01026	A-01027
Yes	OR	HB-GEN-1103 ¹	N/A	A-01026	A-01027OR
Yes	PA	HB-GEN-1103	A-01025	A-01026	A-01027
Yes	RI	HB-GEN-1103	A-01025	A-01026	A-01027
Yes	SC	HB-GEN-1103 ¹	A-01025	A-01026	A-01027 ²
Yes	SD	HB-GEN-1103 ¹	N/A	A-01026	A-01027
Yes	TN	HB-GEN-1103	A-01025TN	A-01026TN	A-01027TN
Yes	TX	HB-GEN-1103 ¹	N/A	A-01026	A-01027
Yes	UT	HB-GEN-1103	A-01025	A-01026	A-01027
No	VT	N/A	N/A	N/A	N/A
Yes	VA	HB-GEN-1103	A-01025	A-01026	A-01027VA
No	WA	N/A	N/A	N/A	N/A
Yes	WV	HB-GEN-1103 ¹	N/A	A-01026	A-01027
Yes	WI	HB-GEN-1103	A-01025	A-01026	A-01027
Yes	WY	HB-GEN-1103	A-01025WY	A-01026	A-01027

ALL STATES USE RIDER INSERT FORM # MBRiderinsert-03 Dated 04/05

1. Use state specific Brochure Insert V5
2. Use modified Employer Application with state name on bottom right corner.
3. California minimum group size is 51 Employees
4. Colorado must use rates listed on MBCOInsert-01 Dated 04/05
5. Ohio Groups must be 100% EMPLOYEE PAID. No Employer contribution allowed.