

Hello, thank you for choosing Aetna Funding Advantage. **To facilitate the post-install reporting please provide the following information. Please note that the word consultant is used for broker/agent on the forms. Additional users should be submitted on a separate document with the same information as requested below.**

AHIA Reporting – Aetna Health Information Advantage

Please provide the information listed below for everyone at the company who will be granted access to the group's AHIA (Aetna Health Information Advantage):

- User First and Last Name: _____
- User Date of Birth: _____
- User Address, City, State, and Zip Code: _____
- User Email Address: _____
- User Phone Number: _____

If the Plan Sponsor approves the broker and/or general agency to have access to this data, the broker and/or general agent must complete the AHIA Data Software License Agreement document. The Plan Sponsor must complete a copy of the Customer Authorization for any broker and/or general agency that is being granted access. Both need to be returned to Aetna with the case submission. Please note that the Plan Sponsor must have access in order for the broker and/or general agency to have access.

The broker/agency contacts will also be required to provide the data below:

- Broker First and Last Name: _____
- Broker Date of Birth: _____
- Broker Address, City, State, and Zip Code: _____
- Broker Email Address: _____
- Broker Phone Number: _____

The general agency contacts will also be required to provide the data below:

- General Agent First and Last Name: _____
- General Agent Date of Birth: _____
- General Agent Address, City, State, and Zip Code: _____
- General Agent Email Address: _____
- General Agent Phone Number: _____

Fund Summary Reporting (FSR)

Please provide the information listed below for anyone at the company who will be granted access to the Fund Summary Reporting:

- User First and Last Name: _____
- User Email Address: _____
- User Phone Number: _____

The broker/agency contacts will also be required to provide the data below:

- Broker First and Last Name: _____
- Broker Email Address: _____
- Broker Phone Number: _____

The general agency contacts will also be required to provide the data below:

- General Agent First and Last Name: _____
- General Agent Email Address: _____
- General Agent Phone Number: _____