

Couple Intake

Data requirements, screen flow, and validation logic for the couple-facing intake form.

Overview

The couple intake is the employee-facing entry point to CouplesBenefits. One spouse initiates the process and enters information for both sides of the household. The form is designed to be completed in under five minutes with no benefits expertise required.

The intake collects four categories of information: **who the couple is, where they work, what plans are available to them, and who needs to be covered.** The platform uses this data to match against both employers' rule configurations and determine whether an opt-out deal exists.

Design Principle

The couple should never need to call HR or dig through benefits documents to complete this form. Where possible, the platform should pre-populate or look up data based on employer name and plan year. The goal is: employer name in, plan details out.

1. Household Identity

Basic information about the couple. One spouse creates the account; the other can be invited to verify their side or the initiating spouse can enter both.

Field	Type	Required	Description
Spouse A — Full Name	text	Yes	Legal name as it appears on benefits enrollment. The person initiating the intake.
Spouse A — Email	email	Yes	Personal email (not work email). Used for account access, notifications, and payment.
Spouse A — Phone	phone	Yes	Mobile preferred. Used for verification and opt-out status updates.
Spouse A — Date of Birth	date	Yes	Required for plan eligibility verification and dependent age calculations.
Spouse B — Full Name	text	Yes	Legal name of the other spouse.
Spouse B — Email	email	No	Optional. If provided, Spouse B receives an invite to review and confirm their plan details.

Field	Type	Required	Description
Spouse B — Date of Birth	date	Yes	Required for plan eligibility and dependent calculations.
Marital Status	select	Yes	Married or domestic partner. Must be a status recognized by both employers' benefit plans.
Residential Zip Code	zip	Yes	Primary household zip. Used for network adequacy checks and state compliance rules.

2. Employer Information

Both spouses' employers must be identified. If an employer is already on the CouplesBenefits platform (i.e. has completed their rule configuration), the platform will auto-match. If not, the couple can still complete the intake — the platform will flag the unregistered employer for outreach.

Field	Type	Required	Description
Spouse A — Employer Name	text/search	Yes	Typeahead search against registered employers. If not found, free text entry triggers outreach workflow.
Spouse A — Job Title	text	No	Optional. Helps the platform check against excluded job classes in the employer's rules.
Spouse A — Employment Type	select	Yes	Full-time or part-time benefits-eligible. Must match employer's eligibility rules.
Spouse A — Hire Date	date	Yes	Used to verify minimum tenure requirements set by the employer.
Spouse B — Employer Name	text/search	Yes	Same typeahead logic. Both employers must be identified for a match to be attempted.
Spouse B — Job Title	text	No	Optional. Same purpose as above.
Spouse B — Employment Type	select	Yes	Full-time or part-time benefits-eligible.
Spouse B — Hire Date	date	Yes	Used to verify minimum tenure requirements.

Unregistered Employer Handling

If one or both employers are not yet on the platform, the intake is still saved. The couple is placed in a "pending match" state and notified if/when the employer registers. Meanwhile, CouplesBenefits can use the intake data to prioritize employer outreach — a real couple waiting for a match is the best sales lead.

3. Current Plan Details

The plan information for each spouse. This is what the platform matches against the other employer's spouse plan requirements. The couple enters the plan they are currently enrolled in (or eligible for) at each employer.

Collected for each spouse:

Field	Type	Required	Description
Plan Name	text	Yes	Name of the health plan as listed by the employer (e.g. "Blue Cross PPO Gold").
Coverage Tier Enrolled	select	Yes	Current enrollment level: Employee Only, Employee + Spouse, Employee + Children, Family.
Metal Tier / Category	select	Yes	Bronze, Silver, Gold, Platinum, or "Not sure." Platform attempts to look up if unsure.
Plan Type	select	Yes	HMO, PPO, POS, EPO, HDHP, or "Not sure."
Monthly Premium (EE share)	currency/mo	Yes	What the employee currently pays per month for their share of the premium.
In-Network Deductible	currency	Yes	Individual in-network deductible. Family deductible collected separately if applicable.
In-Network OOP Max	currency	Yes	Individual in-network out-of-pocket maximum.
Includes Rx Coverage	boolean	Yes	Does this plan include prescription drug coverage?
Includes Mental Health	boolean	Yes	Does this plan include mental health and substance abuse services?
HSA Eligible	boolean	No	Is this plan paired with an HSA? Relevant for tax optimization in the opt-out scenario.
Employer Premium Contribution	currency/mo	No	If known, the employer's monthly contribution toward the premium. Helps calculate total plan value.

Plan Lookup / Auto-Fill

For registered employers, the platform should pre-populate plan options from the employer's configuration. The couple selects their plan from a dropdown instead of entering details manually. This reduces errors and eliminates the need to read a Summary of Benefits. For MVP, manual entry is acceptable with a future goal of full auto-population.

4. Dependents

All dependents who need to be covered under whichever plan the household keeps. This is critical — if the employer's rules require dependent coverage, every dependent must be eligible under the spouse's plan for the match to work.

Field	Type	Required	Description
Number of Dependents	<code>integer</code>	Yes	Total dependents beyond the two spouses (typically children). Enter 0 if none.
Dependent Name	<code>text</code>	Per dep.	Full name of each dependent.
Dependent DOB	<code>date</code>	Per dep.	Date of birth. Used for age-out checks (typically age 26 for children).
Relationship	<code>select</code>	Per dep.	Child, stepchild, foster child, or other qualifying dependent.
Currently Enrolled On	<code>select</code>	Per dep.	Which spouse's plan currently covers this dependent: Spouse A, Spouse B, Both, or Neither.
Special Coverage Needs	<code>text</code>	No	Any known medical needs that require continuity of care (e.g. specialist, ongoing treatment). Not used for matching — used to flag the couple if their preferred provider is out-of-network on the remaining plan.

5. Household Preferences

Optional inputs that help the platform recommend the best match direction — i.e. which spouse's plan should cover the family and which employer should pay the opt-out.

Field	Type	Required	Description
Plan Preference	<code>select</code>	No	Does the household have a preference for which plan to keep? Options: Spouse A's plan, Spouse B's plan, No preference (let the platform optimize), or "Not sure."

Field	Type	Required	Description
Provider Continuity	text	No	Names of doctors, specialists, or facilities the family wants to keep. Platform checks network directories if available.
Optimize For	select	No	What matters most: Maximum monthly payment, Lowest out-of-pocket risk, Best provider network, or Balanced.
Payment Preference	select	No	How the couple wants to receive the opt-out payment: Via payroll, direct deposit, or no preference.

6. Documentation Upload

Supporting documents that may be required by one or both employers before an opt-out is approved. The couple can upload these during intake or after a match is found.

Field	Type	Required	Description
Summary of Benefits (A)	file upload	Conditional	SBC for Spouse A's plan. Required if the other employer's rules specify "Summary of Benefits" as proof of coverage.
Summary of Benefits (B)	file upload	Conditional	SBC for Spouse B's plan. Same conditional requirement.
Certificate of Coverage	file upload	Conditional	If the employer requires a certificate instead of an SBC. Issued by the insurance carrier.
Marriage Certificate	file upload	No	Some employers require proof of marriage or domestic partnership before processing a spousal opt-out.

Document requirements are driven by the employer's rule configuration (Section 3 of the Employer Rules spec). The intake screen dynamically shows which uploads are needed once both employers are identified.

7. Platform Validation Logic

Automated checks performed during and after intake before a match is presented to the couple.

- **Employer registration check.** The platform verifies whether each employer has an active rule configuration. If both are registered, matching proceeds immediately. If one or both are not registered, the intake is saved in "pending" status.
- **Tenure verification.** Hire dates are compared against each employer's minimum tenure requirement. If either spouse hasn't met the threshold, the match is deferred with an estimated eligibility date shown to the couple.

- **Employment type check.** Each spouse's employment type is verified against the employer's eligible categories. Part-time employees are only matchable if the employer's rules allow it.
- **Job class exclusion.** If a job title matches an excluded class in the employer's rules, the platform flags it for manual review rather than auto-rejecting (titles are ambiguous).
- **Dependent age-out check.** Dependents approaching age 26 are flagged. The platform calculates whether they will age out during the current plan year and warns the couple.
- **Plan qualification check.** Each spouse's plan details are compared against the other employer's spouse plan requirements (metal tier, deductible caps, coverage types, network type). All requirements must pass for a match to be offered.
- **Bidirectional match.** The platform checks the match in both directions — Spouse A opting out of their employer's plan, and Spouse B opting out of theirs. If both directions produce a valid match, the platform recommends the one that maximizes household value (or honors the couple's stated preference).
- **Duplicate household check.** The platform verifies that neither spouse has an existing active intake or opt-out. If a duplicate is found, the couple is directed to their existing case.
- **Budget cap check.** Before presenting a match, the platform confirms the employer has not hit their annual budget cap or max participant limit.

8. Intake Screen Flow

The recommended sequence for the intake UI. Each step should feel lightweight — no step should have more than 5 to 7 visible fields.

- **Step 1 — "Who are you?"** Spouse A name, email, phone, DOB. Spouse B name, DOB. Marital status, zip code. Account creation happens here.
- **Step 2 — "Where do you work?"** Both employers (typeahead). Employment type, hire date for each. If an employer is on the platform, show a green check and the employer's name/logo.
- **Step 3 — "What are your plans?"** Plan details for each spouse. If the employer is registered, show a dropdown of available plans instead of manual entry. This is the densest step — consider progressive disclosure (show basics, expand for deductible/OOP).
- **Step 4 — "Who else needs coverage?"** Dependent entry. Skip if no dependents. Repeating row pattern — add another dependent button.
- **Step 5 — "Any preferences?"** Optional. Plan preference, provider continuity, optimization priority. Can be skipped entirely.
- **Step 6 — "Upload docs."** Only shown if required by employer rules. Otherwise skipped. Can be completed later — don't block the match on missing docs.
- **Step 7 — "Review and submit."** Summary of everything entered. Edit buttons per section. Submit triggers the match engine. The next screen the couple sees is the Match Moment (Screen 03).

Target: Under 5 Minutes

The entire intake — from landing on the page to hitting submit — should take a couple under five minutes. If an employer is registered and plans auto-populate, closer to three. Every field that can be looked up, defaulted, or deferred should be. The couple is not a benefits administrator. Treat them accordingly.

9. Data Handoff to Match Engine

Once the intake is submitted, the following data package is passed to the match engine (Screen 03):

- **Household ID** — unique identifier for this couple's case.
- **Spouse A employer ID + plan details** — everything needed to check against Employer B's spouse plan requirements.
- **Spouse B employer ID + plan details** — everything needed to check against Employer A's spouse plan requirements.
- **Dependent roster** — names, DOBs, relationships, current coverage assignments.
- **Household preferences** — plan preference, optimization priority, provider list.
- **Document status** — which required documents have been uploaded, which are pending.
- **Eligibility flags** — tenure met (Y/N per spouse), employment type match (Y/N per spouse), job class exclusion flags.

The match engine runs both directions (A opts out vs. B opts out), applies employer rules, and returns the best available deal — or a clear explanation of why no match exists. See the Match Moment spec (Screen 03) for match logic details.