



## SMALL BUSINESS GROUP SUBMISSION CHECKLIST

- ✓ A signed original application for Group Service Agreement (GSA)
- ✓ A complete employee application for each eligible employee enrolling/waiving coverage
- ✓ A Health Questionnaire is required for :
  - All groups of 6-9 employees enrolling
  - Groups of 1-5 enrolling employees that are eligible for an Industry discount
  - Any employee referenced on the GSA with a known medical condition
- ✓ The latest quarter DE-6, reconciled
  - If the group has not been in business long enough to have a DE-6, 6 weeks of payroll, including withholdings, may be submitted

\*To reconcile the DE6, please indicate next to each employee’s name the following:

  - T- Terminated (include date)
  - E- Eligible and enrolling, indicate titles
  - W- Eligible and Waiving coverage
  - IE- Ineligible
- ✓ Ownership paperwork (required if owner/partners names do not appear on the DE-6 or payroll records)  
Documentation may include:
 

<u>For Sole Proprietor:</u> Business License Fictitious Business Name Statement Schedule C Tax Form	<u>For Partnership:</u> Business License (showing both names)  Fictitious Business Name Statement (showing both names) Schedule K Tax Form Partnership Agreement	<u>For Corporation:</u> Corporation Documents Articles of Incorporation
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- ✓ Prior carrier bills for the previous 6 months (for Pre-existing credit-PPO/Flex)
  - If a prior carrier bill is not available, ID cards may be submitted
- ✓ A check for the first months premium drawn from the groups account
- ✓ Domestic Partner Affidavits, if applicable
- ✓ Broker paperwork-Agreements/License
- ✓ For carve-out requests please attach a letter on company letterhead to include:
  - Nature of carve out plan (ex. Mgmt v non-Mgmt)
  - Employee Names and Titles for those eligible under the carve out
  - Information on the competing plans offered to employees outside carve out
  - Attestation that employees in the carve out will not be offered coverage under a competing plan