## **Small Group** New Business Checklist



1.	<b>Sales Agreement:</b> On the Sales Agreement sections 1, 2, and 3 are mandatory. All pages of the Sales Agreement are required with the submission of new business.
	Note the below especially:  > SIC Code is required  > The plan(s) a group is enrolling in must be on page two. For example VB 100/60 \$1,500 RX 3/12/35/60/100 with or without Pedi Dental  > Sales Agreement signed by owner or an executive leader of the company
2.	<b>Member Applications:</b> On the member application sections 1, 2, 3, 7 are mandatory. Sections 4, 5, and 6 are only required if it applies to the employee enrolling.
	Note the below especially:  > SSN of all employees and dependents on the application  > Dates of birth  > Plan that the member is selecting must be filled out  > Date of hire
3.	Quarterly Wage & Tax Report:
	<ul> <li>Small group attestation form</li> <li>If quarterly report has less than 5 employees listed, hours must be included</li> <li>If hours are not listed, we will accept the most recent 3 months of payroll w/ hours listed</li> <li>Payroll must reflect employees enrolling, waiving coverage, and the part time/seasonal</li> <li>Current date must be on every page submitted as proof for payroll</li> <li>Current tax forms for any owners for the group</li> <li>New hires-W4 (W-4 should not be older than 90 days)</li> </ul>
4.	<b>Waivers:</b> The below are the sections of the waiver form that are mandatory.
	<ul> <li>Reason for waiving</li> <li>Other Insurance Info</li> <li>Type of waiver</li> <li>Spousal waivers are needed for any married employee enrolling in individual only coverage</li> <li>Signature/date at the bottom</li> <li>Please note the waiver can be signed by either the employee waiving coverage or the employer. If the</li> </ul>
	employer is signing the waiver form, please ensure information is accurate.
5.	<b>Census &amp; Rate Table:</b> Provide the proposal along with the rate table of the product(s) that the group is selecting. On the rate table please make it clear as to what product the group is selecting.
6.	Broker of Record:  > Effective Date > Broker Name > Agency Name > Broker number  Please have the BOR signed by the individual who signed the Sales Agreement. This can also be signed by the owner of the company.
7.	<b>Check:</b> The check submitted with the new business must be made out to BCBSRI. The amount must be at least 80% of the first month premium.

The group must be quoted in our system by the 23rd of the month prior to effective date. A completed new business package must be submitted to BCBSRI by no later than the 23rd of the month prior to requested effective date. New business submissions will be denied if both of the above requirements are not met.

New business submissions are based on 75% participation. Any significant deviation from this participation assumption may require a re-evaluation. Any group enrolling in a HSA product must submit an Ancillary Administrative Service Contract. Also please note any existing dental groups need to submit a Group Activity Report.

Please contact Small Group Underwriting via email. Small-Group. Underwriting@bcbsri.org