

New group submission checklist

Please be advised that this is just a guideline and that other documentation may be required.

Business check in the amount of the first month's premium or completed check-by-fax form for first month's premium with a copy of the voided business check drawn on the group's business account.

Master Group Application (**please use current version – outdated versions will not be accepted**).

Enrollment Spreadsheet with MGA (**please use current version – outdated versions will not be accepted**)

Sole proprietor, partner, or corporate officer statement (Owner Affidavit) – to be completed by all eligible owners.

Employee application (**please use current version – outdated versions will not be accepted**).

Refusal of Coverage form (for eligible employees declining coverage or employees declining coverage for eligible dependents).

Prior carrier bill when not submitting a DE 9C under promotion including the page that lists all members on the previous policy (if applicable) and then submit a signed Eligibility/Participation Attestation form.

Most recently filed DE 9C. Please reconcile to note each employee's status; if any employee is terminated, please indicate the employee's termination date.

If there is a new hire who is not listed on the DE 9C, please provide payroll from date of hire or W-4 if new hire has not been working long enough to be on payroll yet.

If owner is not on the DE 9C, please provide most recent K-1 or Schedule C (if they have filed an extension, please provide a copy of the extension and the previous year's K-1 or Schedule C).

Fictitious Business Name Filing is required if the group uses a DBA name, or if there is more than one business name reflecting on any document or ownership paperwork submitted. Note: A Fictitious Business Name Filing is not required when the DBA appears on the business check.

Legal documents (**see UW Guidelines**) – Articles of Incorporation, Statement of Information, Partnership Agreement, etc., that list the names of **all corporate officers/owners/directors**.

Standalone specialty benefits

The new group submission checklist applies to dental, vision,* and life insurance* when provided alongside Blue Shield medical plans. For a simplified checklist of submission requirements when purchasing dental, vision, or life insurance without a Blue Shield medical plan offering, contact your Blue Shield sales representative.

* Blue Shield vision and life insurance plans are underwritten by Blue Shield of California Life & Health Insurance Company.