

PLEASE NOTE: This checklist is provided as a guide. The carrier may require additional items and documentation. Please refer to the carrier's underwriting guidelines for a complete list of requirements. Please use the latest version of forms.

Our goal is to process your new group enrollment easily and efficiently in order to provide you and your client with a quick approval. The following list outlines the health plan's case submission requests:

١.	. Every new group is required to submit the following:		
	☐ Master Group Application (either paper, Blue Shield MGA spreadsheet when used in conjunction with the En Enrollment spreadsheet, or online portal*)	ıployee	
	□ Applications from all enrolling employees and dependents (either paper, Blue Shield Employee Enrollment sp online portal*)	readsheet, or	
	□ Refusal of Coverage forms for all eligible employees and any eligible dependents who refuse or waive cover of open enrollment (either paper, Blue Shield Employee Enrollment spreadsheet, or online portal*)	age at the time	
	☐ Applications for COBRA or Cal-COBRA enrollees, if available (may be submitted later as maintenance)		
☐ First month's payment on company check stock or the completed Small Group Initial Payment Form†			
	» The Small Group Initial Payment Form is used for the initial payment for new group submissions only, and payment must be a minimum of 75% of the anticipated first month's payment.	the initial	
	» Blue Shield will refund the full deposit to the group if the group application is declined		
	When the Small Group Initial Payment Form is used, documentation from the bank that includes the bank in group name, and account and routing numbers may be submitted in lieu of a copy of a voided business ch	•	
	Employer/broker retains these forms when applying through the online portal or using the MGA and/or Employee Enrollment spreadsheet.		
	† Employer/broker retains the Small Group Initial Payment form when applying through the online portal.		
2.	New groups with 1 or 2 eligible employees or less than 3 Full-time and Full-time Equivalent (FT/FTE) employees or more than 95 FT/FTE employees are required to submit the following additional documentation to verify eligibility. Blue Shiel reserves the right to require this documentation for new groups with 3 or more eligible or 3 or more FT/FTE employees.		
	The group's most recent DE9C Quarterly State Tax Withholding Statement		
	☐ Payroll register for employees hired after the DE9C filing or if any employees are out of state		
3.	3. New groups with 1 or 2 eligible employees or less than 3 Full-time and Full-time Equivalent (FT/FTE) employees required to submit the following additional documentation based on the type of entity to verify group and owner experiences.	•	

Shield reserves the right to require this documentation for new groups with 3 or more eligible or **3 or more FT/FTE employees**.



Sole Proprietorship	1. If group uses a DBA:	
	 DBA printed on the group's business check or current California business license or Fictitious Business Name (FBN) filing 	
	2. If owner is enrolling or refusing coverage and is not listed on the DE9C:	
	 Completed and signed Blue Shield of California Small Group Owner Eligibility Statement 	
Partnership,	1. Partnership Agreement	
Limited Partnership (LP),	2. If owners are enrolling or refusing coverage and are not listed on the DE9C:	
Limited Liability Partnership (LLP)	 Completed and signed Blue Shield of California Small Group Owner Eligibility Statement for each owner not listed on the DE9C 	
Corporations	Statement of Information or Articles of Incorporation	
	2. If owners are enrolling or refusing coverage and are not listed on the DE9C:	
	 Completed and signed Blue Shield of California Small Group Owner Eligibility Statement for each owner not listed on the DE9C 	
Limited Liability Company (LLC)	Statement of Information or Operating Agreement	
	2. If owners are enrolling or refusing coverage and are not listed on the DE9C:	
	 Completed and signed Blue Shield of California Small Group Owner Eligibility Statement for each owner not listed on the DE9C 	
Nonprofit	1. Statement of Information	
	2. Nonprofit Corporation bylaws	
	3. Additional documentation that may be required:	
	■ Nonprofit 990 EZ tax form	
	 Board of Directors or shareholders meeting minutes 	
	4. If officers, directors and/or trustees are enrolling or refusing coverage and are not listed on the DE9C:	
	■ W-2	

4. Groups in the following categories have unique documentation requirements that must be submitted when **one or more employees** are enrolling:

Employers of union and nonunion employees

For small employer groups with union and nonunion employees, when the union members receive health coverage through a trust fund established by a collective bargaining agreement, Blue Shield will cover only the nonunion employees.

When the total number of both union and nonunion employees does not exceed 100, the employer can apply for small group coverage to cover only the nonunion employees. Only the eligible nonunion employees will be counted for purposes of minimum enrollment and participation requirements. To qualify for this coverage, the employer must provide Blue Shield with the following additional documentation:



- Most recently filed DE9C and/or payroll register (payroll register required if any employees are out of state) with union and nonunion employees identified
- A copy of the collective bargaining agreement showing that the employer pays contributions to the trust fund
- The Statement of ERISA Rights from the union trust fund Summary Plan Description

Professional Employer Organization ("leased") employees

Professional Employer Organization (PEO or "leased") employees are considered employees of the PEO company. Small employer groups that have canceled their PEO arrangement and hired the former PEO employees will be considered for coverage as a qualified small employer pursuant to small group rules.

For small employer groups that have recently canceled their contract with a PEO, the following additional documentation is required:

- A copy of the letter sent from the PEO to the client business verifying the cancellation of the leasing arrangement.
- A copy of a payroll register from the PEO company that separates the formerly leased employees by business location

Combining multiple employer groups

If an owner believes that the structure of his/her holdings produces a single employer/employee relationship, Blue Shield will require filed ownership documentation for eligible subsidiaries/affiliated companies.

Spin-off groups

A "spin-off group" is a newly formed business that is not yet eligible for qualified small group coverage, and in which a majority of the employees of the new business have left an established business ("former business") currently offering Blue Shield coverage to its employees. A spin-off group must meet all small group requirements except for the length of time that the group has employed at least one eligible common-law employee who was covered under the former business's Blue Shield small group health plan.

The requirements for issuance of coverage are:

- At least 50% of the employees in the spin-off group must have been enrolled in Blue Shield through the former business
- The new group does not have shared ownership with the business it has separated from
- W-4 forms for all W-2 employees
- Blue Shield of California Start-up Companies/Spin-off Group Eligibility Statement completed and signed by one of the group's owners
- Blue Shield of California Small Group Owner Eligibility Statement completed and signed by any additional owners who are enrolling or refusing coverage
- Filed owner documentation linking owner to business
- All enrollment documents (employer and employee applications, refusals, business check/Small Group Initial Payment Form)

Start-up groups

A start-up group must meet all small group requirements except for the length of time that the group has employed at least one eligible common-law employee. Blue Shield will consider start-up groups that have been in business and have employed at least one eligible common-law employee for less than six weeks.



A start-up group must submit the following documentation:

- W-4 forms for all W-2 employees
- Blue Shield of California Start-up Companies/Spin-off Group Eligibility Statement completed and signed by one of the group's owners
- Blue Shield of California Small Group Owner Eligibility Statement completed and signed by any additional owners who are enrolling or refusing coverage
- Filed owner documentation linking owner to business
- All enrollment documents (employer and employee applications, refusals, business check/Small Group Initial Payment Form)

After approval, prior carrier termination letter must be submitted by the employer or broker.

Important Reminder: To help your client comply with ACA requirements, provide a copy of the appropriate Summary of Benefits and Coverage (SBC) to each employee at the Enrollment Meeting, via email or by posting on an internal company website. For the most recent information regarding Blue Shield's SBCs, contact your Word & Brown representative.