

GROUP/BROKER NEW CASE INSTALLATION CHECKLIST CA SMALL GROUP



To ensure prompt enrollment, groups must provide the following:

- Completed *Small Business Employer Group Application*
 - Must be completed and signed by the owner or authorized group representative.
- Include copy of quoted rates or rate sheet for plan purchased.
- Current DE6 and/or *Proprietors or Partners Statements*
 - New hires not appearing on current DE6 can be submitted on group's letterhead listing the employee name and date of hire.
 - New groups (in business at least six weeks) must list on group's letterhead employee names and date of hire in lieu of DE6.
- First month's premium (100%)
 - Must be on a pre-printed company check payable to PacifiCare Dental & Vision Administrators (personal or cashier's checks and money orders will not be accepted).
- Prior carrier bill must accompany any groups enrolling in the PacifiCare SignatureOptionsSM (PPO) Dental or PacifiCare SignatureIndependenceSM (Indemnity) Dental plan. The 12-month waiting period for Major services will be waived for all employees appearing on the bill at the time of case installation.
- Completed *Member Enrollment* applications should be audited before submitting.
 - Applications must be signed by enrollee.
 - Dependent relationships, date of birth, and social security numbers are required.
 - All sections must be complete. A *Member Enrollment* may be returned unprocessed if information is not complete.
- Refusal of Employee and/or Dependent Coverage*
 - Refusal forms completed and signed by all employees not enrolling.
- COBRA or Cal-COBRA forms (if applicable).
 - COBRA or Cal-COBRA is a requirement of the state of California.
 - The *Small Business Employer Agreement Application* must be noted in the COBRA or Cal-COBRA section.
 - *Member Enrollment* applications are to be clearly identified if an enrollee is a COBRA or Cal-COBRA participant.

Underwriting Highlights:*

- ▶ Dual-choice coverage is available to groups with 10 or more eligible employees enrolled, with a minimum of five on a PacifiCare SignatureOptions/PacifiCare SignatureIndependence Dental plan and one on the PacifiCare SignatureValueSM (HMO) Dental.
- ▶ PacifiCare SignatureIndependence Dental plans and contributory PacifiCare SignatureOptions/PacifiCare SignatureIndependence Dental plans are not available to virgin groups.
- ▶ PacifiCare SignatureOptions Dental and PacifiCare SignatureIndependence Dental plans are available on a stand-alone basis (purchased without our PacifiCare SignatureValue Dental) to groups of 5-50 eligible employees.
- ▶ For stand-alone PacifiCare SignatureOptions Dental, eligible groups of 2-4 employees must purchase PacifiCare Medical, and 100% participation is required.
- ▶ Voluntary groups may purchase only PacifiCare SignatureValue Dental and/or PacifiCare SignatureOptions Dental 400, Dental 410 or Dental 460.
- ▶ \$1,500 maximum plans are available to groups with 2-50 eligible employees. Groups eligible for this benefit must have similar prior coverage with a minimum \$1,500 calendar year maximum.

*For complete information, refer to the *Small Business Underwriting Guidelines*

Paperwork for all new groups is due into the sales office no later than the 20th of the month preceding requested effective date.

Are you a Broker who is appointed with us?

If not, please call 1-800-622-6388 to receive your Marketing Services Agreement.

Mail new group submissions to our California office:

Attention: Sales Department LC05-206
PacifiCare Dental & Vision Administrators
3110 Lake Center Drive
Santa Ana, CA 92704

Sales & Marketing questions?

1 - 8 0 0 - 5 1 6 - 4 6 8 0

PacifiCare[®]
Dental & Vision Administrators