

New Group Checklist

Account Information				
Group Size <i>(Application must be submitted to local RMHP office by this day prior to requested effective date)</i>				
<input type="checkbox"/> BG-1 (5 th of month)		<input type="checkbox"/> 2-50 (15 th of month)		<input type="checkbox"/> 51+ (15 th of month)
Group Name				
Producer Name		E-Mail Address		RMHP Account Executive/Manager
Producer Agency			Producer (Payee) License #/Tax ID	
Prior Carrier			Date Received by Marketing	Requested Effective Date
Medical Plan	Rx Plan	Chiropractic Plan	Dental/Vision Plan	Other

Application Document Checklist	
<i>(All boxes and lines must be completed or indicated not applicable)</i>	
Business Groups of 1	Groups of 2 or More
<input type="checkbox"/> Uniform Application including completed Health Questionnaire	<input type="checkbox"/> Group Application
<input type="checkbox"/> 1st Month's Premium	<input type="checkbox"/> 1st Month's Premium
<input type="checkbox"/> Current Physical Exam Records <i>(within the past 12 months)</i> for applicants 45 years or older ❶ ❺	<input type="checkbox"/> Proof of Creditable Coverage <i>(detailed premium statements listing employee names for up to past 6 consecutive months are required)</i> ❶ ❷
<input type="checkbox"/> Attestation for BG-1	<input type="checkbox"/> Tax & Wage Documentation <i>(see Tax & Wage Requirements)</i> ❷ ❸ ❹
<input type="checkbox"/> Proof of Creditable Coverage <i>(detailed premium statements listing names for up to past 6 consecutive months are required)</i> ❶	Required Enrollment Documents — Indicate # of Forms Attached
<input type="checkbox"/> Tax & Wage Documentation <i>(see requirements on page 2)</i> ❹	# of Enrollment Forms (51+) or Uniform Applications (2-50)
<input type="checkbox"/> Waiver Form <i>(for eligible dependent declining coverage)</i>	# of Previous Health Insurance Information <i>(should be same as enrollment #)</i>
<input type="checkbox"/> Previous Health Insurance Information ❶	# of Waivers
<input type="checkbox"/> Open Enrollment Certification Form <i>(Basic & Standard Plans)</i>	# of Dependent Waivers <i>(include spouse waiver if both are employed by same company and enrolling separately)</i>
<input type="checkbox"/> Common Law Spouse Form	# of Certification of Dependent Status Forms <i>(age 19 and older in 51+ group)</i>
<input type="checkbox"/> Disenrollment Form <i>(for employee cancelling other RMHP coverage)</i>	# of Common Law Spouse Forms
	# of Disenrollment Forms <i>(for employee cancelling other RMHP Coverage)</i>
	# of COBRA/Continuation of Coverage Forms <i>(all participants have been notified of the plan change)</i>
	Good Health National Access <i>(for any employees/dependents residing outside Colorado)</i>
	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> List of eligible employees and dependents for groups 2 – 50

Tax & Wage Document Checklist for 2–50 ❷ ❸

UITR: Groups of 2–50 Eligible Employees

Most recent Unemployment Insurance Tax Report (UITR) and supporting Quarterly Report of Worker Wages. (If only one individual is enrolling in the plan, the two most recent UITRs must be submitted.) The number of hours worked per week for each employee listed **must be written** on the UITR, regardless of eligibility. If the group is not required to file a UITR, please see ❹.

Please note: Each eligible employee enrolling must appear on the UITR and show income sufficient to verify the required hours worked. If any of the employees enrolling or waiving (including owners of the business) **do not appear** on the UITR, the following documents will be required, listed in order of priority:

Owner:

- W2 form** — if not available, RMHP will accept:
- Owner tax schedule that applies** (i.e., C, E, F, or SE) — if not available, RMHP will accept:
- Copy of owner draws** (cancelled checks for previous 3 months)
- If none of the above items are available, RMHP will require a copy of the **Articles of Incorporation** and other documentation to substantiate eligibility for group coverage. Please contact your RMHP Account Executive to determine the specific documentation that should be submitted with your application.

Employees:

- W4 form and current payroll documents**

