

SMALL GROUP SUBMISSION

Broker Checklist

Please use the following checklist for new sold small group submissions to ensure timely and accurate processing.

Small Group (1-100) Submission

- ☐ Reconciled DE-9C (required for one to five eligible employees and any group size for sole proprietor and partners): VW-Valid Waiver, T-Term, PT-Part Time, E-Enrolling; or a current premium invoice
Note: Sutter Health Plus Underwriting reserves the right to request a DE-9C
- ☐ Scanned copy of check for first month's premium; mail physical check to the address below
- ☐ Completed and signed employer application, including employee participation totals
- ☐ Completed and signed employee application(s)
- ☐ Completed New Employee Verification Form for employees not listed on the DE-9C or current premium invoice
Note: Sole proprietors and partners do not need to complete this form. All eligible employees must be on a reconciled DE-9C or payroll source.
- ☐ Copy of medical quote submitted to employer for all subscribers and dependents
- ☐ Sutter Health Plus Corporate Officer Eligibility Statement (for owners not on the DE-9C)
- ☐ Please provide one of the following:
 - ☐ Sole Proprietorship – Current California Business License, Fictitious Business Name Filing, or Current Schedule C and (1040) form
 - ☐ Partnership/LP/LLC – Partnership Agreement and Federal (EIN) Assignment Letter, Current Schedule K-1 (1065), or Statement of Partnership Authority
 - ☐ Corporation/C Corp – Articles of Incorporation, Statement of Information, Schedule K-1 1120S (for S Corp), or Tax Form 1120 (pages 1 and 2) with Schedule 1125e (for C Corp)

Submission Timeline

If you submit group cases after the 20th of the prior month, this may cause a delay in the delivery of member identification cards and welcome materials by the effective date.

Final deadline for group submissions is the first Friday of the effective month; group submissions must include completed documents and binder check.

Payment Information

Initial Premium Payment	Attn: Finance Department Sutter Health Plus 2480 Natomas Park Dr., Ste. 150 Sacramento, CA 95833
Monthly Premium Payments	Sutter Health Plus P.O. Box 740143 Los Angeles, CA 90074-0143
Expedited (Overnight) Premium Payment	Attn: Finance Sutter Health Plus 2480 Natomas Park Dr., Ste. 150 Sacramento, CA 95833