

New Group Submission Checklist 51-99 Eligible Employees

Thank you for your new group submission. The following pieces of information are required when submitting a new case to UnitedHealthcare: Rating_Unit_Chicago@uhc.com or by fax to 312-424-5140 or by mail to:

UnitedHealthcare
Small Business
233 North Michigan Ave
Chicago IL. 60601

Group Name _____

Information needed for Initial Quote (51-99 eligible employees)

- Group Name
- Group Corporate Address
- Proposal Due Date
- Requested Effective Date
- Current Renewal Date
- Current carrier and carrier history (number of years with current carrier) Note: If less than 2 years, who was their prior carrier and how long were they with them?
- Employer Contribution (Percentage contributed towards employee & dependent cost)
- Nature of Business (Include SIC code if available).
- Complete census in electronic format (i.e. Excel). Must include gender, date of birth or age, dependent status and zip codes if there are people out of state.
- Current and renewal rates per product (Renewal Rates are required if we are within 30 days of Renewal and must be on Carrier letterhead)
- Group's Current Benefits (Summary of Benefits Suggested)
- Are you the in-force broker? Requested Commissions?
- Current funding arrangements (fully insured or self-funded)

Information needed for Medically Underwritten Rates (51-99 eligible employees):

- **Completed Employer Application**
- **Completed Employee Application**

Information needed for Case Installation (51-99 eligible employees)

- First Month's Premium Check made out to United Healthcare
- Electronic Debit Authorization Form (optional)
- Plan Selection(s)
- If they are waiving the waiting period at initial enrollment

Please note: The UnitedHealthcare Underwriting Department reserves the right to request different or additional documents as they deem necessary.

Rates are not Final until approved by both Medical and Financial Underwriting.