



Small Group and Association Health Plans (2-50)
New Business Checklist
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Small Group:

1. ☐ Completed Master Application
2. ☐ ACH Form -or- Premium Check (copy if being mailed) Enrollment Forms -or-
3. ☐ Enrollment Spreadsheet
4. ☐ Waivers (if any) **-OR-** Valid Waivers (if participation is not met, proof of coverage will be required)
5. ☐ Business License
6. ☐ Quarterly Tax & Wages (1&2 life groups only)
7. ☐ Sold Rates

Association Health Plans:

1. ☐ Completed Master Application
2. ☐ ACH Form -or- Premium Check (copy if being mailed)
3. ☐ Proof of Association Membership
-OR-
☐ Copy of Submitted Affiliation Application & Copy of Receipt for Paid Affiliation
(Applies to [RSCC](#) and [WCMS](#) Affiliate programs)
4. ☐ Enrollment Forms **-OR-** Enrollment Spreadsheet
5. ☐ Waivers (if any) **-OR-** Valid Waivers (if participation is not met, proof of coverage will be required)
6. ☐ Business License
7. ☐ Quarterly Tax & Wages (not required but could be requested)
8. ☐ Sold rates