



Voluntary Dental

PLEASE NOTE: This checklist is provided as a guide. The carrier may require additional items and documentation. Please refer to the carrier's underwriting guidelines for a complete list of requirements. Please use the latest version of forms.

Our goal is to process your new group enrollment easily and efficiently in order to provide you and your client with a quick approval. The following list outlines the health plan's case submission requests:

- Employer application — dated on or prior to the requested effective date
- Employee Dental / Life Enrollment Form (Existing member only) — dated on or prior to the requested effective date.
- For employees waiving please have them fill out the waiver section on the Medical / Dental / Vision Enrollment / Change / Waiver form — dated on or prior to the requested effective date.
- Employer contribution.
- The most recent quarter **DE-9C (formerly DE-6)** reconciled. For new hires not appearing on the DE-9C, payroll records are required. For the Sole Proprietor, Partner, or Corporate Owner not appearing on the DE-9C, a completed Proof of Eligibility Form and required ownership documentation.
- Employer check for the first month's premium payable to "Aetna."
- Completed Producer Agreement, along with California State License and E & O Declaration page must be attached by brokers not licensed with Aetna.

*Note: Group will not be approved until licensing is received.

After approval, prior carrier termination letter must be submitted by the employer or broker.