



Mid-Market New Business Checklist

Chicago Metro Area

For Mid-Market groups with 51 to 150 enrolled lives

The required forms for medical and dental enrollment were emailed and can also be found on Blue Access for ProducersSM in the “Downloadable Forms” section at bcbsil.com/producer. If you have questions or need forms for ancillary lines of coverage, please contact your Blue Cross and Blue Shield of Illinois (BCBSIL) Ancillary Sales Executive or General Agent.

> The following BCBSIL forms are required.

Benefit Program Application Form (BPA)

- Review and complete all sections or indicate N/A if not applicable.
- Producer’s printed name and signature are required.
- BCBSIL- assigned producer number and contracted producer Tax ID number are required.
- Please complete and sign the Proxy.

Benefit Plan Selection Form (BPS)

- Combined BPS applies to medical and dental coverage.
- Please indicate “N/A” or “no” for coverages not purchased (including life/AD&D/STD coverage).

Employer Group Information Form (EGI) with Medicare Secondary Payer (MSP) Employer Acknowledgement

- The EGI/MSP collects critical information for the proper application of federal laws, including Medicare, COBRA and the Affordable Care Act.

All client signatures on the above forms must be in the form of a wet signature or digitally signed using DocuSign or similar tool (and include a date/time stamp). Microsoft Word generated signatures are not acceptable.



> **The following employer documentation is required.**

Enrollment Census Template

Wage and Tax Report (UI-3/40) is not required for Mid-Market group enrollments. **The census will serve as the group's attestation of enrollment and eligibility.**

- As the group's enrollment/eligibility attestation, the census must include and identify all: full-time/eligible employees, COBRA participants, retired employees and employees with valid waivers, as of the requested effective date of coverage.
- If the final enrollment census is different from the originally submitted quoting census, it may impact our final rate offer.
- For quickest processing, use the Enrollment Census Template emailed to you.

Prior carrier's renewal letter (if not included during quoting)

Prior carrier's most recent billing (whenever COBRA participants, state continuees, or retired employees are included in the enrollment)

> **IMPORTANT:**

Documentation for Disabled Dependents can also be submitted with the group's enrollment, if applicable. Please see the optional folder for more information.

Email documents and census to:

DGMMNewBus@bcbsil.com and copy your BCBSIL sales representative(s).

We must receive your enrollments by the last business day of the month before the requested effective date. If you work exclusively with a General Agent, please submit your new Mid-Market enrollments to your General Agent.