



New Group Late Submission Form

IMPORTANT: This form is required for new groups submitted after the 20th of the month for coverage effective the first day of the following month. Groups may be submitted until the 5th of the month for an effective date of the first day of that month but they will be considered a late submission. If the 5th falls on a weekend or holiday, materials must be submitted by the business day immediately preceding the 5th of that month.

Requested Effective Date _____ / _____ / _____

Company Name: _____

Address: _____

City, State, Zip: _____

Phone: (_____) _____

Fax: (_____) _____

I acknowledge that our group has submitted its materials late and understand this may cause a delay in ID cards and eligibility for benefits. ***I acknowledge that eligible employees and their dependents may be required to pay out-of-pocket for covered services until eligibility is updated.*** In the event an eligible employee or eligible dependent pays out-of-pocket for covered services, I acknowledge it is the responsibility of that employee or dependent to submit the request for reimbursement to the carrier(s).

Name _____

Title _____

Signature _____

Date ____ / ____ / ____

Agent Name _____

Agent Signature _____

Date ____ / ____ / ____