

Sold Small Group Checklist



Group Name: _____
Effective Date: _____
Broker: _____ Agency: _____

Be sure to upload the following to Jet-Insure:

- ☐ ODJFS (OBES) for Ohio groups OR
- ☐ Michigan Wage and Tax *UIA 1028 Form) for Michigan groups
- ☐ Current bill from previous carrier
- ☐ First months premium (copy uploaded; mail original to AE)
- ☐ *Implementation Page (signed)
- ☐ *Disclaimer Page (signed)
- ☐ *Certification of Eligibility
- ☐ *Common Ownership Certification
- ☐ *Group Pediatric Dental:
 - ☐ Attestation
OR
 - ☐ Application
- ☐ *Superior Vision Application
- ☐ Proof of Alliance association, if applicable
- ☐ *Employee Waivers, if applicable

Note: These documents can be found under "Help Material" or within the "Quote/Proposal PDF" in Jet-Insure.

OFFICE USE ONLY:

Marketing Rep: _____
Underwriter: _____
Plan Design: _____ Group Number: _____
Members: _____ Contracts: _____