How to enroll new groups

To help us process your client's enrollment accurately, please be sure all the items listed below are completed and received by your Kaiser Permanente sales team before the effective date of coverage.

Steps	Small groups	Large groups
New Group/Purchaser Application The employer must complete and sign the New Group/Purchaser Application. If the application is submitted without the employer's signature, it will be returned, delaying implementation of the group's enrollment and payment of the commission.	●	●
Employee enrollment applications Make sure all employees complete, sign, and date their applications.	●	●
Waiver forms/Declination of coverage All eligible employees who voluntarily decline to enroll in the Kaiser Permanente health plan offered by their employer during the enrollment period must complete and sign this form, providing their reason for declining.	●	
DE 6 (quarterly wage report) or payroll report A copy of the most recent quarterly wage or payroll report is required. Important note: Please provide the status for each employee listed on the DE 6 or payroll report. Write one of the following abbreviations next to each employee's name: K **Kaiser Permanente** P/T **Part-time** D **Declining coverage** W/P **In waiting period** T **Terminated** If another carrier is being offered alongside Kaiser Permanente, indicate the name of the carrier and which employees are selecting that carrier. For all new employees whose names don't appear, provide copies of their W-4 forms and write their names at the end of the DE 6 or payroll report.	●	
Proprietor/Partnership/Corporate Officer form This form must be completed for each owner/partner/corporate officer enrolling who is not listed on the DE 6 or payroll report. In addition, one or more of the following must be provided: a current DE 6 or payroll report, partnership agreement, fictitious name statement, DBA, current business license, Schedule K, Articles of Incorporation, Schedule C and 1040 form, or current professional license.	●	

Steps	Small groups	Large groups
Initial premium check The estimated first month's premium check, payable to "Kaiser Permanente." Write the purchaser number on the check before mailing. The check must be issued by the group or the broker's trust account. **For small Southern California groups, mail your check to:** Kaiser Foundation Health Plan, Inc. File #5915 Los Angeles, CA 90074-5915 *Submit a copy of the premium check to your sales team with the new group enrollment documents.* **For small Northern California groups, mail your check to:** Kaiser Foundation Health Plan, Inc. File #73030 P.O. Box 60000 San Francisco, CA 94160-3030 *Submit a copy of the premium check to your sales team with the new group enrollment documents.* **For Southern and Northern California large groups, mail your check to your sales team.** Refer to page 36 for contact information.	●	●
Broker's life agent license If you are not already an established Kaiser Permanente broker, please submit a copy of your firm's life agent insurance license with tax ID number, or your individual life agent license with your Social Security number, along with your mailing address.	●	●
For small groups, mail all the items listed above that apply, with the exception of the original check, to your sales associate at: Kaiser Permanente, Small Business Unit P.O. Box 7104 Pasadena, CA 91109 *Or ship via delivery service to the attention of your sales associate at:* Kaiser Permanente, Small Business Unit 100 S. Los Robles Ave., Fourth Floor Pasadena, CA 91188	●	
For large groups, mail all items listed above that apply to your sales team. Refer to page 36 for contact information.		●
Please keep copies of all documents for your records.	●	●