

New business checklist

New Jersey 1-50 eligible employees

It's so easy

To help ensure the underwriting of your case is quick and easy, we are providing this simple checklist.

- 1. Employer Application**
- 2. Employer Certification Application**
- 3. H.S.A. Declaration of Understanding**
 - H.S.A compatible plans only
- 4. NB411 Form**
 - This form is required for ALL groups for future electronic enrollment, billing/payment and access agreement, even if not elected at new business.
- 5. Addendum to New Business Input Document (TAE)**
 - Use the most current form on Producer World
- 6. Employee Enrollment and Waivers**
 - eList Tool**
 - Aetna eList Tool completed in full
 - Do not amend the eList Tool format in any manner.
 - When you use the tool, do not send the employee enrollment forms. All the required information must be entered into the eList Tool.
 - Paper Copy**
 - For all eligible employees enrolling or waiving health coverage
 - Waivers may be submitted in a separate excel waiver listing with the reason for waiving included
- 7. Copy of Initial Premium check payable to Aetna or ACH Form**
 - When an ACH form is submitted, the form MUST be FULLY completed including the amount of the premium.
 - When a copy of the check is submitted, upon approval you will be notified to send the check to the Bank lockbox.
- 8. Wage and Tax Statement**
 - 1 to 5 enrolled employees - Quarterly Wage and Tax Statement
 - 6 to 50 enrolled employees - Quarterly Wage and Tax Statement is not needed. Upon request, the underwriter will contact you if a Quarterly Wage and Tax statement is necessary.
- 9. Dental Benefit Summary to receive credit for**
 - Major and orthodontia for Standard 2 to 9 and Voluntary 3 to 50 eligible employees; and
 - Preventive and basic for Voluntary plans
- 10. Electing Vision Benefit**
 - If Vision is not on the Employer Application submit the Aetna Vision Preferred Static quote signed by the employer with the plan selected
 - Employee Election – write in the vision plan name on the Employee Enrollment/Change form.

Any missing information may result in the effective date being moved forward to the next available date.

Send all enrollment materials to:

E-mail:
ACANBUSoldCaseSubmission@aetna.com

Secure File Transport (FTP):

<https://st3.aetna.com>

To obtain access to the FTP server, visit us at Producer World

Effective dates may be the 1st or 15th of the month.

Effective Date	Submission deadline
1 st of month	25 th of prior month
15 th of month	10 th of the month

For help with your new case submissions contact your ACA New Business Unit at ACANBUBrokerSupport@aetna.com or call us at 1-844-241-0209

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