

NEW CASE ENROLLMENT INSTRUCTIONS

* Please use this checklist to ensure that all steps of the enrollment process are performed.

- _____ 1. **Plan Checklist** – complete all questions on the checklist to ensure that the necessary data is collected. This information is used to create your Plan Document.
- _____ 2. **Census** – include all eligible employees’ names, addresses, social security numbers, hire dates and birth dates.
- _____ 3. **Anti Discrimination Update** – indicate the names of the employees fitting any one of the definitions of key and highly compensated employees.
- _____ 4. **Deduction Calendar** – indicate the frequency of payroll deductions for the Section 125 Plan by highlighting or circling those actual deduction dates (paycheck dates) on the calendar provided. Feel free to make a copy of the calendar to indicate deduction dates for categories that have a different frequency (i.e. insurance deductions taken weekly, FSA deductions taken bi-weekly).
- _____ 5. **Completed Enrollment Forms** For all eligible employees included on the census.
- _____ 6. **Administration Procedures:**

Claim check distribution to:

Employer _____

Employee home _____

Deduction Frequency:

12 24 26 52 Other _____

Total in Plan Year _____

Split fee Y N Monthly Fees: _____

Administration Fees: Bill Pay from Account (Svc Option 2)

Employee paid _____ Employer paid _____

Service Option 2 Only:

Check Signing Authority: ER BDG

Bank Account Information Enclosed YES NO

Signature Card Enclosed YES NO

Company Name

Completed By:

Non-Discrimination Testing Completed:

Enrollment Information Mailed:

Packets/newwcklist

Billing: (BDG Account)

One Bill (all divisions consolidated) _____

Divisional Bill _____

Service Option:

BDG Account _____ (Svc Option 1)

ER Held Acct _____ (Svc Option 2)

Check Run Dates: _____

Installation Fee:

Total Eligible Employees: _____

Installation Fee: \$ _____

Total Billed: \$ _____

Date Billed: _____

Admin manual delivered

Contact Person / Email address

Agent

Pass _____ **Fail** _____

Follow Up Call: