

NEW GROUP SETUP CHECKLIST



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Group Master Application

- Please make sure all questions are answered completely.

Employee Enrollment

- **Enrollment Census** – A template is available; required fields are indicated in green. This is the fastest and easiest way for enrollment.
- **Enrollment Forms** – please make sure enrollment forms are filled out completely and legible.

First Month's Premium Payment (Binder Check)

- **EFT Form** – if electronic funds transfer (EFT) is elected, then no binder check is required
- **Online Payments** – WTIA requires a first month premium check to be made payable to WTIA and mailed directly to:

**WTIA ICO Vimly Benefit Solutions
PO BOX 6
Mukilteo, WA 98275**

All subsequent payments MUST be made online via SIMON. We will not accept additional checks for payment.

Signed, Circled/Highlighted & Dated Rate Sheets

- Rate sheets, which is the last quote provided, can be signed by the Producer or Employer Group as verification of rates shown. Please include all rates for the products the company intends to buy.

WTIA Participation Fee

The WTIA Health Program requires a participation fee to enroll.

- The WTIA participation fee will be prorated to align with our 12/1 AHP renewal based on the grid below. The prorated or full amount will be added to the first month's premium invoice billed by Vimly Benefit Solutions as a separate one-time line item based on the group's effective date.

Employer Size	Fee
Under 25	\$600
25-49	\$1,800
50+	\$3,000

Email completed paperwork to Raven Mencias: rmencias@washingtontechnology.org