

## **Highmark Blue Cross Blue Shield** **Checklist**

Must have the following information 35 days prior to the requested effective date:

- Small Group Business Application (Employer Application)
- Employee Enrollment Forms
- Agent/Agency Transmittal
- UC-2 (marked appropriately and signed by an officer of the company)
- Check for 1<sup>st</sup> month's premium
- Waiver Form

Please mail completed information to ARMS Insurance Group for processing.