

## Checklist for New Groups

When establishing a new group, there are several essential documents necessary for an efficient implementation. To better serve our clients, DDOK has developed a checklist for large account setup and initial enrollment process.

☐ Application for Group Contract

- |   |  |
|---|--|
| <input type="checkbox"/> <b>Step 1:</b> Plan Effective Date             | <input type="checkbox"/> <b>Step 6:</b> Third Party Administrators<br><i>(Authorized group signature required)</i> |
| <input type="checkbox"/> <b>Step 2:</b> Employer Information            | <input type="checkbox"/> <b>Step 7:</b> Billing and Payment Options<br><i>(Authorized bank signature required)</i> |
| <input type="checkbox"/> <b>Step 3:</b> Eligibility and Enrollment      | <input type="checkbox"/> <b>Step 8:</b> Producer/Agent Information   |
| <input type="checkbox"/> <b>Step 4:</b> Employer Contribution           | <input type="checkbox"/> <b>Step 9:</b> Documents and Fulfillment  |
| <input type="checkbox"/> <b>Step 5:</b> Plan Options and Plan Selection | <input type="checkbox"/> <b>Step 10:</b> Acknowledgement and Signatures  |

**Please note:** Incomplete and/or inaccurate applications will result in processing delays. Please ensure the application is completed in its entirety and signed by the person authorized to contract for the group and, if applicable, producer.

☐ Initial Enrollment (select one):

- ☐ **Enrollment Forms** – PDF Forms completed and signed by each employee
- ☐ **One-time Load** – Use the specifications on the 'Instructions' tab of the formatted Excel spreadsheet to capture all member elections.
- ☐ **EDI File** – Weekly 834 Electronic Data Interchange (EDI) file with all active enrollments, changes and/or terminations (minimum of 75 subscribers required to use this method). A member of our Electronic Services team will contact you to begin file implementation and testing once account structure is established.

Send completed application, enrollment documents and other supporting materials to [Sales@DeltaDentalOK.org](mailto:Sales@DeltaDentalOK.org) or mail to:

Delta Dental of Oklahoma  
**Attention: Sales**  
P.O. Box 54709  
Oklahoma City, Oklahoma 73154-1709