New Business Enrollment Checklist

Email Completed Paperwork to: OBT@tbsmga.com www.tbsmga.com / Client Care Team: 855-246-8873

Please have all enrollments in by the 15th of the month before effective date for the best enrollment experience.

☐ **OBT Membership**

- Groups located in Thurston County must be a full member of the Thurston County Chamber (TCC) See next page. Groups outside Thurston County must complete an Out of Area OBT Membership application and groups will see a fee of $8.33 on their monthly statement ($100/yr).

☐ **Notice of Late Submission -** required for all groups

☐ **COBRA Documents**

- **Employer COBRA Acknowledgment Form -** required for all groups
- **New Client Worksheet -** complete this form to request COBRA admin through Verde for non-OBT benefits
- **COBRA Employer Takeover Notice -** for members currently enrolled in or within their election window for COBRA benefits

☐ **Initial Premium Payment**

- Fill out the OBT ACH Form - Initial Payment ONLY.

☐ **Participation Agreement**

- All pages should be completed and signed by the plan sponsor and broker.

☐ **Employee Census Enrollment**

- All employee and dependent information should be provided including physical home address (PO box can only be used as mailing address).

KAISER PLANS

☐ **Quarterly Wage and Tax Statement (QWTS)**

- Must provide most recently filed QWTS for 2 to 4 enrolled employees
- There must be at least one enrolled common law W-2 employee who is not an owner and not the owner's spouse.
- Newly hired, terminated, part time, retirees, seasonal and temporary employees should be noted accordingly on the QWTS/prior carrier bill.
- Reconciled QWTS/prior carrier bill must be signed and dated by the employer. Any hand-written comments added must be signed and dated by the employer.

☐ **Schedule K-1 Tax documents** (The most recent IRS tax documents and entity formation documents are required to satisfy the proof of eligibility requirements).

- Required for group size of 2-4 if the owner is not listed on the QWTS.

☐ **Signed Final Rates Page**

- To confirm the sold rates and plan election, please submit the plan sponsor signature page for each line of coverage (medical, dental, vision) and plans elected should be marked with an X.

****Please note that all required Kaiser documents must be signed by the same group representative.***

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Thurston County Chamber member dues:

(for groups HQ in Thurston County)

# of Full-time Employees	Annual Investment/Dues
0-5	$470
6-10	$582
11-15	$679
16-25	$770
26-50	$926
51-75	$1135
76-100	$1360
101-175	$1655
176-250	$1869
251-350	$2486
351-450	$3003
451-550	$3885
Over 550	Negotiable

****Please note that all required Kaiser documents must be signed by the same group representative.***

Rev 3.2026