



Enrollment Instructions Checklist

The following items must be signed, dated and completed before a case can be processed:

- 1. Employer Submission Form**
- 2. Employer Participation Agreement**
- 3. Sold Rate Summary:** Sign and date the sold proposal, indicate plan selected and include the entire rate summary with rates and benefits.
- 4. Initial Deposit Premium** is not required and will be included in the first billing notice.
- 5. Enrollment/Refusal Forms or EDT ECensus Template** for all employees, dependents and COBRA participants. For groups written in the following states - FL, NH, VT, WV, AK, AZ, ID, OR, SD and WA - please contact the sales department for enrollment materials.
- 6. Commission Agreement** (this one-time agreement will be kept on file and will apply to all of your EDT cases submitted).
- 7. For takeover plans,** EDT requires a copy of the most recent billing statement listing the covered employees along with a copy of your plan summary or certificate booklet. Proof of prior coverage is the responsibility of the Employer (Group) subject to underwriting guidelines.

Additional requirements for cases with 2-9 enrolling:

- 8. A copy of the Employer's last State Quarterly Wage and Contribution Report listing employees.**

All fully completed sold case materials must be received by the 5th of the month. Cases submitted after the 5th business day will be moved to the next available effective date.

Mail sold case materials to:

Employers Dental Trust
Attn: New Business
2 Enterprise Drive, Suite 204
Shelton, Connecticut 06484

Additional EDT Contact Information

- Sales Support x1
- Premium/Billing x2
- Commissions and Licensing x4

Toll Free: (800) 243-2534

Local: (203) 924-2994

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