# Large Group Submission

**Broker Checklist** 

Please use the following checklist for new sold large group submissions to ensure timely and accurate processing.

Send an encrypted email with the completed and signed documents listed below to your Account Executive team. The email

# **Large Group (101+) Submission**

sub	eject must include the group name and requested effective date. Upon receipt, you will receive an email confirmation.
	Employer application
	Large Group Subscriber Contract
	☐ EDI Authorization, if applicable
	Sold Sign-off Sheet
	ACN Group of California, Inc. Group Enrollment Agreement, if applicable
	Sutter Health Plus CSV File for member enrollment; or soft copies of the enrollment forms
	Submit your initial premium payment online or by check; if paying by check, please include a copy with your application for faster processing; see payment information on the following page

# **Submission Timeline**

If you submit large group cases after the 15th of the month prior to the desired effective date, there may be a delay in the delivery of member identification cards and welcome materials by the effective date. The final deadline for group submissions is the first Friday of the effective month; group submissions must include the completed documents listed above and payment.

See page 2 for payment information



# **Payment Information**

Clients can pay their premiums online or by other methods such as bill pay, check, Automated Clearing House (ACH), and wire.

The address for premium payment varies by method of payment. Clients can use the following specific information for paying their premiums.

## **Online**

#### INITIAL PREMIUM PAYMENT

## **Sutter Health Plus Online Payment Center**

Clients can pay their initial binder payment online\* through the Sutter Health Plus Online Payment Center at sutterhealthplus.org/binderpayment.

#### MONTHLY PREMIUM PAYMENT

#### **Sutter Health Plus Portal**

After registering for a portal account, clients can pay their monthly premium online through their Sutter Health Plus portal account and the Sutter Health Plus Online Payment Center.

- 1. Log in to the Employer Portal shplus.org/employerportal
- 2. Select "Make a Payment"

# **Bill Pay**

Clients can use the following information with their bank or credit union online banking bill pay service.

Payee Name	Sutter Health Plus
Payee Address	P.O. Box 278136 Sacramento, CA 95827-8136
Payee Telephone Number	855-325-5200

## Check

Clients can make their check payable to Sutter Health Plus and mail to the appropriate address. They should include their Sutter Health Plus account name and account number with their payment.

Standard Mail	Sutter Health Plus P.O. Box 278136 Sacramento, CA 95827-8136
Expedited (Overnight) Mail	Sutter Health - Deposit Services 3707 Schriever Ave. Mather, CA 95655

## **ACH**

Clients can use the following information for ACH payments. They can contact their bank or credit union directly or consult their online banking service about ACH payments and any associated fees.

The routing number for ACH payments is different than the routing number for wire transfers.

Payee Name	Sutter Health Plus
Bank Name and Address	Bank of America 555 Capitol Mall, Ste. 150 Sacramento, CA 95814
ABA/Routing Number for ACH	121000358
Bank Account Number	1499285898

### Wire

Clients can use the following information for wire transfers. They can contact their bank or credit union directly or consult their online banking service about wire transfers and any associated fees.

The routing number for wire transfers is different than the routing number for ACH.

Payee Name	Sutter Health Plus
Bank Name and Address	Bank of America 555 Capitol Mall, Ste. 150 Sacramento, CA 95814
ABA/Routing Number for Wire	026009593
Bank Account Number	1499285898

<sup>\*</sup> If you are submitting a large group payment for multiple subaccounts, please contact your Sutter Health Plus Account Executive to provide additional remittance information.