



Submission Guidelines for Illinois Health Application for SMALL GROUP HEALTH INSURANCE COVERAGE



To comply with the **Illinois Insurance Fairness Act** (*Public Act 96-0857*) that took effect on January 1, 2011, all insurers doing business in the small group market in Illinois must now use the *Illinois Standard Health Employee Application for Small Group Employers*. It is available on the Blue Cross and Blue Shield of Illinois (BCBSIL) website at bcbsil.com. Part of the law requires insurers to post these application submission guidelines.

How to submit an application to BCBSIL

When applying or enrolling for benefits, BCBSIL offers the following options for electronic or paper submission of the application.

- **General Agents and Producers**

Online

Submit enrollment/applications through eSales Tools via **Blue Access® for Producers**.

U.S. Mail

Submit a paper application to your BCBSIL representative. If the application is for HMO or CPO coverage, you must submit the completed application along with *the HMO/CPO Provider Selection Enrollment and Change Form* (22840.0111), to the following address:

Blue Cross and Blue Shield of Illinois
Attn: [include BCBSIL representative name]
1020 West 31st Street
Downers Grove, Illinois 60515

- **Employer Groups**

Employees in a group plan cannot submit applications directly to BCBSIL. The group’s Group Administrator must submit the application(s) to BCBSIL through the established channels.

Group Administrators

- *Existing business* – enroll a new group or add new enrollees to an existing group through **Blue Access® for Employers**. You can also submit applications to Customer Service at these addresses:

– For non-HMO business:	– For HMO business:
BCBSIL	BCBSIL
1400 North 30th Street	2787 McFarland Road
Quincy, Illinois 62301	Rockford, Illinois 61107
- *New business* – send applications to your assigned Producer or BCBSIL Sales Representative. Submit the completed applications along with the *HMO/CPO Provider Selection Enrollment and Change Form*, if applicable.

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