



Employer Access Web Enrollment Acknowledgement Form

(Please print clearly and use black ink only)

I acknowledge that I am the group administrator or broker for

Group Name: _____

Group Number: _____

and that I have the authority to send updated member information (as it applies to the group to which I am associated) to Blue Cross and Blue Shield of Georgia.

I hereby acknowledge that all employees updated via Employer Access for whom the pre-existing condition limitation is waived, also appear on the prior carrier's bill for up to twelve (12) months, as defined in the benefit booklet [except for Blue Choice Healthcare Plan and In-Network Blue Choice Option].

All employees updated via Employer Access have been made aware of the following information prior to their enrollment in their healthcare coverage plan (HMO, POS, PPO):

- a. number, mix and location of participating/network health care providers
- b. limitations on choices of participating/network health care providers
- c. disclosure of contractual relationship between participating/network health care providers.

I understand that any student information that is submitted via Employer Access is accurate and up-to-date. Blue Cross and Blue Shield of Georgia will not be held liable for any incorrect student information that has been omitted or submitted incorrectly.

As the group administrator, I have obtained written acknowledgments from each group member that verifies awareness of provider network availability, specifically the number, mix and location of participating/network health care providers. These acknowledgments shall be maintained by the group and are available for review.

By signing below, I acknowledge my understanding of the above information.

Signature

Date

Print Name

Print Title

****Your Group Number can be located on your rate acceptance letter****

HMO and POS plans offered by Blue Cross and Blue Shield Healthcare Plan of Georgia (BCBSHP), Inc. PPO offered by Blue Cross and Blue Shield of Georgia Inc. BCBSHP and BCBSGa are independent licensees of the Blue Cross and Blue Shield Association