

# Large Group Submission

## Broker Checklist

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

### Large Group (101+) Submission

Send an encrypted email with the completed and signed documents listed below to your Account Executive team. The email subject 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 Plan 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 Plan Online Payment Center

Clients can pay their initial binder payment\* online through the Sutter Health Plan Online Payment Center at [sutterhealthplan.org/binderpayment](https://sutterhealthplan.org/binderpayment).

#### Monthly Premium Payment

##### Sutter Health Plan Portal

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

1. **Log in to Employer Portal** - [shplan.org/employerportal](https://shplan.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.

<b>Payee Name</b>	Sutter Health Plan
<b>Payee Address</b>	P.O. Box 278136 Sacramento, CA 95827-8136
<b>Payee Telephone Number</b>	855-315-5800

### CHECK

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

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

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

### 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.

<b>Payee Name</b>	Sutter Health Plan
<b>Bank Name</b>	JP Morgan Chase
<b>ABA/Routing Number for ACH</b>	322271627
<b>Bank Account Number</b>	529062369

### 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.

<b>Payee Name</b>	Sutter Health Plan
<b>Bank Name</b>	JP Morgan Chase
<b>ABA/Routing Number for Wire</b>	021000021
<b>Bank Account Number</b>	529062369

