



PROFESSIONAL GROUP PLANS, INC.
Specializing in Employee Benefits

**Oxford Health Plans
METRO/Direct/EPO/My Plan
New Business Submission
Checklist**

- Oxford Metro/Direct/EPO/My Plan Group Application**
- New York Enrollment Form(s)**
- Notice of Enrollment Periods & Waiver Form(s)
(only when enrolling 1 employee)**
- Group Qualification Document (NYS-45, K-1, etc...)**
- First Month's Premium Check Payable to:
Oxford Health Plans**
- Forms Must Be Submitted to PGP Office**
3 days prior to the effective date.

First time case submission needs licensing forms.

If you have any questions please contact your PGP representative.