



PROFESSIONAL GROUP PLANS, INC.
Specializing in Employee Benefits

**Oxford Health Plans
New Jersey
New Business Submission
Checklist**

- Oxford New Jersey Employer Application**
- Oxford New Jersey Transmittal Form**
- Employer Certification Form**
- New Jersey Employee Enrollment Form(s)**
- Waiver Form(s)**
- First Month's Premium Check Payable to:
Oxford Health Plans**
- Forms Must Be Submitted to PGP**
5 days prior to the effective date.

First time case submission needs licensing forms.

If you have any questions, please contact your PGP representative.