		Group Name: Policy #:
Oxford Health Plans 14 Central Park Drive Hooksett, NH 03106 Attn: NY Small Group Enroll	ment Department	
Dear Oxford,		
Enclosed is the documentation	n you requested to verify my grou	up's eligibility for group healthcare coverage in New York.
Below, I have indicated the nudocumentation I have enclose		group's official filing status in New York State, and the
Number of eligible employees	S:	
Official Group Filing in NY	Required Documentation*	Description
☐ New Corporation	Articles of Incorporation and W4 for each employee	Made up of shareholders who transfer money, property, or both for the corporation's capital stock.
☐ Existing Corporation	NYS-45 (indicating all eligible employees)	
New Partnership	Partnership Agreement and W4 for each employee	A relationship that exists between two or more people who join to carry on a trade or business. Each person contributes money, property, labor, or skill, and each expects to share in the profits and losses of the business.
☐ Existing Partnership	K1 for each partner and NYS- 45 (indicating all eligible non- partner employees)	
NYSHIPP Approved Organization	NYSHIPP Certificate	The New York State Health Insurance Partnership Program (NYSHIPP) was established by the New York State Department of Health to assist eligible employees and sole proprietors without employees in purchasing small group health insurance policies for their full-time employees and dependents.
☐ New Proprietorship	W4 for each employee	An unincorporated business that is owned by one individual.
☐ Existing Proprietorship	Schedule C and NYS-45 (indicating all eligible employees)	
New Subchapter S Corporation	CT6 and W4 for each employee	A domestic corporation that is formed to avoid double taxation. An S corporation is generally exempt from federal income tax. Its shareholders include on their tax returns their share of the corporation's separately stated items of income, deduction, loss, and credit, as well as their share of non-separately stated income or loss.
☐ Existing Subchapter S Corporation	1120S or K1 and NYS-45 (indicating all eligible employees)	
New Limited Liability Corporation	Articles of Incorporation and W4 for each employee	May be classified as a partnership or corporation.
☐ Existing Limited Liability Corporation	NYS-45 (indicating all eligible employees)	
*Only fully executed document	tation will be accepted.	
Signature of Authorized Empl	loyer Group Official Prir	nted Name of Signee Date