

CIGNA HealthCare
25A Vreeland Road
Suite 202
Florham Park, NJ 07932

LATE PAPERWORK FORM

Producers: If you are submitting group enrollment paperwork 14 calendar days (or less) prior to the group's effective date, this form must be filled out by the group administrator, signed, and submitted with their complete paperwork to our Florham Park group sales office.

Group Name: _____

Address: _____

We, the undersigned, understand that we are requesting a coverage date that will put our enrollment paperwork in CIGNA's office(s) 14 days (or less) prior to our effective date, and that the delivery of our I.D. cards and system activation may occur after our effective date.

Upon approval of our request for insurance, we acknowledge that delivery of our group I.D. cards and system activation may occur after our effective date.

Name (please print): _____

Signature: _____

Date: _____

