



Oxford New York Small Group (2-50) Underwriting Requirements

ALL GROUPS – OXFORD HEALTH INSURANCE, INC. (OHI) & OXFORD HEALTH PLANS (NY), INC. (OHP)

The following underwriting requirements apply to all applications or renewals of coverage on our OHP HMO, our dual-licensed POS and our OHI insurance products.

A. Group Size Requirements: To be eligible for small group coverage, a group must be located in a county where we offer Oxford products and have at least two (2) but not more than fifty (50) eligible employees. (See eligibility section for eligible employee definition.) The following are not counted toward group size:

- any person who performs services for the company that are reported on an IRS 1099 form (such a person is not an employee and is not eligible for coverage); or
- any former employee who is covered through retiree benefits, the Consolidated Omnibus Budget Reconciliation Act (COBRA) or state continuation.

If the employer does not offer group health coverage to all eligible employees, group size will be calculated based on 1) the number of eligible employees who work in the state of New York and 2) if the employer offers Oxford coverage to out-of-state employees, the number of out-of-state eligible employees. (See eligibility section for more information on valid classes.)

Groups that no longer meet the small group size requirements will be offered a renewal in accordance with their appropriate market segment, provided they meet the underwriting requirements.

B. Eligibility: Eligible employees, former employees eligible for COBRA or state continuation and, if the group offers retiree benefits, all eligible retired former employees, can be enrolled in Oxford small group products.

• Eligible employees: Active permanent employees of the employer and of all subsidiaries or affiliates of a corporate employer who work 20 or more hours per week and are eligible for health benefits through the employer's group health plan. Eligible employees must live, work or reside in the service area. Eligible employees do not include:

- any person who performs services for the company that are reported on an IRS 1099 form (such a person is not an employee and is not eligible for coverage);
- any former employee who is covered through retiree benefits, COBRA or state continuation;
- any employee who does not live, work or reside in the United States; or
- co-employees of a Professional Employer Organization (PEO), Employee Leasing Company (ELC) or other such entity that is a co-employer with a client of client-site employees

• Valid Employer Class(es): An employer may elect to offer coverage to a class of employees based on conditions pertaining to employment: geographic situs of employment, earnings, method of compensation, hours and occupational duties. Employees who work less than 20 hours per week are not eligible employees and may not enroll in any Oxford products.

Example: Employer may elect to offer coverage only to employees who work at least 40 hours per week.

C. Out-of-Area: Out-of-area enrollment is not allowed on OHP plans. Eligible employees who live, work or reside in states other than New York may be covered on certain OHI products that provide for out-of-state coverage in the employees' location. These OHI products are available only to the extent OHI may offer out-of-area coverage in the employees' location. When an eligible employee is located outside of the Oxford service area, the following rules apply:

- Out-of-area enrollment is only allowed on either our OxfordUSA product or our OHI products with a Freedom Network. These products have access to the UnitedHealthcare Choice Plus national network.
- Out-of-area enrollment cannot exceed 75 percent of the total employees enrolled on all Oxford products.
- Only one OxfordUSA plan design is allowed. The OxfordUSA plan is available only if the group does not select an OHI plan for the out-of-area enrollees.

D. Plan Design Rider Rules: If the group selects multiple plan design options, the following rider rules apply:

- Pharmacy riders must be the same for all plan options, except for federally qualified Health Savings Account (HSA) plans, which require the deductible for medical and pharmacy to be the same.
- For all other riders, all plan options must have the same riders (e.g., Vision, Dental). There can be variations in the rider benefit level among the options if available.

- Rider rules do not apply if the rider is not available with the product selected (e.g., alternative medicine).
- If a renewing group makes a plan change, the plan design rider rules will apply.

E. Multiple Plan Design Rules:

- Multiple plan design options can be offered as point of enrollment (POE) (e.g., High Plan vs. Low Plan) or by class distinction (e.g., Salaried vs. Hourly).
- Additional multiple plan design rules apply to OHI (see next section).
- If a renewing group makes a plan change, the OHI multiple plan design rules (below) will apply.

F. Documentation Requirements: If the below required documents are not provided within the required timeframe, the group will be denied enrollment, non-renewed or terminated. We may audit groups before or after enrollment/renewal. If we enroll or renew a group and a post enrollment/renewal audit shows the group did not meet the requirements at the time of enrollment and was not eligible for coverage, the group will be terminated.

Required documents:

- Group Application (new business or Certification Form (renewing business))
- Eligible waivers (required for all new business, renewing groups on audit and groups renewing into a new market segment)
- The Quarterly Combined Withholding, Wage Reporting and Unemployment Insurance Return Form (NYS-45) or alternative tax documentation detailed in “Instruction Sheet – Oxford NYSG Tax Form Submissions.”

Additional documentation may be required upon audit.

ADDITIONAL REQUIREMENTS FOR OXFORD HEALTH INSURANCE, INC. (OHI) PRODUCTS

The following additional requirements apply to all applications or renewals of coverage on our OHI insurance products:

A. Minimum Participation – Calculation:

- A minimum of 51 percent of all eligible employees after valid waivers must be enrolled.
 - Valid waivers consist of: Spousal, Medicare, Medicaid and Veteran’s Coverage.
 - If the group offers retiree coverage, a minimum of 51 percent of all eligible employees after valid waivers and all eligible former retired employees must be enrolled. (Additional documentation may be required on audit to confirm retirees’ eligibility for coverage.)
- To determine total enrollment for the purpose of calculating participation, we will count employees and eligible former retired employees (if applicable) enrolled in both OHI and OHP products. Former employees enrolled through COBRA or state continuation are not counted.

B. Minimum Participation – Other Employer Sponsored Coverage:

- Other employer sponsored health insurance coverage may not be offered alongside OHI products. This would prevent both carriers from meeting New York state minimum participation requirements.
- Other employer sponsored HMO coverage may be offered alongside OHI products, but is not considered a valid waiver and may impact a group’s ability to meet minimum participation requirements for OHI products.
- Coverage may be limited to specific class(es) of employees if they are the only employees offered coverage in New York.
 - Class(es) may be determined only by conditions pertaining to employment: geographic situs of employment, earnings, method of compensation, hours and occupational duties. As noted previously, our products are not available to cover employees who work less than 20 hours per week.
 - Example: Employer only offers coverage to employees who work 40 hours per week.
 - Example: If employer only offers coverage to a management class, coverage is available for the class. However, if the group offers coverage to both management and non-management employees in the New York service area, both classes must be covered by Oxford; OHI coverage is not available only for the management class.

C. Multiple plan design rules:

- Groups that have 14 or less eligible employees enrolled may select one in-area OHI plan design option.
- Groups that have 15 or more eligible employees enrolled may select two in-area OHI plan design options.
- More than two OHI plan design options will not be allowed.
- The OxfordUSA plan is only available for out-of-area enrollment and will not count toward the total number of plan design options allowed.