

ENROLLEE REQUIREMENTS

Employees

In order to be eligible for coverage, employees must work full time (20 or more hours per week), and must appear on the State Quarterly Payroll Reports (DE-6) or be an active company owner or corporate officer **actively at work**. They must also have satisfied the company's waiting period. Note that coverage always begins on the first of the month, and will become effective on the first of the month following completion of the firm's waiting period. Every eligible employee must complete the appropriate enrollment application OR a signed declination form and submit it to the Benefits Consultant or Plan Administrator for processing. All paperwork should be submitted no later than the 15th of the month prior to the requested effective date of coverage. Applications not received in a timely manner are considered "late" enrollments and may be subject to evidence of insurability or late entrant restrictions and limitations as determined by the carriers.

Employees or dependents who decline coverage and then experience a Qualifying Event may enroll in the plan outside of the normal Open Enrollment period. However, all required documentation must be submitted within 30 days of the event, or the enrollee will have to wait until the next Open Enrollment.

Dependents

Eligible dependents include a legally married spouse, registered domestic partner and unmarried children from birth to age 19. Requirements for dependency, student status and maximum age vary by carrier.

Layoff

Group coverage may not continue when an employee is laid off and no longer "Actively at Work". If the employer would like to offer benefits as part of a severance package, the employer may choose to pay for Cal-Cobra or COBRA coverage for a specified period of time. It is the employee's responsibility to elect Cal-Cobra or COBRA coverage if it is available. The company's policy must be in the Employee Manual and all employees must be treated equally. When an employee is laid off and later rehired, the rehire policy below is followed.

Leave of Absence

Depending on the circumstance, employees on a leave of absence may be considered for coverage under our plans. However, in all cases, the carrier's contracted leave of absence policies will be administered for scenarios such as FMLA, non-workers comp related disability, military duty and workers' compensation leave.

Rehires

Employees who are not on payroll for any reason (i.e., layoff, termination, seasonal employment, etc.) for a period longer than 90 days will be required to meet the employer's eligibility waiting period as stated on the Employers Participation Agreement (PA) before being eligible to rejoin the plan. The waiting period will begin the date the employee returns from the time off work. If an employee is rehired within 90 days, the waiting period will be waived allowing him or her to enroll on the 1st of the month following the date of rehire, only if the employee was previously enrolled in the Exchange/Association Health Plan under the same employer. In all other cases, the employer's waiting period must be met as stated above.

Compliance and Legislation

The health plans will be subject to any applicable state or federal legislation and the benefits and rates will be adjusted to comply in accordance with sponsored carrier policies.

- COBRA • Consolidated Omnibus Budget Reconciliation Act of 1986
- FMLA • Federal Family and Medical Leave Act of 1993
- USERRA • Uniformed Services Employment and Re-Employment Rights Act of 1994
- HIPAA • Health Insurance Portability & Accountability Act of 1996
- HMHPA • Newborns' and Mothers' Health Protection Act of 1997
- Cal-COBRA • The Continuation of Benefits Replacement Act of 1998 (California State Law)
- WHCRA • Women's Health and Cancer Rights Act of 1998
- Medicare Part D • Medicare Prescription Drug, Improvement and Modernization Act of 2003
- MHPA • Mental Health Parity Act of 1997
- CMS • Centers for Medicare and Medicaid Services - Reporting Compliance