

Group Information



The one Texans trust.

What Benefits Administrators Need to Know

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Small Group Eligibility Rules

Eligibility Rules for Groups with 2-50 employees

- Must be offered to all employees who work an average of 30 hours per week.
- Employer must agree to contribute at least 50% of the single premium for each employee.
- 75% of eligible employees must participate in the plan.
An eligible employee is one who works an average of 30 hours a week and is not covered by another health plan, i.e. spouse, military, Medicare, etc. All eligible employees must work or reside within the Scott & White Health Plan service area.
- Eligible businesses must have an address within the Scott & White Health Plan service area.

Large Group Eligibility Rules

Eligibility Rules for Groups with 51 or more employees

Optional Carrier (at least one additional carrier is offered)

- A copy of the benefit summary and/or EOC for the other carrier's plan must be provided to us. We will review the summary to be certain that there are no limitations in the other carrier's plan for services that Scott & White Health Plan does not limit. (e.g. Transplants, specific prescriptions, specific conditions, etc.)
- Participation must be at least 70% of the eligible employees within our service area for the combined plans, with SWHP enrolling at least 25%.
- SWHP will only quote rates with the same tier structure (or a higher number of tiers) as the competition.
- The employer contribution for our plan must be at or above the employer contribution for other plan(s) offered. In addition, after adjusting for plan benefit design, the differential between employee contributions to participating plan premiums should not exceed the lesser of \$20.00 or 10% of SWHP single premium.
- We reserve the right to re-evaluate our rates and benefit design based on a review of the renewal rates and benefit designs of the other carrier(s). SWHP reserves the right to withdraw its offer completely, or make changes to its benefits and rates, in order to be comparable to the other carrier's benefits and rates.
- Retirees cannot exceed 15% of actives. If retirees exceed 15% of actives the group must meet the loss ratio per the rate certification or the rates may be adjusted to achieve a satisfactory loss ratio.
- COBRA enrollees cannot exceed 10% of actives.

Sole Carrier (SWHP is only carrier)

- Participation of at least 70% of eligible employees is required.
- The employer contribution must be at least 50% of the single premium. Dual option plan offerings must be at least 50% of the single premium on all plan options.
- If the group's enrollment and/or eligible population changes by 20% or more, we reserve the right to re-rate the group.
- COBRA enrollees cannot exceed 10% of actives.
- Retirees cannot exceed 15% of actives. If retirees exceed 15% of actives the group must meet the loss ratio per the rate certification or the rates may be adjusted to achieve a satisfactory loss ratio.

Employee Eligibility Rules

- You determine your eligibility requirements for your employees, such as their waiting period.
- Termination of coverage is end of month – per Senate Bill 51 – SWHP will terminate end of month of written notification.
- You have the option to change your eligibility requirements each year during your annual renewal.
- This information can be found on your Premium Rate Sheet.

Enrollment Rules

Employees

- Current Employees
- New Employees
- Part Time Employee going to Full Time Status
- Notice of Late Enrollment Rights

Enrollment Rules

Current employees

- Any full time employee who has completed his/her waiting period may enroll, terminate, or add/delete dependents during open enrollment.
- Open enrollment is the month prior to your anniversary date.
- All applications for open enrollment must be turned in no later than the last day of the month of your anniversary. Any applications received after that date will be considered late.
- A late enrollee will have a 90-day waiting period beginning the date SWHP receives the application.

Enrollment Rules

New Employees

- A signed application must be received by SWHP within 31 days of your employee's effective date in order to avoid late enrollment.
- If SWHP receives an application 32 days or more after the employee's effective date, that employee will be added as a late enrollee.
- Late enrollees have a 90-day waiting period beginning the date SWHP receives the application.
- Applications may be
 - Faxed - 979-846-6962, attention Membership. **We suggest retaining your fax confirmation as proof of receipt by SWHP.**
 - E-mailed – swhpgroupenrollment@swmail.sw.org
 - Mailed – 3000 Briarcrest, Suite 422, Bryan, TX 77802, attention Membership

Enrollment Rules

Part time employee going to full time status

- A signed application must be received by SWHP within 31 days of changing to full time.
- If the employee has satisfied your eligibility waiting period, the effective date of coverage will be the 1st of the month following receipt of application.

Notice of Late Enrollment Rights

- Informs employees of their right to enroll at a later time.
- Must be signed by employees who do not wish to join SWHP.

Loss of Coverage

Loss of Coverage

- If an employee or dependent loses coverage elsewhere, they may enroll in SWHP.
- A signed application must be received by SWHP within 31 days of the loss of coverage.
- Effective date will be 1st of the month after receipt of application.
- Must provide proof of loss, e.g. HIPAA Certificate, letter from employer, etc.

Court Orders

Court Orders

- Existing employee with court order to provide medical coverage for child/children
- Existing employee with court order to provide medical coverage for spouse

Court Orders

Existing employee with court order to provide medical coverage to child/children

- A signed application and court order, National Medical Support Order or letter from Attorney General's office must be received by SWHP within 31 days after the receipt of order by employer.
- The effective date will be the date the order was received by employer or SWHP, whichever is earliest.
- **Note:** Employee must have completed new hire waiting period.

Court Orders

Existing employee with court order to provide medical coverage for spouse

- A signed application and court order must be received by SWHP within 31 days after issuance of the order.
- Effective date will be the 1st day of the month after the order & application is received.
- **Note:** Employee must have completed the new hire waiting period.

Dependent Rules

Adding Dependents

- Existing employee who declined coverage now has a newborn or newly adopted child or new spouse.
- Existing employee adding a newborn child
- Existing employee adding new spouse and/or children (other than newborn or newly adopted child)
- Existing employee adding newborn grandchild
- Existing employee adding newly adopted child

Dependent Rules

Existing employee who previously declined coverage, now has a newborn or newly adopted child or new spouse.

- A signed application must be received by SWHP within 31 days after the birth or adoption of child or date of marriage.
- The effective date of coverage will be the date of birth or date of adoption.
- If new spouse, effective date will be 1st of the month following receipt of application.
- **Note:** Employee, spouse and applicable newborn or adopted child may be added at this time only. Any other dependents being added will be late enrollees.

Dependent Rules

Existing subscriber adding a newborn child

- A signed application must be received by SWHP within 60 days of newborn's date of birth.
- Effective date will be the newborn's date of birth.
- **Note:** Spouse may also be added at this time. Effective date for spouse will be 1st of the month following receipt of application. Any other dependents added will be late enrollees.

Dependent Rules

Existing subscriber adding new spouse and/or children (other than newborn or newly adopted child)

- A signed application must be received by SWHP within 31 days of the date of marriage or acquisition of child.
- Effective date will be 1st day of the month after application is received by SWHP.
- **Note:** To add a Common-law spouse, the employee must provide a 'Declaration of Informal Marriage' as proof of Common-law marriage. Either the date of the certificate or the date indicated as the date of marriage will be the 'event date' to begin the 31 days.

Dependent Rules

Existing employee adding newborn grandchild

- A signed application and grandchild affidavit must be received by SWHP within 31 days of the newborn grandchild's date of birth.
- The effective date will be the newborn's date of birth.
- **Note:** Employee must have completed the new hire waiting period.

Dependent Rules

Existing employee adding a newly adopted child

- A signed application must be received by SWHP within 60 days of adoption, or date adoption proceedings began.
- Effective date will be either the date of adoption, the date the child was placed in the employee's home for adoption, or date the employee became a party to a lawsuit for adoption.
- **Note:** Employee must have completed the new hire waiting period.

Termination of Coverage

Termination of Group Coverage

- Please submit written notice of your intention to terminate group coverage with reason for termination to your Account Representative.

Termination of Employee Coverage

- You may terminate an employee's coverage:
 - Send an application stating the termination date and reason.
 - Note: Senate Bill 51 – timely notification rules

Provider Directory

- A printed directory of providers is available for the benefits coordinator to have on hand if you so desire.
- The directory contains names and locations of Primary Care Physicians, Specialists, hospitals, clinics, pharmacies, eye examiners, eyewear providers, and dental providers.
- We also provide a way to search for providers according to name, location, or specialty on our website. Go to www.swhp.org and click on Find a Provider.

Benefits

- Medical
- RX
- Dental
- Life
- Flexible Spending Accounts and Premium Only Plans
- Health Savings Accounts

Medical

3 TYPES:

HMO

- In-Network
- Managed Care

Major Medical

- In-Network AND
- Out of Area

Self Funded

- Anywhere

RX – Prescription Plans

Prescription riders are included on small group HMO plans. They are optional on MEDesign Major Medical Plans. They are offered with or without deductibles.

Prescription riders are optional on large group plans but are highly recommended.

MetLife - Dental

Maximum benefit amount pertains to
CALENDAR YEAR*

- ▶ 3 Plans
 - Basic, Mid, & High
- ▶ Can go to any dentist of choice
- ▶ Incentive discounts to go to MetLife dentist (providers listed at www.metlife.com/dental)
 - Pay less out-of-pocket

***A separate contract that goes by calendar year, NOT the Group's HMO contract year**

MetLife - Life Insurance

100% Employer Paid:

- Flat \$25,000
- Flat \$50,000
- Dependent
- Custom

Employer Contribution NOT Required:

- Buy-Up
- Short Term Disability
- Long Term Disability

Note: Group size determines type and amount of life insurance available to the group.

FSA – Flexible Spending Accounts

POP – Premium Only Plans

Flexible Spending Accounts (FSA)

- Funds are allocated from each paycheck on a pre-tax basis to a “spending account”
 - Health Care Reimbursement Account (HCRA)
 - Dependent Care Reimbursement Account (DCRA)

Premium Only Plans (POP)

- Premiums are taken from the employee’s paycheck on a pre-tax basis; no “spending account”

Advantages to You

- Tax savings for employer and employees
- Affordable
- Flexible
- Improves Morale

Health Savings Accounts

Health Savings Accounts (HSAs) were designed to help individuals save for future qualified medical and retiree health expenses on a tax-free basis. The employer, employee - or both - can fund the account. A qualified high deductible health plan (QHDHP) must be in place in order to offer an HSA. Funds roll over from year to year, and are portable.

Federal COBRA and Texas State Continuation of Coverage (COC)

- ▶ It's a Law
 - www.dol.gov for more info
- ▶ Employees are entitled to it
- ▶ Receive same benefits as with prior employer
- ▶ 2 Options for Employers
 - Administer it yourself
 - Elect Conexis (3rd party COBRA administrator) free of charge
- ▶ Small Groups (< 20 employees)
 - State Continuation of Coverage (COC) – 9 months only
- ▶ Large Groups (20+ employees)
 - Federal COBRA – 18 months
 - State COC – additional 6 months

Yearly Contract Renewal Period

- ▶ Only time plan changes can be made
- ▶ Renewal paperwork **MUST** be completed on time
 - Ensures that 1st billing of new contract year is correct

Essential Paperwork

Renewal Paperwork

- Employee Census Form
 - All FULL TIME employees (30+ hours/wk) must be listed
 - Verifies participation
- TWC Report (or pay stubs if applicable)
- Disclosure Notice for all HMO CONSUMER CHOICE Benefit Plans Issued in Texas (if applicable)
- Signed Plan/Rate Confirmation