

Guidelines for Large Groups

Empire BlueCross BlueShield now makes it easier than ever for you to sell and enroll large groups.

Enroll Large Groups:

- **Establish Eligibility**
- **Submit the Paperwork**

Products include:

PPO • EPO • POS

HMO • Empire Total BlueSM



www.empireblue.com

Establish Eligibility

In order to establish eligibility, your groups must meet the following requirements in terms of:

Eligibility for Large Groups			
Group Size	Large Groups are defined as businesses that have more than 50 employees.		
Employee Status	<ul style="list-style-type: none"> • Eligible employees <ul style="list-style-type: none"> - Active full-time employees working at least 20 hours per week - Owners, partners, officers of a business, elected public officials or paid members of the Board of Directors - COBRA employees and retirees (however, no COBRA-only groups, nor Retiree-only groups) • Ineligible employees <ul style="list-style-type: none"> - Part-time, temporary, seasonal employees - Consultants and independent contractors (1099 employees) • Optional exclusions <ul style="list-style-type: none"> - Union-affiliated employees 		
Minimum Participation	<ul style="list-style-type: none"> • PPO, EPO, POS and Empire Total BlueSM (our family of Consumer-Directed Health Products) require 75% minimum participation. With spousal waiver, this minimum requirement decreases to 67% participation for group sizes 51–100, and 60% participation for group sizes over 100. There is no required minimum participation for HMO. Product combinations involving PPO, EPO and Empire Total BlueSM products, in combination with an HMO, must adhere to the minimum participation requirement. 		
Product Combinations	<p>All product combinations (including PPO, EPO, POS, HMO and Empire Total BlueSM products) have 25% maximum rate spread, except for the HMO hi/low option, which has a maximum rate spread of 15%. <i>The following product combinations have additional requirements:</i></p> <ul style="list-style-type: none"> • For the PPO/POS combination, plan designs between the two products must be similar for groups with less than 500 contracts. • The PPO/POS (hi/low) combination is only allowed for 250 contracts and over, and the plan design between PPO and low POS must be similar. • The HMO hi/low option is only allowed for full replacement business (i.e., Empire is the only carrier). <p><i>These product combinations are not permitted:</i></p> <ul style="list-style-type: none"> • EPO/HMO • POS/HMO • HRA/HSA (These products are included in the Empire Total BlueSM family of products.) 		
Employer Location	<p>Businesses must have a bona fide New York address within Empire's Operating Area. Empire's Operating Area is divided into three regions, which include the following counties:</p> <ul style="list-style-type: none"> • Downstate: Bronx, Kings, Nassau, New York, Queens, Richmond, Rockland, Suffolk, and Westchester • Mid-Hudson: Dutchess, Orange, Putnam, Sullivan, and Ulster • Upstate: Albany, Columbia, Delaware, Essex, Fulton, Greene, Montgomery, Rensselaer, Saratoga, Schenectady, Schoharie, Ulster, Warren, and Washington 		
Employee Location	<p>Depending on the product selected, groups must have a certain percentage of their eligible employees residing in Empire's Operating Area or in the following contiguous counties of New Jersey and Connecticut:</p> <ul style="list-style-type: none"> - NJ Contiguous Counties include: Bergen, Essex, Hudson, Middlesex, Monmouth, Passaic, Sussex, Union - CT Contiguous Counties include: Fairfield, Litchfield <p>Please see chart below for in-area requirements.</p>		
In-Area Requirements		PPO/EPO/Total Blue SM	POS ¹
Insured	51–200 contracts	50%	70%
	201–350 contracts	40%	60%
	351–500 contracts	30%	50%
	501+ contracts	25%	25%
ASO	ASO without Stop-loss	No Restrictions	No Restrictions ²
	ASO with Specific Stop-loss	50%	50% ²

1. Because POS products are designed to be local in nature, we require greater number of enrolled employees to reside within our Network Area.

2. ASO is available for DirectShareSM POS, not Direct POS.



Submit the Paperwork

For standard products, please submit a complete sales package at least 30 days prior to the next effective date. For non-standard, please allow more advance time.

Sales Package Requirements

Signed Group Application

- Group Name, Address
- Federal Tax ID
- GBA name (if GBA is not employed by group, authorization letter required)
- New employee eligibility
- Company contribution
- Manner of payment
- Tier structure
- Coverage options, including all rider information
- Broker declaration
- Rates
- Renewals

Group Contract for Community HMO

- Provide all requested information, including additional riders and open enrollment period.

New Member Application

- Include member's social security number and dependent information.
- For employees over 65, where Medicare is primary coverate, submit copy of Health Insurance Benefit (HIB) cards.

Financial Agreement for PPO, EPO, POS, and Empire Total BlueSM

- Please note the riders must remain in effect for a minimum of 12 months. If a group discontinues a rider, that group may not repurchase that rider for at least 12 months following the date of discontinuance.
- Also note that changes in group eligibility, rate structure, or benefits may be made only on the group's renewal date.

Additional HRA or HSA documents for Empire Total BlueSM product offerings.

- Please contact your Empire Sales Rep for additional detail.

Effective Dates and Submission Dates

Effective Dates for new business are on the 1st and 15th of the month. New business must be submitted at least 30 business days prior to the effective date. Any incomplete portions of a sales package may result in the delay of your client's effective date.

Mailing Address

Please send your completed sales package to your assigned Empire sales representative.

Empire Support

• Broker Website

For the most up-to-date eligibility guidelines, product information, and necessary forms, please visit www.empireblue.com and click on the Broker tab.

This document is for Broker reference purposes only. Empire reserves the right to modify, change, amend or delete these procedures.

Special Notes on Calculating Minimum Participation

- For groups with more than one Empire product, the total number of enrolled eligible employees across all lines of business (excluding HMO) is used when determining if the account meets minimum participation requirements.
- However, enrolled employees in HMO count toward minimum participation when the coverage purchased is a full replacement.
- When offering a POS plan, employees living outside the eligible area may be excluded when calculating participation.
- Once the non-eligible population and other exclusions are deducted, the minimum participation may be calculated for the group. (Do not include COBRA members, retirees, or spouses of retirees.)

Empire BlueCross BlueShield Large Group Product Combination Guidelines:

Allowable Product Combinations:

Plan		Dual Option Allowed?	Hi and Low Plan Maximum Rate Spread	Other Requirements
PPO	(Hi/Low)	Yes	25%	
PPO	EPO	Yes	25%	
PPO	POS	Yes	25%	Plan designs of the two products must be similar for groups under 500 contracts
PPO	POS (Hi/Low)	Yes	25%	Only allowed for 250+ contracts Plan designs of PPO and Low POS must be similar
PPO	HMO	Yes	25%	
EPO	(Hi/Low)	Yes	25%	
EPO	POS	Yes	25%	
EPO	HMO	No	n/a	
POS	(Hi/Low)	Yes	25%	
POS	HMO	No	n/a	
HMO	(Hi/Low)	Yes	15%	Only allowed for full replacement business, i.e., Empire is the only carrier
Empire Total BlueSM				
HRA or HSA	PPO	Yes	25%	
HRA or HSA	EPO	Yes	25%	
HRA or HSA	POS	Yes	25%	
HRA or HSA	HMO	Yes	25%	
HRA	HSA	No	n/a	
HRA	(Hi/Low)	Yes	25%	
HSA	(Hi/Low)	Yes	25%	

Rate spreads are calculated by dividing the price difference by the low plan premium.

Empire Total Blue ChoiceSM and Empire Total Blue SelectSM – our new family of consumer-directed product offerings delivering greater healthcare cost management to both employers and members. These high-deductible plans include a range of member incentives and funding options, and you can select from in-network only (Empire Total Blue SelectSM) and in-and out-of-network coverage (Empire Total Blue ChoiceSM) plans. Members can self-refer to any licensed provider to receive covered services.

