



## CASE INSTALLATION

### 1. **Small Group/Sole Proprietor Eligibility Sheet**

- A. The group must be actively in business with a street address in one of the five Boroughs: Bronx, Brooklyn, Manhattan, Queens, or Staten Island.
- B. Atlantis requires all enrolling subscribers to reside or work in the contracted area: Bronx, Brooklyn, Manhattan, Queens, or Staten Island
- C. Full-time is defined as actively at work at least 20 hours per week and a group must have at least one full-time employee to remain active. ***Sole Proprietor/1099 cases must be submitted with a Schedule C or 1099.***
- D. Owners, Partners and Officers must meet minimum hourly requirements. POS participation requirement is 50% participation after spousal waivers. There are no minimum requirements for HMO groups. Employees not electing coverage must submit a waiver form with case submission.
- E. Medicare recipients are eligible as long as they meet the criteria in #1C.
- F. Eligible dependents are defined as a legally married spouse or a legally dependent child up to the age of 19. Student rider up to age 23 is included in community rates if financially dependent and enrolled as a full-time student at an accredited educational institution. Riders to age 25 and age 29 are also available.
- G. The following are excluded from eligibility and coverage:
  - a. Part-time employees (19 hours or less)
  - b. Seasonal workers & temporary personnel
  - c. Retirees
- H. ***Should Easy choice Health Plan of New York determine that group information is materially false, we reserve the right to terminate or deny coverage.***

- 2. **To enroll a new case, all completed documents must be submitted to Easy Choice Health Plan of New York no later than the fourth Monday of the month preceding the effective date.**
- 3. **Groups enrolling 5 or more employees are allowed 2 plan options. Only one tier structure is allowed.**



4. **All of the following information is required before processing**
- A. Social Security Number
  - B. Date(s) of birth for all individuals applying
  - C. Complete address
  - D. Date of marriage (if applicable)
  - E. Physician selection
  - F. Employment effective (start) date
  - G. Dependent information
  - H. Employer, as well as Employee, signature
  - I. All small group businesses must supply the following tax documentation to Easy Choice Health Plan of New York:
    - a. Most recent Quarterly Wage & Tax Statement: NYS 45
    - b. If not required to file Wage & Tax Statement, one of the following is required:
      - i. Business Type Requirements
        - 1. *If a "C" corporation*: Articles of incorporation, form 1120 (line 13 is wages) and payroll documents
        - 2. *If a Church*: Form 941 (line 2 is wages) and payroll documents
        - 3. *If an LLC*: LLC agreement and the appropriate documentation noted above
        - 4. *If a Partnership*: K-1 or Form 1065 (line 9 is wages) and payroll documents and business license
        - 5. *If an "S" corporation*: Articles of incorporation, form 1120S (line 8 is wages) and payroll documents
        - 6. *If a Sole Proprietor*: Business license, form 1040/Schedule C (line 26 is wages) and payroll documents
      - c. If the business has been in existence less than 1 year and has not yet filed a Quarterly Wage and Tax Statement, Easy Choice Health Plan of New York will accept Corporation or Partnership papers and payroll documents.



***Please note, incomplete applications will be returned and may affect the requested effective date.***

**5. Required Documentation for Case Installation**

- A. Group Agreement Form
- B. Sales Submission Form
- C. Check for 1<sup>st</sup> month premium from the employer's business account
- D. Fully completed original employee enrollment forms and waiver forms (if applicable). Faxes or copies are not acceptable
- E. Previous Insurance Coverage Form for all enrolling subscribers and dependents
- F. Quarterly wage and tax statements (NYS 45) for small groups and Schedule C/1099 tax documents for Sole Proprietors/1099 employers (See chart below for tax)
- G. Applicable Student Verification Form accompanied by original sealed document from educational institution
- H. Previous Insurance Coverage Form and copy of current carrier bill on small groups (if applicable)

**6. Enrollment & Waiting Periods**

- A. Groups are eligible for coverage on the 1<sup>st</sup> of the month only. We will accept 15<sup>th</sup> of the month effective dates only when an existing policy (effective 15<sup>th</sup> of the month) is in place.
- B. Open enrollment will be held once a year on the group's anniversary or renewal date.
- C. PLAN CHANGES. An official at the company should submit plan changes to Easy Choice Health Plan of New York no later than one month after initial enrollment. If no changes are made, the next period to change benefits will be during open enrollment.
- D. Employee waiting periods can be 0, 30, 60 and/or 90 days but may not exceed 6 months.



- E. New employees will be able to enroll in the plan on the first of the month following the plan's waiting period.
- F. Employees who are terminated will be covered until the last day of the month in which the termination occurred. All terminations must be submitted either on a completed termination form or on company letterhead.
- G. Those who decline coverage and subsequently wish to enroll without a qualifying event will only be eligible to enroll during the next annual open enrollment period.

**Qualifying Event: An unexpected event that will terminate an employee's participation in another health plan. An example of a qualifying event is the loss of coverage through a spouse losing a job**

