

# Group Requirements

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As an active member in any participating Exchange/Association your company is eligible to enroll in the exclusive group insurance program contracted through the North Bay Builders Exchanges Insurance Trust (NBBE).

## COMPANY ELIGIBILITY REQUIREMENTS

1. Member firms are eligible to enroll in the group insurance program within the first **60 days** after Exchange/Association membership activation date.
2. After the activation date, a member firm may have an effective participation date upon one of the following:
  - During the first 60 days of meeting Exchange/Association membership eligibility;
  - During the Open Enrollment period, if the Exchange/Association eligibility membership has been met;
  - Within 60 days of no longer being subject to a collective bargaining agreement;
  - Within 60 days of non-renewal with a competitive carrier.
3. **Kaiser Medical**  
**Group minimum participation requirements:**
  - 75% minimum after valid waivers: Groups with 3 or more eligible employees
  - 100% minimum after valid waivers: Groups which are 2-person firms
  - Firms with only 2 enrolling subscribers have limited plan choices to only 1 carrier and 1 plan option.
4. **NEW Anthem Small Group Medical**  
**Group minimum participation requirements if offering only Anthem:**
  - 70% minimum after valid waivers: Groups with 1-14 eligible employees
  - 50% minimum after valid waivers: Groups with 15 or more eligible employees
  - Minimum participation is 100%, if noncontributory (100% employer-paid)**Group minimum participation requirements if offering Anthem + Kaiser:**
  - 25% minimum after valid waivers (Kaiser through NBBE is not a valid waiver) or 5 employees, whichever is greater, will need to enroll in Anthem: Groups with 5-100 eligible employees**Ineligible for small group coverage:**
  - Owner only – owners on their own or with their spouse/domestic partners, officers or partners
  - Carve-out groups
  - Employer groups with less than 51% of employees working in California
  - Seasonal, temporary and substitute employees, defined as employees hired with a planned future termination date
  - Contract employees (1099), employees compensated on a 1099 basis
  - Sole proprietors, spouse of sole proprietors, partners of a partnership, and the spouses of those partners
  - Employees who do not reside within the 48 contiguous states, Alaska, Puerto Rico, or the United States Virgin Islands

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## Employee eligibility requirements overview:

- Permanent employees who are actively engaged on a full-time basis in the conduct of the business of the small employer, with a normal work week of an average of 30 hours per week over the course of a month, at the small employer's regular place of business, who have met any statutorily authorized applicable waiting-period requirements.
- Sole proprietors or partners of a partnership, if they are actively engaged on a full-time basis (average of 30 hours per week over the course of a month) in the employer's small business and included as employees under a health care service plan contract of a small employer.
- Permanent employees who work at least 20 hours, but not more than 29 hours, are deemed to be eligible employees if all four of the following apply:
  - i. The employee otherwise meets the definition of an eligible employee except for the number of hours worked.
  - ii. The employer offers the employees health coverage under a health benefit plan.
  - iii. All similarly situated individuals are offered coverage under the health benefit plan.
  - iv. The employee worked at least 20 hours per normal workweek for at least 50% of the weeks in the previous calendar quarter. The health care service plan may request any necessary information to document the hours and time period in question, including, but not limited to, payroll records and employee wage and tax filings.

Note: Owners may demonstrate that they meet the eligible employee criteria by providing W-2s or completing an Eligibility Statement.

5. **Dental** – Firms with 1-5 enrolling subscribers must have 100% participation. Firms with 6 or more may have 75% participation in dental plan. Dental plans are available on a “stand-alone” basis for all size groups.
6. **Vision** – When vision is the only plan being offered (stand-alone), 100% of all eligible employees must enroll. In all other cases, vision enrollment must match medical enrollment.
7. **Basic Group Life** – 100% Employer-paid benefit and 100% of all eligible employees must enroll.
8. **Optional Group Life** – Individual coverage with no group requirements. Requires individual underwriting approval.

All eligible member firms must be in business a minimum of one full calendar quarter and submit a DE-9C, proof of payroll, or other accepted official ownership documents. Wage information is required to determine eligibility of part-time, temporary, or seasonal employees.

Firms that are terminated for non-payment or cancel their medical, dental, vision or life coverage must wait a minimum of 12 months before they can re-enroll with any NBBE Exchange/Association Health Plan and then may do so only during an Open Enrollment period.