

# 1/21 Small Business Group Dental and Vision Adult Buy-Up Guidelines

### Group Eligibility:

- 2-100 employees with over 50% of the total group located in California, subject to out-of-area requirements below.
- Owner-only groups are not eligible. There must be a minimum of one W-2 employee who is not a spouse of the owner or partner.
- Out-of-Area Requirements
  - A maximum of 49% of the group's eligible and enrolling populations may be out of state.
  - Eligible employees residing in the United States, but outside of the California service area, may be written on a PPO plan.
- Carve-outs are not available.
- Health Net SBG dental and/or vision coverage is not available to guaranteed associations.
- Dental and/or Vision may be written on a standalone basis or in conjunction with Medical.

# Employee Eligibility:

- Probationary period for new hires can be first of the month following: date of hire, 1 month, 30 days, or 60 days. *Note:* the probationary period must match Medical.
- Eligible employees can be defined as employees working at least 20 or 30 hours per week. *Note:* the hours per week must match Medical.
- 1099 employees are not eligible for coverage.
- With the exception of owners, all employees must be covered by workers' compensation.

#### Dependent Eligibility:

 Although dependents under age 19 have access to pediatric dental benefits through their medical plan, they may also be enrolled onto a dental buy-up plan to access enhanced benefits. *Note:* Cosmetic orthodontia is available through Plus DHMO 150 and 225, and DPPO Classic 5 and Essential 5 only.

#### Eligibility Verification:

- Groups enrolling in Employer Paid Dental and/or Vision plans must submit their most current DE9C. NOTE: Payroll and/or ownership documentation is required for anyone not on the DE9C.
- Groups enrolling in Voluntary Dental and/or Vision plans are not required to submit a DE9C as long as they meet the minimum enrollment requirements.

# Contribution/Participation/Minimum Enrollment:

- Employer paid rates require a minimum employer contribution of 50% of the employee premium and a minimum participation of 50% of the eligible employees. *Note:* Employees waiving coverage due to group coverage through another employer (i.e. spousal coverage) will not count against participation.
- Voluntary rates apply to those cases with less than 50% contribution and/or less than 50% participation.
- A minimum of 2 active subscribers per plan is required, unless otherwise noted below.

# Rate Information:

- 12-month rate guarantee for cases sold/renewed in conjunction with Medical.
- Cases sold off cycle from Medical will have their first renewal in conjunction with Medical.

# Submission:

- All cases requesting coverage on the 1<sup>st</sup> must be submitted by the 5<sup>th</sup> of the month for which coverage is to be effective.
- Mid-month effective dates are not allowed.

# Vision Details:

• Dual Choice Vision is not available.

# Dental Details:

- Orthodontia is available in all DHMO plans.
- Orthodontia is available to Employer Paid DPPO groups of 2-9 active subscribers with proof of immediately prior indemnity orthodontic coverage.
- Orthodontia is available to all Employer Paid and Voluntary DPPO groups of 10 or more active subscribers. Proof of prior indemnity orthodontic coverage is not required.
- Dual Choice Dental is available. Groups may select 1 DHMO and 1 DPPO, 2 DHMO, or 2 DPPO plans, with a minimum of 2 active subscribers on each plan.