

2024 Medical Underwriting Guidelines

Use this tool to compare underwriting rules across medical carriers. Click on a category in the [table of contents](#) to quickly navigate to the corresponding section of the document.



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Carve Outs

Aetna	Anthem Blue Cross	Blue Shield
<ul style="list-style-type: none"> Non-Union carve-outs allowed Min 5 CA enrollees Total group size (union and non-union) must be 100 or fewer FTEs 	<ul style="list-style-type: none"> Non-Union carve-outs allowed Total group size (union and non-union) must be 100 or fewer FTEs 	<ul style="list-style-type: none"> Non-Union carve-outs allowed Total group size (union and non-union) must be 100 or fewer FTEs
CaliforniaChoice	Covered CA for Small Business	Health Net
<ul style="list-style-type: none"> Non-union carve-outs allowed Total group size (union and non-union) must be 100 or fewer FTEs 	<ul style="list-style-type: none"> Non-union carve-outs allowed Total group size (union and non-union) must be 100 or fewer FTEs 	<ul style="list-style-type: none"> Non-Union carve-outs allowed Total group size (union and non-union) must be 100 or fewer FTEs
Kaiser Permanente	UnitedHealthcare	
<ul style="list-style-type: none"> Non-union carve-outs allowed Total group size (non-union) must be 100 or fewer FTEs 	<ul style="list-style-type: none"> Non-Union carve-outs allowed Total group size (union and non-union) must be 100 or fewer FTEs 	

DE-9C

Aetna	Anthem Blue Cross	Blue Shield
<ul style="list-style-type: none"> 1-4 Enrolled: Required 5-100 Enrolled: Not required Required if 10% employees located out-of-state, 20% COBRA/CalCOBRA enrollees, or group is associated, affiliated, or multiple companies 	<ul style="list-style-type: none"> Required 3-100 Enrolled: May submit carrier bill in lieu of DE-9C 25+ Enrolled: Attestation Form only; group must be coming off a Trust, Association, LG non-Renewal, and Spin-Off from a Large Employer 	<ul style="list-style-type: none"> 1-2 enrolled, less than 3 FTE or more than 95 FTE- Required 3+enrolled: not required
CaliforniaChoice	Covered CA for Small Business	Health Net
<ul style="list-style-type: none"> 1-5 Enrolled: Required 6+ Enrolled: Prior carrier bill; DE-9C required if no prior coverage; payroll required for enrolling Employees not listed on bill or a lapse in coverage of more than 3 months 	<ul style="list-style-type: none"> Required 	<ul style="list-style-type: none"> 1-4 Enrolled: Required 5+ Enrolled: Not required
Kaiser Permanente	UnitedHealthcare	
<ul style="list-style-type: none"> Not required 	<ul style="list-style-type: none"> 1-2 Enrolled: Required 3-100 Enrolled: Participation Certification Form 	

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Effective Date

Aetna	Anthem Blue Cross	Blue Shield
<ul style="list-style-type: none"> 1st of month 15th of month (only if no prior coverage or prior carrier termination coincides) Renewal will be 15th of the month 	<ul style="list-style-type: none"> 1st of month 15th of month Renewal will be 1st of the month following (ex: 12/15/2022 renews 1/1/2023) 	<ul style="list-style-type: none"> 1st of month 15th of month (PPO only; when group loses Medical coverage mid-month) Renewal will be 1st of the month following (ex: 12/15/2022 renews 1/1/2023)
CaliforniaChoice	Covered CA for Small Business	Health Net
<ul style="list-style-type: none"> 1st of month 	<ul style="list-style-type: none"> 1st of month 	<ul style="list-style-type: none"> 1st of month 15th of month allowed (only when group loses Medical coverage mid-month) Renewal will be 1st of the month following (ex: 12/15/2022 renews 1/1/2023)
Kaiser Permanente	UnitedHealthcare	
<ul style="list-style-type: none"> 1st of month 	<ul style="list-style-type: none"> 1st of month (HMO and PPO) 15th of month (PPO) Renewal will be 15th of the month 	

Eligibility

Aetna	Anthem Blue Cross	Blue Shield
<ul style="list-style-type: none"> Full-Time: 30+ hrs/week Part-Time: 20+ hrs/week for at least 50% of the previous calendar quarter 1099 Employees: Not eligible 	<ul style="list-style-type: none"> Full-Time: Avg 30+ hrs/week over 1 month Part-Time: 20+ hrs/week for at least 50% of the weeks in the previous calendar quarter 1099 Employees: Not eligible 	<ul style="list-style-type: none"> Full-Time: Avg 30+ hrs/week over 1 month Part-Time: 20+ hrs/week for 50% of the previous calendar quarter 1099 Employees: Not eligible
CaliforniaChoice	Covered CA for Small Business	Health Net
<ul style="list-style-type: none"> Full-Time: Avg 30+ hrs/week over 1 month Part-Time: 20+ hrs/week for at least 50% of the previous calendar quarter 1099 Employees: Not eligible 	<ul style="list-style-type: none"> Full-Time: Avg 30+ hrs/week over 1 month Part-Time: 20+ hrs/week for at least 50% of the previous calendar quarter 1099 Employees: Not eligible 	<ul style="list-style-type: none"> Full-Time: Avg 30+ hrs/week over one month Part-Time: 20+ hrs/week for 50% of the previous calendar quarter 1099 Employees: Not eligible
Kaiser Permanente	UnitedHealthcare	
<ul style="list-style-type: none"> Full-Time: Avg 30+ hrs/week over one month Part-Time: 20+ hrs/week 1099 Employees: Not eligible 	<ul style="list-style-type: none"> Full-Time: Avg 30+ hrs/week over 1 month Part-Time: 20-29 hrs/week for 50% of the previous calendar quarter 1099 Employees: Not eligible 	

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Employer Contribution

Aetna	Anthem Blue Cross	Blue Shield
<ul style="list-style-type: none"> Traditional: Min 50% of employee premium Defined: Min \$80 per employee 	<ul style="list-style-type: none"> Traditional: Min 50% of employee premium Defined: Min \$100 per employee HSA Plans: Min employer contribution required. See summary 	<ul style="list-style-type: none"> Traditional: Min 50% of employee premium Defined: Min \$100 per employee
CaliforniaChoice	Covered CA for Small Business	Health Net
<ul style="list-style-type: none"> Traditional: Min 50% of employee premium of lowest cost plan Defined: Min 50% of employee premium of lowest cost plan 	<ul style="list-style-type: none"> Traditional: Min 50% of employee premium of lowest cost plan* <p><i>* In selected Metal Tier</i></p>	<ul style="list-style-type: none"> Traditional: Min 50% of the lowest cost plan Defined: Min \$100 per employee
Kaiser Permanente	UnitedHealthcare	
<ul style="list-style-type: none"> Traditional: Min 50% of employee premium of lowest cost plan 	<ul style="list-style-type: none"> Traditional: Min 50% of employee premium Defined: Min \$100 of employee premium HSA Plans: Employer contributions may impact the plans actuarial value; contact B&P for details 	

Group Size

Aetna	Anthem Blue Cross	Blue Shield
<ul style="list-style-type: none"> 1-100 FTEs 	<ul style="list-style-type: none"> 1-100 FTEs 	<ul style="list-style-type: none"> 1-100 FTEs
CaliforniaChoice	Covered CA for Small Business	Health Net
<ul style="list-style-type: none"> 1-100 FTEs 	<ul style="list-style-type: none"> 1-100 FTEs 	<ul style="list-style-type: none"> 1-100 FTEs
Kaiser Permanente	UnitedHealthcare	
<ul style="list-style-type: none"> 1-100 FTEs 	<ul style="list-style-type: none"> 1-100 FTEs 	

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Life Offerings

Aetna <ul style="list-style-type: none">• N/A	Anthem Blue Cross <ul style="list-style-type: none">• 2-9 Enrolled: \$15,000, \$25,000, \$30,000, or \$50,000• 10-100 Enrolled: \$25,000 to \$350,000	Blue Shield <ul style="list-style-type: none">• 2-9 Eligibles: \$30,000• 10-24 Eligibles: \$100,000• 25-100 Eligibles: \$150,000
CaliforniaChoice <ul style="list-style-type: none">• 1-10 Enrolled: \$25,000• 11-25 Enrolled: \$50,000• 26-100 Enrolled: \$75,000	Covered CA for Small Business <ul style="list-style-type: none">• N/A	Health Net <ul style="list-style-type: none">• 2-14 Eligibles: \$15,000• 15-24 Eligibles: \$25,000• 25-100 Eligibles: \$50,000
Kaiser Permanente <ul style="list-style-type: none">• N/A	UnitedHealthcare <ul style="list-style-type: none">• 2-5 Eligibles: \$25,000• 6-19 Eligibles: \$50,000• 20-50 Eligibles: \$100,000• 2-99 Eligibles: \$15,000 (SBS package)	

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Network Options

Aetna	Anthem Blue Cross	Blue Shield
<ul style="list-style-type: none"> HMO Networks: Full HMO, Value HMO, HMO Deductible, Basic HMO, PrimeCare PPO Networks: MC, Savings Plus MC (Southern CA only), EPO Network Pairing: All networks may be mixed-&-matched, up to 10 plans 	<ul style="list-style-type: none"> HMO Networks: CaliforniaCare HMO (Full), Select HMO, Priority Select HMO, Vivity HMO PPO Networks: Prudent Buyer PPO (Full), Select PPO Standard HMO Network Pairing: CaliforniaCare HMO may be paired with Select HMO or Select HMO may be paired with Priority Select HMO (CaliforniaCare and Priority Select may not be paired together) Network Pairings: Both PPO networks alongside 2 HMO networks (Including Vivity), OR both PPO networks alongside Select HMO, Priority Select HMO, and Vivity HMO Networks (EXCLUDING CA Care) 	<ul style="list-style-type: none"> HMO Networks: Access+ (Full), Local Access+, Trio ACO PPO Networks: Full, Tandem Network Pairing: Networks may be mixed-&-matched except the Local Access+ which cannot be offered alongside the Access+
CaliforniaChoice	Covered CA for Small Business	Health Net
<ul style="list-style-type: none"> HMO Networks: Anthem, Health Net, Kaiser, Sharp, Sutter Health Plus, UHC, Western Health Advantage PPO Networks: Anthem (Tiered PPO and Select PPO plans do not include Sutter) EPO Networks: Anthem, Oscar Network availability will be determined based on selected metallic level 	<ul style="list-style-type: none"> HMO Networks: Blue Shield, Kaiser, Sharp PPO Networks: Blue Shield EPO Networks: Oscar Network availability will be determined based on selected metallic level 	<ul style="list-style-type: none"> HMO Networks: Full HMO, WholeCare HMO, SmartCare HMO, Salud HMO, CommunityCare PPO Networks: Full PPO, PureCare HSP, EnhancedCare PPO Network Pairing: All networks may be mixed-&-matched
Kaiser Permanente	UnitedHealthcare	
<ul style="list-style-type: none"> HMO: Kaiser Permanente PPO: MultiPlan 	<ul style="list-style-type: none"> HMO Networks: Signature HMO (Full), Advantage HMO, Alliance HMO, Focus HMO PPO Networks: Select Plus PPO, Select EPO, Core PPO, Navigate EPO Network Pairing: Full and Narrow HMO networks may be offered alongside one another 	

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Open Enrollment

Aetna	Anthem Blue Cross	Blue Shield
<ul style="list-style-type: none"> • Yes: Medical • No: Dental 	<ul style="list-style-type: none"> • Yes: All products 	<ul style="list-style-type: none"> • Yes: All products
CaliforniaChoice	Covered CA for Small Business	Health Net
<ul style="list-style-type: none"> • Yes: Medical; other products with Medical 	<ul style="list-style-type: none"> • Yes: All products 	<ul style="list-style-type: none"> • Yes: All products
Kaiser Permanente	UnitedHealthcare	
<ul style="list-style-type: none"> • Yes: All products 	<ul style="list-style-type: none"> • Yes: All products 	

Out-of-Area/State

Aetna	Anthem Blue Cross	Blue Shield
<ul style="list-style-type: none"> • Max 49% of eligibles out-of-state • Employees and dependents in Hawaii, Missouri and Vermont are not eligible • Out-of-state employees must reside in Open Access MC Network to be eligible. 	<ul style="list-style-type: none"> • Majority of eligible must live in CA • Group must be headquartered in CA • Employees and dependents in Hawaii are not eligible 	<ul style="list-style-type: none"> • Max 49% of eligibles and enrolled out-of-state • Employees and dependents in Hawaii are not eligible
CaliforniaChoice	Covered CA for Small Business	Health Net
<ul style="list-style-type: none"> • Max 49% of eligibles OOS • Principal executive office must be in CA • Employees and dependents in Hawaii are not eligible • EE zip code may be required to validate 51% eligible in CA 	<ul style="list-style-type: none"> • Max. 49% OOS (for groups with >50% OOS enrollment, please call B&P to determine eligibility) • Principal executive office must be in CA • Employees and dependents in Hawaii are not eligible 	<ul style="list-style-type: none"> • Max 49% of eligibles OOS • Employees and dependents in Hawaii are not eligible
Kaiser Permanente	UnitedHealthcare	
<ul style="list-style-type: none"> • Max OOS subscribership cannot exceed 49% of overall group enrollment 	<ul style="list-style-type: none"> • Max 49% of eligibles OOS for CA rates • If no majority state, rating occurs in state with largest enrollee population • If multiple states possess same number of enrollees, rating occurs in headquarter state • Max 25% may be located in VT 	

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Out-of-Network Reimbursement

Aetna <ul style="list-style-type: none">• 100% of Medicare	Anthem Blue Cross <ul style="list-style-type: none">• Fee Schedule	Blue Shield <ul style="list-style-type: none">• Fee Schedule
CaliforniaChoice <ul style="list-style-type: none">• Fee schedule	Covered CA for Small Business <ul style="list-style-type: none">• Physician Reimbursement: RBRVS• Hospital Reimbursement: Medicare• Blue Shield: Fee schedule	Health Net <ul style="list-style-type: none">• Physician Reimbursement: RBRVS• Hospital Reimbursement: Medicare
Kaiser Permanente <ul style="list-style-type: none">• HMO: N/A• PPO: Fee schedule	UnitedHealthcare <ul style="list-style-type: none">• 110% of Medicare	

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Owners and Husband & Wife Groups/Enrollment

Aetna	Anthem Blue Cross	Blue Shield
<ul style="list-style-type: none"> • Husband & wife only groups without W2 employee(s): Not allowed • Husband & wife enrollment with W2 employee(s): Allowed with W2 enrolling employee • Owner only groups without W2 employee(s): Not allowed • Owner enrollment with W2 employee(s): Allowed with W2 enrolling employee 	<ul style="list-style-type: none"> • Husband & wife only groups without W2 employee(s): Not allowed • Husband & wife enrollment with W2 employee(s): Allowed with W2 eligible employee • Owner only groups without W2 employee(s): Allowed if they meet the following: <ol style="list-style-type: none"> 1. Group is a C-Corp or LLC 2. There are at least two owners (non-spouses) 3. One of the owners is on the DE-9C or can sign the Eligibility Statement • Owner enrollment with W2 employee(s): Allowed with W2 eligible employee 	<ul style="list-style-type: none"> • Husband & wife only groups without W2 employee(s): Not allowed • Husband & wife enrollment with W2 employee(s): Allowed with W2 eligible employee • Owner only groups without W2 employee(s): Not allowed • Owner enrollment with W2 employee(s): Allowed with W2 eligible employee
CaliforniaChoice	Covered CA for Small Business	Health Net
<ul style="list-style-type: none"> • Husband & wife only groups without W2 employee(s): Not allowed • Husband & wife enrollment with W2 employee(s): Allowed with W2 enrolling employee • Owner only groups without W2 employee(s): Not allowed • Owner enrollment with W2 employee(s): Allowed with W2 enrolling employee 	<ul style="list-style-type: none"> • Husband & wife only groups without W2 employee(s): Not allowed • Husband & wife enrollment with W2 employee(s): Allowed with W2 eligible employee • Owner only groups without W2 employee(s): Not allowed • Owner enrollment with W2 employee(s): Allowed with W2 eligible employee 	<ul style="list-style-type: none"> • Husband & wife only groups without W2 employee(s): Not allowed • Husband & wife enrollment with W2 employee(s): Allowed with W2 eligible employee • Owner only groups without W2 employee(s): Not allowed • Owner enrollment with W2 employee(s): <ul style="list-style-type: none"> ○ Allowed with W2 eligible employee ○ Allowed with officer who is also a W2 eligible employee
Kaiser Permanente	UnitedHealthcare	
<ul style="list-style-type: none"> • Husband & wife only groups without W2 employee(s): Not allowed • Husband & wife enrollment with W2 employee(s): <ul style="list-style-type: none"> ○ Allowed with W2 eligible employee ○ Husband/wife may qualify as a W2 eligible employee if group is a Corp or LLC • Owner only groups without W2 employee(s): Not allowed • Owner enrollment with W2 employee(s): <ul style="list-style-type: none"> ○ Allowed with W2 eligible employee enrolled in Kaiser or other group coverage <p>Officer may qualify as W2 eligible employee if group is a Corp or LLC</p>	<ul style="list-style-type: none"> • Husband & wife only groups without W2 employee(s): Not allowed • Husband & wife enrollment with W2 employee(s): Allowed with W2 enrolling employee • Owner only groups without W2 employee(s): Not allowed <ul style="list-style-type: none"> ○ Owner enrollment with W2 employee(s): Allowed with W2 enrolling employee 	

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Participation (alongside another HMO carrier)

Aetna	Anthem Blue Cross	Blue Shield
<ul style="list-style-type: none"> 25%, min 5 enrolled with Aetna in CA Waivers required Other carrier bill not required 	<ul style="list-style-type: none"> 25%, min 5 enrolled Waivers required Other carrier bill not required 	<ul style="list-style-type: none"> 25%, min 5 enrolled Waivers not required Other carrier bill or other carrier enrollment form
CaliforniaChoice	Covered CA for Small Business	Health Net
<ul style="list-style-type: none"> Carriers within the portfolio do not require their own min participation Enrollment alongside another carrier is not allowed 	<ul style="list-style-type: none"> 1-100 Enrolled: 70% Waivers required Other carrier bill not required 	<ul style="list-style-type: none"> 1-4 Enrolled: 70% 5-100 Enrolled: 25% Sell HMO with 6 Enrolled: 0% Waivers required Other carrier bill not required
Kaiser Permanente	UnitedHealthcare	
<ul style="list-style-type: none"> 1-100 Enrolled: 50% combined (other carrier and Kaiser) Not allowed alongside CalChoice or CCSB or level-funded plans or self-funded plans 	<ul style="list-style-type: none"> Choice Simplified: 25% combined (other carrier and UHC) and min 5 enrolled with UHC in CA Multi-Choice State Plans: 25% with UHC Other carrier bill is required Other carrier applications required if not on bill 	

Participation (sole carrier)

Aetna	Anthem Blue Cross	Blue Shield
<ul style="list-style-type: none"> 1-4 Enrolled: 60% 5-100 Enrolled: 25% 100% contribution requires 100% participation 	<ul style="list-style-type: none"> 1-4 Enrolled: 65% 5-100 Enrolled: 25% 100% contribution requires 100% participation 	<ul style="list-style-type: none"> 1-4 Enrolled: 65% 5-100 Enrolled: 25% 100% contribution allowed with valid waivers
CaliforniaChoice	Covered CA for Small Business	Health Net
<ul style="list-style-type: none"> 1-2 Enrolled: 100%; must include 1 Medically enrolled EE who is not an owner or spouse of an owner 3-100 Enrolled: 70% 100% contribution allowed with valid waivers 	<ul style="list-style-type: none"> 1-100 Enrolled: 70% 	<ul style="list-style-type: none"> 1-4 Enrolled: 70% 5-100 Enrolled: 25% Sell HMO with 6 Enrolled: 0%
Kaiser Permanente	UnitedHealthcare	
<ul style="list-style-type: none"> 1-100 Enrolled: 50% 	<ul style="list-style-type: none"> 1-4 Enrolled: 60% 5+ Enrolled: 25% 	

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Participation Calculation (alongside another HMO carrier)

Aetna	Anthem Blue Cross	Blue Shield
<ul style="list-style-type: none"> Start with total eligibles then: <ul style="list-style-type: none"> Subtract COBRA enrollees Subtract valid waivers Multiply remaining eligibles by 25% Eligible for Aetna Pick 10 if: <ul style="list-style-type: none"> Aetna enrollees + valid waivers = 25% and Min 5 Aetna enrollees in CA 	<ul style="list-style-type: none"> Start with total eligibles then: <ul style="list-style-type: none"> Subtract COBRA enrollees Subtract valid waivers Multiply remaining eligibles by 25% Eligible for Anthem if: <ul style="list-style-type: none"> Anthem enrollees = 25% and Min 5 Anthem enrollees 	<ul style="list-style-type: none"> Start with total eligibles then: <ul style="list-style-type: none"> Subtract COBRA enrollees Subtract valid waivers Multiply remaining eligibles by 25% Eligible for Blue Shield if: <ul style="list-style-type: none"> Blue Shield enrollees = 25% and Min 5 Blue Shield enrollees in CA
CaliforniaChoice	Covered CA for Small Business	Health Net
<ul style="list-style-type: none"> Not applicable 	<ul style="list-style-type: none"> Start with total eligibles then: <ul style="list-style-type: none"> Subtract COBRA enrollees Subtract valid waivers 1-100: Multiply remaining eligible by 70% 	<ul style="list-style-type: none"> Start with total eligibles then: <ul style="list-style-type: none"> Subtract COBRA enrollees Subtract valid waivers 1-4: Multiply remaining eligibles by 70% 5-100: Multiply remaining eligibles by 25%
Kaiser Permanente	UnitedHealthcare	
<ul style="list-style-type: none"> Start with total eligibles then: <ul style="list-style-type: none"> Subtract COBRA enrollees Subtract valid waivers 1-100: Multiply remaining eligibles by 50% 	<ul style="list-style-type: none"> Choice Simplified: Start with total eligibles then: <ul style="list-style-type: none"> Subtract COBRA enrollees Subtract valid waivers Multiply remaining eligibles by 25% Eligible for UHC if: <ul style="list-style-type: none"> UHC and other carrier enrollees = 25% and Min 5 UHC enrollees in CA 	

Product Options (medical)

Aetna	Anthem Blue Cross	Blue Shield
<ul style="list-style-type: none"> 1-100: Metallic tiers may be mixed-&-matched Plan Options: PPO/MC, HSA, HMO, EPO 	<ul style="list-style-type: none"> 1-100: Metallic tiers may be mixed-&-matched Plan Options: PPO, HSA, HMO, EPO 	<ul style="list-style-type: none"> 1-100: Metallic tiers may be mixed-&-matched Plan Options: PPO, HSA, HMO
CaliforniaChoice	Covered CA for Small Business	Health Net
<ul style="list-style-type: none"> 1-100: 1, 2, 3 or 4 adjacent metallic tiers may be offered Plan Options: PPO, HSA, HMO, EPO, HSP 	<ul style="list-style-type: none"> 1-100: 1, 2, 3 or 4 adjacent metallic tiers may be offered Plan Options: PPO, HSA, HMO 	<ul style="list-style-type: none"> 1-100: Metallic tiers may be mixed-&-matched Plan Options: PPO, HSA, HMO, EPO, HSP
Kaiser Permanente	UnitedHealthcare	
<ul style="list-style-type: none"> PPO is not available alongside another carrier 1-5 enrolled: 4 HMO plans (plus 1 PPO) 6+ enrolled: No maximum HMO plans (plus 1 PPO) 	<ul style="list-style-type: none"> 1-100: Metallic tiers may be mixed-&-matched; portfolios may not be mixed Plan Options: PPO, HSA, HMO, EPO 	

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Product Options (other)

Aetna	Anthem Blue Cross	Blue Shield
<ul style="list-style-type: none"> Dental NonVol (2+ eligibles; with Medical) Dental NonVol and Vol (3+ eligibles; standalone) Vision (2+ enrolled; standalone) 	<ul style="list-style-type: none"> Dental NonVol (2+ enrolled; standalone) Dental Vol (5+ enrolled; standalone) Disability (2+ enrolled; standalone) Life (2+ enrolled; standalone) Vision NonVol (2+ enrolled; standalone) Vision Vol (5+ enrolled; standalone) 	<ul style="list-style-type: none"> Dental NonVol and Vol (1+ eligibles; standalone) Life (2+ eligibles; standalone) Vision (1+ eligibles; standalone)
CaliforniaChoice	Covered CA for Small Business	Health Net
<ul style="list-style-type: none"> Dental NonVol and Vol (with Medical; enrollment varies by carrier) Life (1+ enrolled; with Medical) Vision Vol (1+ enrolled; with Medical) 	<ul style="list-style-type: none"> Dental 	<ul style="list-style-type: none"> Dental NonVol and Vol (2+ eligible; standalone) Life (10+ eligibles; standalone) Vision NonVol and Vol (2+ eligibles; standalone)
Kaiser Permanente	UnitedHealthcare	
<ul style="list-style-type: none"> Dental (all eligible employees are required to enroll if Dental is offered) 	<ul style="list-style-type: none"> Dental NonVol and Vol (2+ enrolled; standalone) Vision NonVol and Vol (2+ enrolled; standalone) Life (2-5 enrolled; with Medical / 6+ enrolled; standalone) 	

Provider Directory

Aetna	Anthem Blue Cross	Blue Shield
<ul style="list-style-type: none"> DocFind 	<ul style="list-style-type: none"> Find a Doctor 	<ul style="list-style-type: none"> Find a Provider
CaliforniaChoice	Covered CA for Small Business	Health Net
<ul style="list-style-type: none"> Provider Search 	<ul style="list-style-type: none"> Provider Search 	<ul style="list-style-type: none"> Provider Search
Kaiser Permanente	UnitedHealthcare	
<ul style="list-style-type: none"> Find a Doctor 	<ul style="list-style-type: none"> Find a Physician 	

Qualifying Event Window

Aetna	Anthem Blue Cross	Blue Shield
<ul style="list-style-type: none"> 60 days 	<ul style="list-style-type: none"> 60 days 	<ul style="list-style-type: none"> 60 days
CaliforniaChoice	Covered CA for Small Business	Health Net
<ul style="list-style-type: none"> 60 days 	<ul style="list-style-type: none"> 60 days 	<ul style="list-style-type: none"> 60 days
Kaiser Permanente	UnitedHealthcare	
<ul style="list-style-type: none"> 60 days 	<ul style="list-style-type: none"> 60 days 	

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Rate Adjustments

Aetna	Anthem Blue Cross	Blue Shield
<ul style="list-style-type: none">January, April, July, October	<ul style="list-style-type: none">January, April, July, October	<ul style="list-style-type: none">January, April, July, October
CaliforniaChoice	Covered CA for Small Business	Health Net
<ul style="list-style-type: none">January, April, July, October	<ul style="list-style-type: none">January, April, July, October	<ul style="list-style-type: none">January, April, July, October
Kaiser Permanente	UnitedHealthcare	
<ul style="list-style-type: none">January	<ul style="list-style-type: none">January, April, July, October	

Rates

Aetna	Anthem Blue Cross	Blue Shield
<ul style="list-style-type: none">Employee & Dep: Employer zip codeOOS Employee: Employer zip codeNew Hire: Based on age at enrollment	<ul style="list-style-type: none">Employee & Dep: Employer zip codeOOS Employee: Employer zip codeNew Hire: Based on age at enrollment	<ul style="list-style-type: none">Employee & Dep: Employer zip codeOOS Employee: Employer zip codeNew Hire: Based on age at enrollment
CaliforniaChoice	Covered CA for Small Business	Health Net
<ul style="list-style-type: none">Employee & Dep: Employer zip codeOOS Employee: Employer zip codeNew Hire: Based on age at enrollment	<ul style="list-style-type: none">Employee & Dep: Employer zip codeOOS Employee: Employer zip codeNew Hire: Based on age at enrollment	<ul style="list-style-type: none">Employee & Dep: Employer zip codeOOS Employee: Employer zip codeNew Hire: Age at group's last anniversary
Kaiser Permanente	UnitedHealthcare	
<ul style="list-style-type: none">Employee & Dep: Employer zip code (13 enrolled employees in non-HQ region get separate contracts based on multiple ER zips)OOS Employee: Employer zip code (groups with OOS HQ and CA employees will receive region 4 rates)New Hire: Age at group's last anniversary	<ul style="list-style-type: none">Employee & Dep: Employer zip codeOOS Employee: Employer zip codeNew Hire: Based on age at enrollment	

2024 Medical Underwriting Guidelines

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Special Open Window (11/15–12/15 for 1/1 eff. Date)

Aetna	Anthem Blue Cross	Blue Shield
<ul style="list-style-type: none">• Group Size: Small group definition• Paperwork: Standard requirements including DE-9C, waivers and Attestation Form• No min participation or contribution• Alongside Another HMO Carrier: Not allowed	<ul style="list-style-type: none">• Group Size: Small group definition• Paperwork: Standard requirements including DE-9C and waivers• No min participation or contribution• Alongside Another HMO Carrier: Not allowed	<ul style="list-style-type: none">• Group Size: Small group definition• Paperwork: Standard requirements including DE-9C and waivers• No min participation or contribution• Alongside Another HMO Carrier: Allowed
CaliforniaChoice	Covered CA for Small Business	Health Net
<ul style="list-style-type: none">• Group Size: Small group definition• Paperwork: Standard requirements including DE-9C and waivers• No min participation or contribution• Alongside Another HMO Carrier: N/A	<ul style="list-style-type: none">• Group Size: Small group definition• Paperwork: Standard requirements including DE-9C and waivers• No min participation or contribution• Alongside Another HMO Carrier: Allowed	<ul style="list-style-type: none">• Group Size: Small group definition• Paperwork: Standard requirements including DE-9C and waivers• No min participation or contribution• Alongside Another HMO Carrier: Allowed
Kaiser Permanente	UnitedHealthcare	
<ul style="list-style-type: none">• Group Size: Small group definition• Paperwork: Standard requirements including DE-9C and waivers• No min participation or contribution• Alongside Another Carrier: Allowed	<ul style="list-style-type: none">• Group Size: Small group definition• Paperwork: Standard requirements including DE-9C and waivers• No min participation or contribution• Alongside Another HMO Carrier: Kaiser Only• Min 5 CA enrollees	

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Waiting Period

Aetna	Anthem Blue Cross	Blue Shield
<ul style="list-style-type: none">• 1st of month after date of hire• 1st of month after 30 days• 1st of month after 60 days• Exactly 90 days• If 1st of month DOH, effective date IS same day• Orientation Period: Excluded• Dual waiting periods are not allowed	<ul style="list-style-type: none">• 1st of month after date of hire• 1st of month after 1 month• 1st of month after 2 months• If 1st of month DOH, effective date IS NOT same day• Orientation Period: Excluded• Dual waiting periods are not allowed	<ul style="list-style-type: none">• 1st of month after date of hire• 1st of month after 30 days• 1st of month after 60 days• 90 days, with eligibility beginning on the 91st day• If 1st of month DOH, effective date IS NOT same day• Orientation Period: Excluded• Dual Waiting periods are not allowed
CaliforniaChoice	Covered CA for Small Business	Health Net
<ul style="list-style-type: none">• 1st of month after date of hire• 1st of month after 30 days• 1st of month after 60 days• If 1st of month DOH, effective date IS NOT same day• Orientation Period: Excluded• Dual waiting periods are not allowed	<ul style="list-style-type: none">• 1st of month after date of hire• 1st of month after 30 days• 1st of month after 60 days• If 1st of month DOH, effective date IS NOT same day• Orientation Period: Excluded• Dual waiting periods are not allowed• Group is responsible for administering waiting period	<ul style="list-style-type: none">• 1st of month after date of hire• 1st of month after 30 days• 1st of month after 1 month• 1st of month after 60 days• If 1st of month DOH, effective date IS NOT same day• Orientation Period: Excluded• Dual waiting periods are not allowed
Kaiser Permanente	UnitedHealthcare	
<ul style="list-style-type: none">• Up to 90 days maximum• If 1st of month DOH, effective date IS same day	<ul style="list-style-type: none">• 1st of month after date of hire• 1st of month after 30 days• 1st of month after 60 days• If 1st of month DOH, effective date IS NOT same day• Orientation Period: Excluded• Dual waiting periods allowed	

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Waivers

Aetna	Anthem Blue Cross	Blue Shield
<ul style="list-style-type: none">Valid:<ul style="list-style-type: none">Group spousal coverageGroup coverage with another ERCOBRA coverage with another ERMedicare / Medi-CalMilitaryIndividual & Individual ExchangeNon-Valid:<ul style="list-style-type: none">Group coverage through another HMO	<ul style="list-style-type: none">Valid:<ul style="list-style-type: none">Group spousal coverageGroup coverage with another ERCOBRA coverage with another ERMedicare / Medi-CalMilitaryHawaii state planIndividual & Individual ExchangeNon-Valid:<ul style="list-style-type: none">Group coverage through another HMO	<ul style="list-style-type: none">Valid:<ul style="list-style-type: none">Group spousal coverageGroup coverage with another ERCOBRA coverage with another ERMedicare / Medi-CalMilitaryIndividual & Individual ExchangeNon-Valid:<ul style="list-style-type: none">Group coverage through another HMO
CaliforniaChoice	Covered CA for Small Business	Health Net
<ul style="list-style-type: none">Valid:<ul style="list-style-type: none">Group spousal coverageGroup coverage with another ERCOBRA coverage with another ERMedicare / Medi-CalMilitaryHI state plan (Anthem only)Non-Valid:<ul style="list-style-type: none">Group coverage through another HMOIndividual & Individual Exchange	<ul style="list-style-type: none">Valid:<ul style="list-style-type: none">Group spousal coverageGroup coverage with another ERCOBRA coverage with another ERMedicare / Medi-CalMilitaryGroup coverage through another HMOIndividual & Individual Exchange	<ul style="list-style-type: none">Valid:<ul style="list-style-type: none">Group spousal coverageGroup coverage with another ERCOBRA coverage with another ERMedicare / Medi-CalMilitaryIndividual & Individual ExchangeGroup coverage through another HMO
Kaiser Permanente	UnitedHealthcare	
<ul style="list-style-type: none">Valid:<ul style="list-style-type: none">Group spousal coverageGroup coverage with another ERCOBRA coverage with another ERGroup coverage through ER with another carrierMedicare / Medi-CalMilitaryIndividual & Individual Exchange	<ul style="list-style-type: none">Valid:<ul style="list-style-type: none">Group spousal coverageGroup coverage with another ERCOBRA coverage with another ERMedicare / Medi-CalMilitaryIndividual & Individual Exchange	

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Wrapping Position

Aetna <ul style="list-style-type: none">• Statement of Understanding not required	Anthem Blue Cross <ul style="list-style-type: none">• Statement of Understanding not required	Blue Shield <ul style="list-style-type: none">• Statement of Understanding not required
CaliforniaChoice <ul style="list-style-type: none">• Statement of Understanding not required	Covered CA for Small Business <ul style="list-style-type: none">• Statement of Understanding not required	Health Net <ul style="list-style-type: none">• Statement of Understanding not required
Kaiser Permanente <ul style="list-style-type: none">• Not allowed on HMO plans, unless offering Kaiser HRA (funding ranges apply) or HSA plans	UnitedHealthcare <ul style="list-style-type: none">• Statement of Understanding not required	