

# Connecticut Small Group Attachment A-OHP

Oxford Health Plans (CT), Inc.

**Mailing Address:** 14 Central Park Drive, Hooksett, NH 03106 • [www.oxfordhealth.com](http://www.oxfordhealth.com)

## U N D E R W R I T I N G   G U I D E L I N E S

The following underwriting guidelines must be met for Oxford Health Plans (CT), Inc. ("Oxford") to accept this Application:

- A. The Employer confirms that of the employees eligible to be insured on the effective date by Oxford, no more than 49% live outside Oxford's service area.
- B. **Participation Requirements:**
  - The Employer confirms Employer groups of 2-9 lives (of the eligible employees to be insured on the effective date by Oxford) must have 75% of eligible employees enroll onto the health plan.\*
  - Employer groups of 10-50 lives (of the eligible employees to be insured on the effective date by Oxford) must have 65% of eligible employees enroll onto the health plan. \*
- C. The Employer confirms that the Applicant has been registered with a Connecticut State Tax ID number for three consecutive months prior to the effective date, the Applicant has not been in bankruptcy or reorganization, and is currently in full compliance with all loan agreements and credit facilities which the Applicant is a party to.
- D. The Employer confirms that it will always contribute at least 50% of the total premium for all employee health coverage.
- E. The Employer confirms that the deposit equals one month's premium.

\* All ineligible employees and employees that are waiving coverage due to spousal coverage (signed waivers required) are subtracted from the total number of employees when determining participation requirements.