New Business Submission
Best Practices

Group enrollment forms are due to Memorial Hermann Health Plan (MHHP)

Small Group – Group Application must be submitted by the 20th of the month prior to the requested effective date. All other information must be submitted by the end of the month.

Large Group – Group Application must be submitted by the 1st of the month to receive an effective date for the same day. All other information must be submitted by the 10th of the same month.

Submitting documentation is an important step in the enrollment process. Incomplete documents can result in processing delays, and can also delay the receipt of member ID cards. MHHP forms can be downloaded from Resource Center on healthplan.memorialhermann.org. These best practices below help start the process correctly. Note: This list of tips may not be complete. In some instances, additional information or documentation may be required. If you have any questions, please contact your General Agent or MHHP sales executive.

Please review all documents to ensure they are complete prior to submitting them to MHHP.

Determining Group Size
Small Group is any Employer group with 2 to 50 eligible employees (including full-time equivalents.)

Large Group is any Employer group that averaged at least 51 eligible employees during the preceding calendar year. The eligible Employee count includes the Full-Time Equivalents (FTEQ), determined by the federal Shared Responsibility rule. The calculation of the FTEQ requires that the Employer add up all service and work hours of all part-time employees, then divide by 120. The end result is the number of “Full Time Equivalent Employees”. This number is added to the “full time employees”, and if the result is > 50 total employees, then the group is considered a “Large Group” for rating and underwriting purposes.

Confirming Group Eligibility
For Small Groups: At least 75% of eligible employees must enroll in the small group coverage plan. Use this formula to determine if a business will meet the participation requirement for enrollment:

- Count the total number of employees on the payroll
- + New hires (not yet on payroll)
- - Part-time employees
- - Seasonal employees
- - Temporary employees
- - Employees declining because they have other group coverage
- - Terminated employees
- - Employees serving an eligibility waiting period
- = Result
Submitting Documentation
Please review all documents to ensure that they are complete before submitting them to MHHP. Submitting incomplete documentation may result in processing delays and could prevent the group from being installed in a timely manner.

Initial Premium Payment
- □ Is the initial premium check made payable to the correct entity? Memorial Hermann Health Plan (for HMO plans) or Memorial Hermann Health Insurance Company (for PPO plans)?
- □ If a copy of the check was submitted with an electronic group submission, has the live check been sent to MHHP?
- □ Temporary checks will not be accepted.
- □ If the ACH Authorization was submitted, was it fully completed with the premium amount completed?
- □ Does the ACH indicate the payment option (e.g. initial, ongoing, or both)

Employer Group Application (EGA)
- □ Are all fields completed and legible?
- □ Is a complete street address provided?
- □ Do the name and address on the EGA match the information on the binder check?
- □ If applicable, are associated companies covered? (If yes, Common Ownership Certification Form must be submitted)
- □ Has the effective date been completed?
- □ Has the eligibility information been included?
- □ Has the Type of Business question been answered and SIC Code indicated?
- □ Has the number of employees section been completed accurately?
- □ Has the Prior Group Coverage question been completed?
- □ Has the insurance company history been included?
- □ Has the form been signed and dated?
- □ Is the EGA signed and dated?
- □ Has the Late Submission Form been submitted (if applicable)?

Enrollment Spreadsheet / Employee Applications
- □ Are there more than 10 employees enrolling? If so, has an enrollment spreadsheet been filled out?
- □ Has the Data Submission Agreement been completed for Spreadsheet Enrollment
- □ Have the name and address of employee been completed?
- □ Has the date of birth been completed?
- □ Has the date of hire been completed?
- □ Has gender been completed?
- □ Has the dependent tier information been provided?
- □ Has the dependent information been added?
- □ Has the product or plan election been completed?
- □ Is the application clear and legible?
- □ All fields in the previous coverage information section must be completed in order for employees to receive credit for prior coverage.
- □ When completing the Declination of health coverage section, ensure that the reason for declining coverage is selected when appropriate.

Proposal
- □ Did the group circle the rates for the selected plan(s)?
- □ Small Group should choose if they are requesting composite or age banded rates are the time of new business paperwork submission.
**Wage and Tax/Proof of Business Documentation**

- Was the most recent quarterly report/TWC provided?
- Are all employees designated as full-time, part-time, terminated/seasonal, union, COBRA or new hire?
- Is there an employee application or waiver for each eligible individual on the Wage and Tax form?
- Did we receive employee applications or waivers for individuals not on the Wage and Tax form? If yes, Employment Verification Form must be completed and submitted.
- Has the **Common Ownership Certification Form** been completed for Multiple Company Groups?

Examples of acceptable forms of proof of wages:

- Most current quarterly wage report from the Texas Workforce Commission (TWC), including the cover page;
- W-2s for existing employees and W-4s for new hires (boxes 8 and 10 on each W-4 are required)
- 1099 forms are an acceptable proof of wages for contract employees
- The most recent IRS filed tax documentation can be submitted for proof of wages for partners, owners, etc not listed on payroll reports
  - Corporations - IRS Schedule K-1 (Form 1120s)
  - Partnerships/LLP- IRS Schedule K-1 (Form 1065)
  - Sole Proprietorship - IRS Schedule C (Form 1040)
- For church/religious organizations, submit the IRS Form 941

Examples of acceptable forms of proof of business:

- Most current quarterly wage report from the Texas Workforce Commission (TWC), including the cover page; or
- All pages of any of the following documents filed with the state:
  - Articles of Incorporation
  - Articles of Organization
  - Certificate of Organization
  - Certificate of Limited Partnership
  - Limited liability company organizational documents

Other documents may be accepted for proof of business. Those listed above are examples of commonly used proof of business documentation. If you have questions concerning the documentation, consult your General Agent or MHHP sales executive.

**Prior Carrier Bill/Deductible Credit**

- Has the **Prior Carrier Bill** been reconciled to Wage and Tax form?
- For new groups, MHHP will credit members for the amount of the medical deductible satisfied under the prior carrier’s plan during the same calendar year. There is no deductible credit for outpatient prescription drug coverage. Deductible credit is applicable for calendar year to calendar year plans only. Members enrolling after open enrollment are not eligible for deductible credit.
- Has the **Deductible Credit Form** been submitted?

**COBRA & Medical Survey Form**

- Each field must be completed.
- The Employer Group Applications and the COBRA and Medicare Survey Form have multiple references to the total number of employees. Please make sure that all of these responses match.

**Common Submission Errors to Avoid**

- Application signatures are either missing or outdated.
- Submitting applications after 60 days. Signature dates over 60 days old are considered invalid.
- Waiver of coverage forms (if waiving coverage) is missing or incomplete (e.g. no reason given for waiving).
- The Employer Group Application (EGA) form is incomplete or inaccurate.
- The enrollment forms/spreadsheet is missing information (e.g. dependent DOB’s SSN’s, etc.
- The Wage and Tax form is incomplete or inaccurate, or the payroll information (if Wage and Tax form is not available) is missing or not reconciled.