CALIFORNIA VISION PARTICIPATION GUIDE



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TABLE OF CONTENTS

Aetna 3
Anthem Blue Cross 3
Blue Shield of California 4
CaliforniaChoice 5
ChoiceBuilder 5
Delta Dental 6
Guardian 6
Humana 7
MetLife 8
Principal 8
United Healthcare 9
VSP 9

This guide has been created as a quick reference and does not replace the full underwriting guidelines published by each carrier.
Please refer to the carrier guidelines for additional information.

aetna™

Employer Sponsored	Voluntary
• Voluntary only. No Employer Sponsored option offered	• Available to groups with two or more eligible. Minimum of 1 enrolled employee required • Group may only offer one vision plan to all employees • No minimum participation or contribution requirements • Waivers are not needed as participation is not required • Existing groups may only add vision at renewal
Owner Only Groups	
• Owner Only Groups are not eligible for coverage	
Spouses Only/Domestic Partner Only Groups	
• Spouses Only/Domestic Partner Only Groups are not eligible for coverage	
DE9C/Quarterly Wage Report Requirement	
• DE9C/Quarterly Wage Report/Payroll only required when sold alongside Medical for groups that do not qualify for the No DE9C promo/guidelines. Please review No DE9C Guide for full details	

Anthem

Employer Sponsored	Voluntary
• No employer contribution requirement for Vision as long as participation is met, using employer sponsored rates • Available for 2-100 eligible employees • A minimum of two employees must enroll • 25% participation for groups with 2-100 eligible with a minimum of 2 enrolled • Dual option is available (employer can select two plans to offer to employees). Employer may choose a maximum of two plans, but may not pair a voluntary plan with an employer-sponsored plan. Dual option requires at least 10 eligible employees. Two or more employees must enroll in each option	• Available for 5-100 eligible employees with a minimum of 2 enrolled • Dual option is available. Employer may choose a maximum of two plans, but may not pair a voluntary plan with an employer-sponsored plan. Dual option requires at least 10 eligible employees. Five or more employees must enroll in each option
Owner Only Groups	
• Owner Only Groups are eligible for coverage as long as the group's business entity is a type of Corporation such as LLC, S-Corporation, or C-Corporation • At least 2 eligible owners are required	
Spouses Only/Domestic Partner Only Groups	
• Spouses Only/Domestic Partner Only Groups are not eligible for coverage	
DE9C/Quarterly Wage Report Requirement	
• DE9C/Quarterly Wage Report/Payroll only required when sold alongside Medical for groups that do not qualify for the No DE9C promo/guidelines. Please review No DE9C Guide for full details	



Employer Sponsored	Voluntary
• Contributory plans require a minimum of one employee and at least 65% of all eligible employees must enroll in the Blue Shield plan(s) • Relaxed Requirements – At least 25% of the total number of eligible employees must enroll in the Blue Shield plan(s) and no fewer than 5 • Employees cannot split their enrollment between themselves and their dependent who is also enrolling as an employee. Whichever products an employee is electing must all be under employee coverage or all under dependent coverage through the other employee.	• At least one must enroll • No participation requirements • When offering a combination of contributory and voluntary plans, at least 1 employee and at least 65% of all eligible employees must enroll in the Blue Shield plans • PLEASE NOTE: Waivers are required for voluntary • Employees cannot split their enrollment between themselves and their dependent who is also enrolling as an employee. Whichever products an employee is electing must all be under employee coverage or all under dependent coverage through the other employee.
Owner Only Groups	
• Owner Only Groups are not eligible for coverage	
Spouses Only/Domestic Partner Only Groups	
• Spouses Only/Domestic Partner Only Groups are eligible for coverage as long as both are not owners • One of the spouses/domestic partners must be a W2 employee on payroll and not an owner • The group cannot be a Sole Proprietor or Partnership • Group must be an S-Corporation, C-Corporation, or an LLC	
Dual Option	
• Any two vision plans may be selected • Combined participation between the two plans must meet minimum requirements • If a voluntary plan is combined with a contributory plan, a total combined contribution of 25% is required	
DE9C/Quarterly Wage Report Requirement	
• DE9C/Quarterly Wage Report/Payroll required for groups that do not qualify for the No DE9C promo/guidelines. Please review No DE9C Guide for full details	



Employer Sponsored	Voluntary
****Only available with CaliforniaChoice Medical Plans****	
• Voluntary only. No Employer Sponsored option offered	• Vision coverage is offered on a voluntary basis • Medical must be offered but does not require medical enrollment • Participating carriers are EyeMed (provided by Ameritas Group) and VSP (provided by Ameritas) • The Employer cannot contribute towards the premium. • The plan must be 100% employee paid • There are no participation requirements for Voluntary Vision
Owner Only Groups	
• Owner Only Groups are not eligible for coverage	
Spouses Only/Domestic Partner Only Groups	
• Spouses Only/Domestic Partner Only Groups are not eligible for coverage	
DE9C/Quarterly Wage Report Requirement	
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Employer Sponsored	Voluntary
****Only available with Choice Builder Small Business Dental Plans****	
• Requires minimum 2 enrolled and 70% Participation • Minimum contribution requirement 50% • 100% contribution requires 100% enrollment. Waivers are not allowed.	• No minimum participation requirement • Employer contribution is not required
Owner Only Groups	
• Owner Only Groups are eligible for coverage • At least 2 eligible employees to enroll	
Spouses Only/Domestic Partner Only Groups	
• Spouses Only/Domestic Partner Only Groups are eligible for coverage • At least 2 eligible employees to enroll	

DELTA DENTAL®

Employer Sponsored	Voluntary
****Only available with Delta Dental Small Business Dental Plan****	
• Available to group size of 2-99 primary enrollees • Employer paid plans require at least 50% employer contribution towards single vision rate • Rate Tiers must align with dental rate tier selection • Vision membership must match dental if employer contribution is 100% • Vision membership matching dental membership is not required for plans where employer contribution is less than 100% • Vision employer contribution matching dental employer contribution is not required • NOTE: » 100% contribution requires 100% participation. No waivers allowed » If the employer is paying 100% of the employee premium, there will be no open enrollment allowance, except to switch plans if dual option choice is offered	• Available to group size of 2-99 primary enrollees • Rate Tiers must align with dental rate tier selection • Vision membership matching dental membership is not required for plans where employer contribution is less than 100% • Vision employer contribution matching dental employer contribution is not required
Owner Only Groups	
• Owner Only Groups are eligible for coverage • At least 2 eligible owners are required that are not comprised of a dependent relationship (e.g. spouses/domestic partners or parent and child under 26)	
Spouses Only/Domestic Partner Only Groups	
• Spouses Only/Domestic Partner Only Groups are not eligible for coverage	

Guardian®

Employer Sponsored	Voluntary
• Non-contributory (100% employer paid) – 100% participation, no waivers allowed • Contributory – 40%, minimum 2 enrolled	• 30% participation • Minimum 4 enrolled
Group size: 2-24 lives Rates for vision are impacted by the overall participation of the group. Quoting default is 75% participation if employer is offering 50% or more employer contribution or 50% participation if group has no prior coverage. Possible rate impact if participation drops below 65%	
Owner Only Groups	
• Owner Only Groups are eligible for coverage • At least 2 eligible employees to enroll	
Spouses Only/Domestic Partner Only Groups	
• Spouses Only/Domestic Partner Only Groups are not eligible for coverage	

Humana

Employer Sponsored	Voluntary
• 1+ group size (enrolled) written with medical and/or dental: » Participation is either 50% or one enrolled employee – whichever is greater » Groups not able to meet these participation requirements must enroll in a voluntary plan • 5+ group size (enrolled) written standalone » Participation is either 50% or five enrolled employees – whichever is greater » Groups not able to meet these participation requirements must enroll in a voluntary plan • NOTE: Once it has been determined at enrollment if the group will be enrolled in an employer-sponsored or voluntary plan, they will remain on this plan and will not be switched at renewal	• 1+ group size (enrolled) written with medical and/or dental: » A minimum of one enrolled employee is required • 5+ group size (enrolled) written standalone » A minimum of five enrolled employees is required • NOTE: Once it has been determined at enrollment if the group will be enrolled in an employer-sponsored or voluntary plan, they will remain on this plan and will not be switched at renewal • Dual Option: Two vision plans if the group has a minimum of 10 eligible and enrolled lives • Vision may be dual choice if ALL of the following requirements are met: » Plans offered must include an employer-sponsored Humana Vision Exam Plus and a voluntary full-coverage vision plan (i.e., Humana Vision 100, 130, 160, or 200) » The employer must contribute 100% of the Humana Exam Plus premium » 100% participation is required (all employees must enroll on one of the two plans offered) • If all of the above conditions are not met, the group cannot choose dual choice vision
Owner Only Groups	
• Owner Only Groups are eligible for coverage • At least 2 eligible owners are required. 1 may waive with a valid waiver reason	
Spouses Only/Domestic Partner Only Groups	
• Spouses Only/Domestic Partner Only Groups are eligible for coverage • At least 2 eligible employees are required. 1 may waive with a valid waiver reason	

MetLife

Employer Sponsored	Voluntary
• 50%-100% employer contribution is considered employer sponsored • Minimum of 10% participation with at least 5 enrolled • Employees age 65 and over must be less than 20% of the group	• 0%-49% employer contribution is considered voluntary • Minimum of 10% participation with at least 5 enrolled • Employees age 65 and over must be less than 20% of • the group
Owner Only Groups	
• Owner Only Groups are not eligible for coverage	
Spouses Only/Domestic Partner Only Groups	
• Spouses Only/Domestic Partner Only Groups are not eligible for coverage	

Principal℠

Employer Sponsored	Voluntary
• Contributory (50% minimum employer contribution) requires 50% participation • Non-contributory (100% employer paid) requires 100% participation • Minimum 2 enrolled	• Minimum 5 enrolled or 20% whichever is greater
Owner Only Groups	
• Owner Only Groups are eligible for coverage • At least 2 eligible owners are required to enroll	
Spouses Only/Domestic Partner Only Groups	
• Spouses Only/Domestic Partner Only Groups are eligible for coverage • At least 2 eligible employees are required to enroll	



Employer Sponsored	Voluntary
• Employer Paid: 75-100% employer contribution for both employees & dependents. At least 75% participation of eligible employees less valid waivers, not to fall below 50% of total eligible employees • Employee Core / Voluntary Dependents: 75-100% employer contribution for employees. No employer contribution requirements for dependents. At least 75% participation of eligible employees less valid waivers, not to fall below 50% of total eligible employees • 50% Employer Paid: 50-74% employer contribution for employees. No employer contribution requirements for dependents requires at least 75% participation of eligible employees less valid waivers, not to fall below 50% of total eligible employees	• 0-49% employer contribution for employees • No employer contribution requirements for dependents • Two eligible required, only 1 to enroll
Owner Only Groups	
• Owner Only Groups are not eligible for coverage	
Spouses Only/Domestic Partner Only Groups	
• Spouses Only/Domestic Partner Only Groups are not eligible for coverage	
DE9C/Quarterly Wage Report Requirement	
• DE9C/Quarterly Wage Report/Payroll required for groups that do not qualify for the No DE9C promo/guidelines. Please review No DE9C Guide for full details	



Employer Sponsored	Voluntary
• 75% employer contribution requires a minimum of 10 enrolled	• 0%-74% employer contribution requires a minimum of 10 enrolling
Owner Only Groups	
• Not applicable based on group size requirements	
Spouses Only/Domestic Partner Only Groups	
• Not applicable based on group size requirements	