

For brokers and producers only

Date: June 13, 2019

Market: **Small Groups**

CareFirst to Conduct Group Eligibility Audits

CareFirst BlueCross BlueShield (CareFirst) will begin performing eligibility reviews of small groups offering our health insurance plans. Our objective is to ensure customers understand and follow CareFirst's eligibility requirements in accordance with applicable laws and regulations. Eligibility reviews can also assist in controlling premium increases for small group customers.

Overview

To ensure groups meet eligibility requirements, CareFirst will be contacting a random sample of employer groups on a monthly basis to request documents. Requested documents include:

- Updated Group Census Report
- Employer's Quarterly Wage and Tax Report (MD, DC, VA) for past four quarters or other appropriate tax form*
- Completed Waiver of Enrollment forms (if applicable)
- Updated Full-Time Equivalency (FTE) Form

*If your business is a sole proprietorship or partnership and is not required to file the quarterly wage and tax report, a signed Schedule C or K1 tax form (for each partner) may be substituted.

The above documentation will be requested by letter [see sample](#) approximately six months prior to the group's renewal date. If a response is not received, a second letter will be sent approximately 30 days after the initial letter was sent. If a response is not received after the second letter, then a third and final letter will be sent approximately 30 days after the second letter. The final letter will also note that the group will not be renewed upon its renewal date if the requested documentation is not received within 30 days.

General producers, full-service producers and brokers will be notified, via e-mail, if a second or third letter is sent to the group. At that point, we may require your assistance to help ensure the requested documentation is submitted to CareFirst.

For more information

If you have any questions, please contact your broker sales representative.