



Carrier Requirements: Fully Insured

2025-2026

Requirements	AETNA	AVMED	CIGNA HEALTHCARE	FLORIDA BLUE / TRULI FOR HEALTH	FLORIDA HEALTH CARE PLANS	NATIONWIDE	UNITEDHEALTHCARE
Group Size Available (w/ER Support)*	50+ Employees. (<i><50 Eligible, contact your ER Sales Rep for options</i>)	4 Employees Enrolled - 150 Employees Eligible.	51-499 Employees Eligible.	4 Employees Enrolled - 499 Employees Eligible.	4 Enrolled - 499 Eligible Employees.	4+ Employees Enrolled.	4+ Employees Enrolled.
Segment Sizes	Large: 51+ ATNE.	<ul style="list-style-type: none"> Small: 2 Enrolled-50. Large: 51+ ATNE. 	Large: 51+ Eligible.	<ul style="list-style-type: none"> Small: 4 Enrolled - 50 ATNE. Large: 51+ ATNE. <i>Pre-ACA group segment is based on total eligible Employees, ACA group segment is based on ATNE.</i> 	<ul style="list-style-type: none"> Small: 4 Enrolled - 50 ATNE. Large: 51+ ATNE. 	<ul style="list-style-type: none"> Small: 2 Enrolled - 50 ATNE. Large: N/A 	<ul style="list-style-type: none"> Small: 4 Enrolled - 50 ATNE. Large: 51-99 ATNE.
Products Available	Medical, Dental & Vision.	Medical.	Medical, Dental, Vision, Life, STD & LTD.	Medical, Dental, Vision, Life, VGTL, STD, LTD & Worksite.	Medical.	Medical. (<i>Includes Pediatric Dental and Pediatric Vision.</i>)	Medical, Dental, Vision, Life, STD & LTD.
Employer Contribution	51-100: 50% lowest cost plan.	50%.	50%.	50%.	50% Minimum.	<ul style="list-style-type: none"> 1-3 Eligible: 50% of lowest offered employee only rate. 4-50 Eligible: 50% of lowest offered employee only rate. 51-100: N/A. 	50%.

Revised Date: November 2025

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Employee Participation	51-100: 20% of total Eligible.	<ul style="list-style-type: none"> Small: 75%, excluding valid waivers. Large: 50% of all Eligible Employees. Excluding valid waivers with a minimum of 25 Enrolled. 	Large: Target 50% Overall. (Load applies if <50%.)	<ul style="list-style-type: none"> Small: 70%, excluding valid waivers. Large: Target 50% overall. (Load applies if <50%.) Load does not apply for large group. LG recommended is 65%.	<ul style="list-style-type: none"> Small: 70%, excluding valid waivers. Large: Target 50% overall. (Load applies if <50%.) 	<ul style="list-style-type: none"> 1-3 Elig: 50% of all Eligible Employees. 75% of all Eligible Employees, excluding valid waivers. 4-50 Elig: 50% of all eligible Employees. 75% of all eligible Employees, excluding valid waivers. 51+: NA. 	<ul style="list-style-type: none"> Small: 50%, excluding valid waivers. Large: Target 50% overall. (Load applies if <50%.)
Eligibility Hours	25 hours a week. Can vary by group since employer can choose.	25 hours a week.	25 hours a week Minimum. Can vary by group since employer can choose.	<ul style="list-style-type: none"> Small Group (2-50): 25 hours a week. (Employer cannot choose.) Large Group (51-99): 25 hours as week minimum. Can vary by group since Employer can choose. 	<ul style="list-style-type: none"> Small Group (2-50): 25 hours a week. (Employer cannot choose.) Large Group (51-99): 25 hours as week minimum. Can vary by group since Employer can choose. 	25 hours per week.	25 hours a week Minimum. Can vary by group since employer can choose.
Packaging Guideline	51-100 lives, 4 plans. Any plans, no restrictions. May select a 5th plan for out of state if necessary.	<ul style="list-style-type: none"> 4+ Enrolled: 2 Plans. 15+ Enrolled: 3 Plans. 50+ Enrolled: 4 Plans. 	Dual Option or Triple by Execution.	<ul style="list-style-type: none"> 4-9 Eligible: 2 Plans. 10-15 Eligible: 3 Plans. 16-20 Eligible: 4 Plans. 21-25 Eligible: 5 Plans. 26-50 Eligible: 6 Plans. *Only 2 HSA plans can be offered.	<ul style="list-style-type: none"> 4-9 Eligible: 2 Plans. 10-15 Eligible: 3 Plans. 16-20 Eligible: 4 Plans. 21-25 Eligible: 5 Plans. 26-50 Eligible: 6 Plans. *Only 2 HSA plans can be offered. Only BlueOptions can be paired as dual option in Flagler & Volusia.	Single Plan Option.	5+ Enrolled: Triple Option.

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Composite & Table Rates Availability	Composite.	<ul style="list-style-type: none"> Less than 10 Enrolled Employees: Table Rates. 10 or more Enrolled: Composite Rates 	Composite.	4-9 Eligible: Age Banded. 10+ Eligible: Composite or Age Banded.	4-9 Eligible: Age Banded. 10+ Eligible: Composite or Age Banded.	Composite.	<ul style="list-style-type: none"> 2-9 ATNE: Age Banded. 10+ Eligible: Composite (<i>automatic</i>) or Age banded.
Networks Available	OAMC, OA EPO & PPO.	<ul style="list-style-type: none"> Small Group: Flex & Elite/Elect. Large Group: Aim, Achieve & Choice. <p><i>AvMed GHT product is no longer being offered for new sales effective May 2025.</i></p>	OAP, OAP-In, Local Plus & Sure t.	Simply Blue, BlueCare, BlueSelect, BlueOptions & Truli.	HMO & Extended Network.	Cigna Open Access Plus & Cigna LocalPlus.	Choice Plus, Choice & Neighborhood Health Partnership (<i>NHP</i>).
Telemedicine Vendors	Yes. Teledoc.	Yes.	Yes.	<ul style="list-style-type: none"> Teledoc (2025.) BlueVirtual Care (eff. 1/2026.) 	Yes. Doc on Demand.	Yes. Recuro Health.	Yes.
Domiciled State	Must be headquartered in Florida with at least one W-2 in that state.	Group must be headquartered in Florida.	Group quoted based on headquarted state, must have 1 W2 in the state.	Headquartered in Florida with at least one W-2 employee in the state.	The business must be located in one of FHCP's 5 counties. Live or work rule applies for members.	Groups must be HQ in Florida and have at least 1 employee residing in Florida.	A physical business location is required where the majority of employees reside. LG is written where company is headquartered.
In Network Labs	Quest & Labcorp.	Quest.	Quest & Labcorp.	Quest.	FHCP.	Quest & LabCorp.	Quest & Labcorp.

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Effective Dates	1st of the month.	1st or 15th.	1st of the month.	1st or 15th of the month. <i>*Balanced Funded may only be 1st.</i>	1st of the month.	<ul style="list-style-type: none"> 1st of month on all groups. 15th of month effective if replacing with already 15th of month effective plan. 	1st or 15th of the month.
Credit for Prior Accumulations	Yes.	Yes.	Yes.	Yes.	Yes. <i>FHCP plan must have a deductible.</i>	Yes. <i>Deductable credit only.</i>	Yes.
ID Cards	Physical & Digital ID.	Physical.	Physical & Digital ID.	Physical & Digital ID.	Physical & Digital ID.	Physical & Digital ID.	Physical & Digital ID.
1099 Employees	Not eligible.	Eligible but # of 1099s cannot exceed 25% of total group population.	Not eligible.	Must meet same criteria as a regular FT W-2 employee. Employer must contribute same amount to cost of coverage as W-2 ee. 1099 not eligible on 51+.	Eligible if they meet same criteria as a FT W-2 employee. Employer must contribute same amount to cost of coverage as W-2 ee.	1099s are allowed.	Yes. 1099's are eligible. ER is required to offer benefits to all 1099 employees if any want to enroll. Must meet the same criteria as a regular FT eligible EE.
Overage deps rules	Large Group: Coverage for over-age dependents optional. Dependents covered until age 30 (with restrictions) or age 26.	Dep covered to end of CY they turn 30. <i>If criteria met, if not, termed EOM they turn 26.</i>	Up to the Group for benefits to end age 26 or 30 EOM or CY.	<ul style="list-style-type: none"> Small Group: Deps covered through year they turn 30. Large Group: Coverage for over-age dependents optional. 	Dep can be covered to age 30. <i>(Restrictions apply ages 26-30- must be unmarried, have no dependents of their own, reside or attend school within FHCP service area & have no other health insurance.)</i> Coverage will be termed at end of year they turn 30. Large group can opt to age 26 only.	EOM 26 default with an option to increase to 30 EOM.	End of CY: Age 30 <i>(if restrictions apply.)</i> EOM: Age 26 <i>(if they don't meet restrictions.)</i>

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Coverage available for Domestic Partners?	Yes. <i>Employer can choose.</i>	Yes.	Yes. <i>Employer can choose.</i>	<ul style="list-style-type: none"> • Small Group: Yes. <i>Automatically included.</i> • Large Group: Yes. <i>Employer can choose.</i> 	<ul style="list-style-type: none"> • Small Group: Yes. <i>Automatically included.</i> • Large Group: Yes. <i>Employer can choose.</i> 	Yes. <i>Employer can choose at time of installation. Cannot be changed mid-year.</i>	Yes. <i>It is the employer's choice whether or not to cover DP.</i>
Newborn	Newborns can be enrolled within 30 days after date of birth. <i>Coverage will be effective date of birth.</i>	Newborns can be enrolled within 30 days after date of birth. <i>Coverage will be effective date of birth.</i>	Newborns can be enrolled within 30 days after date of birth. <i>Coverage will be effective date of birth.</i>	Newborns can be enrolled within 60 days from date of birth. <i>If enrolled in 1st 30 days, no charge for the first month of coverage.</i>	Newborns can be enrolled within 60 days from date of birth. <i>If enrolled in 1st 30 days, no charge for the first month of coverage.</i>	Newborns are allowed. First of month following DOB. <i>Prior claims fall on mother.</i>	Newborns can be enrolled within 30 days after date of birth. <i>Coverage will be effective date of birth.</i>