

The introduction of the new WVMA Association Group health plan may bring many questions to mind. This is a large group Association Health Plan that is being offered to the clinics of WVMA members and is exclusively offered through Professional Insurance Programs.

What does this mean for you? This means that clinics in Dane County now can offer up to four plan designs within the Quartz portfolio. Those in all other counties can offer up to four plan designs within the WPS or portfolio. This allows employees to select a plan that best fits their needs or their family needs. Some employees may favor the Copay plans while others like the ability to set up a health savings account with the High Deductible Health Plans. Clinics have the option to elect both types of plans.

Some of the questions that may be lingering may be:

- Who is considered eligible for the plan?  
**Any employee of the enrolled clinics that is working 26 hours or more per week.**
- How much does the employer have to contribute to the employee's premium?  
**While we recommend that the employer pays at least 50% of the employee's premium, this is only a suggestion. Employers have the ability to designate how much they will contribute, if at all.**
- Can I contribute more for the doctors than the office staff?  
**As long as the minimum contribution is at least 50% you are able to create classes for the doctors.**
- What if all of the employees waive off the coverage except for one?  
**You can establish a group of one as long as you have valid waivers for the other eligible employees. Keep in mind that if someone loses coverage or if you have a new hire, they must be offered the clinic's coverage.**
- Am I able to offer multiple plan options?  
**Yes you can! You are able to elect up to four different plan options to fit the needs of your employees. You must have an employee in each option that is elected.**
- What if I offer the plan to my employees and my employee's spouse has coverage that includes a "Spousal Carve Out" rule?  
**An employer that offers a self-funded plan may have this rule in place, as this type of plan is not overseen by the Office of the Commissioner of Insurance. If an employee's spouse has this type of coverage then your employee must take the coverage that is being offered through your clinic.**
- Are the enrollments underwritten?  
**This is an association group plan and thus all applicants will be underwritten to determine final rates.**

- Can our group be declined?  
**No, with large group Association Health Plans a carrier cannot decline coverage. However, depending on pre-existing medical conditions, the underwriter may impose a rate increase.**

Your Professional Insurance Programs Benefits Account Managers would be more than happy to spend time answering any additional questions you might have. They are also always available to review your current policy. They can be reached at 800-637-4676, or via email at [info@profinsprog.com](mailto:info@profinsprog.com).