Health Insurance

I want to offer my employees health insurance. What are my options?
You may contact an insurance agent or broker who will work with you to find a plan that best meets the needs of you and your workforce. You should also explore the FIVE health insurance options designed specifically for small businesses, sole proprietors, and working individuals in the NYC area:

- Brooklyn HealthWorks
- Freelancers Union
- HealthPass
- Healthy New York
- LIA Health Alliance

What factors should I consider when selecting a health insurance plan?
Whether you are searching for yourself or your employees, some factors to consider include:

- Range of choice in benefit options
- Types of coverage offered by the health plans or carriers and coverage limitations
- Access to preferred hospitals and health care providers in and out of the plan’s network
- Maximum annual and lifetime benefit amounts
- Coverage options for dependents (children and spouses/domestic partners)
- Ease of enrollment and billing processes
- Availability of customer service
- Affordability:
  - Cost usually depends on the type of plan selected. In addition to monthly premium charges, you should consider other applicable costs, including out-of-pocket expenses (e.g., co-payments and deductibles).
  - Special program policies, such as pre-existing condition limitations that may restrict coverage for some people

Small Businesses:

Why should I provide health insurance to my employees?
There are many benefits to providing health insurance to employees, including

- Reducing the amount of taxes you and your employees pay,
- Attracting and retaining high quality employees, and
- Reducing business disruptions and the costs associated with employee absenteeism and turnover.
Do I have to pay for the entire premium cost?
No. Many employers share the cost of the premiums with their employees. Employees pay whatever part of the premium you don't pay through payroll deductions.

Can I select which types of employees get health insurance?
Yes. You can decide that you’d like to cover all your employees, or you may determine that you only want to cover a subgroup of your employees, e.g., employees who work more than 20 hours per week. Most plans will allow you to set this eligibility criterion.

Do a certain number of employees have to buy health insurance in order for my business to qualify?
Most plans require a certain percentage of employees to enroll in order for a business to qualify for coverage – normally 70 or 75%.

Do employees’ families get coverage? Who pays for it?
You may decide to offer family coverage, and an employee may choose to enroll a spouse/domestic partner and/or children. Who pays for family coverage is up to you; most employers pay for at least part of the cost of family coverage.

Can my coverage be cancelled because of too many claims?
No. As long as you qualify for coverage as a small business and pay your monthly bill, your coverage cannot be cancelled.

I can’t offer my employees health insurance right now. What other options do they have?
Eligible individuals may enroll in one of the private health insurance options discussed below. And depending upon family income, individuals and their family members may also be able to get coverage through public health insurance programs. Call 311 or visit http://www.nyc.gov/healthstat for more information on these options. The Website also contains pre-screening calculators to assist users determine if they qualify for public or private health insurance options.

Sole Proprietors & Working Individuals:

What can I be charged for individual health coverage?
Prices vary by plan, but the cost of the coverage is based on a "community rate," which is the average cost offered to all individuals seeking the same coverage from the same plan in a geographic region. In New York State, it is illegal for individual health plan premiums to vary due to age, gender, health status, or occupation.

Can my individual health insurance policy be cancelled because I submit a lot of claims?
No. Your coverage cannot be cancelled because you get sick. This is called "guaranteed renewability." As long as you pay the premiums, the insurer cannot cancel your policy.
Can I buy a policy that covers my family?
Yes. In New York State, insurers that sell individual health insurance must offer family coverage to persons who are interested in purchasing it. Insurance carriers may also offer employee-spouse/domestic partner plans and parent-children plans.

Are pre-existing conditions covered?
Many health insurance carriers exclude coverage for up to a year for conditions that were diagnosed and treated within six months prior to the date of the application for coverage. The waiting period may be reduced if an individual was previously covered and applied within 63 days of the expiration of that coverage. For this reason, it is important for individuals to not let their insurance coverage lapse beyond this period of time.

For more information about health insurance for small businesses, sole proprietors and working individuals, visit the Website of the Mayor’s Office of Health Insurance Access: http://www.nyc.gov/healthstat. You may also visit the New York State Insurance Department’s Website at: http://www.ins.state.ny.us.