

Category	Explanation / Requirements		
<p><b>Proof of Ownership</b></p>	<p>Proof of ownership is required for all eligible enrolling (and/or waiving) owners not appearing on the Quarterly Wage Report.</p>		
	<table border="1"> <thead> <tr> <th data-bbox="461 359 769 428">Type of Business</th> <th data-bbox="769 359 1529 428">Required Documentation</th> </tr> </thead> </table>	Type of Business	Required Documentation
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	<p><b>Corporations</b></p>	<ul style="list-style-type: none"> <li>• <b>In business &lt; 1 year:</b> S-Corps and C-Corps: Filed/Stamped Statement of Information that lists all owners'/officers' names</li> <li>• <b>In business &gt; 1 year:</b> S-Corps: IRS Schedule K-1 (Form 1120s) for all owners/officers (current tax year) C-Corps: IRS Form 1120 (pages 1 and 2) and IRS 1120 Schedule G and IRS Form 1125-E, which includes all owners  Note: Groups comprised of family members must provide separate tax or QWR documentation showing there is an owner and full-time W-2 employees. Spouse-only, owner-only groups and sole proprietors are not eligible.*  Note: Provide copy of group's active status within California Secretary of State portal with the group submission.</li> </ul>	
<p><b>Partnership/LLP</b></p>	<ul style="list-style-type: none"> <li>• <b>In business &lt; 1 year:</b> Partnership Agreement signed by all partners.</li> <li>• <b>In business &gt; 1 year:</b> IRS Schedule K-1 (Form 1065) for all partners (current tax year). Note: Groups comprised of family members must provide separate tax or QWR documentation showing there is an owner and full-time W-2 employees. Husband/wife groups, owner-only groups, and sole proprietors are not eligible.*  Note: Provide copy of group's active status within California Secretary of State portal with the group submission.</li> </ul>		
<p><b>Limited Liability Company (LLC)</b></p>	<ul style="list-style-type: none"> <li>• <b>In business &lt; 1 year:</b> LLC Agreement signed by all managers/members/parties</li> <li>• <b>In business &gt; 1 year:</b> LLC Agreement signed by all managers/members/parties or copies of appropriate current year tax returns (follow the guidelines for a partnership or sole proprietorship based on how the LLC was formed)  Note: Groups comprised of family members must provide separate tax or QWR documentation showing there is an owner and full-time W-2 employees. Spouse-only, owner-only groups and sole proprietors are not eligible.*</li> </ul>		

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	<p><b>Sole Proprietorship</b></p> <ul style="list-style-type: none"> <li>• <b>In business &lt; 1 year:</b> Business License listing the owner name</li> <li>• <b>In business &gt; 1 year:</b> IRS Schedule C (Form 1040) Note: Groups comprised of family members must provide separate tax or QWR documentation showing there is an owner and full-time W-2 employees. Husband/wife groups, owner-only groups, and sole proprietors are not eligible.*</li> </ul> <hr/> <table border="1" data-bbox="461 548 1528 783"> <thead> <tr> <th data-bbox="461 548 764 617">Type of Business</th> <th data-bbox="764 548 1528 617">Required Documentation</th> </tr> </thead> <tbody> <tr> <td data-bbox="461 617 764 716"><b>Church</b></td> <td data-bbox="764 617 1528 716">IRS Form 941 and a current QWR (IRS Form 4361 may also be required)</td> </tr> <tr> <td data-bbox="461 716 764 783"><b>Farm</b></td> <td data-bbox="764 716 1528 783">IRS Schedule F (Form 1040)</td> </tr> </tbody> </table>	Type of Business	Required Documentation	<b>Church</b>	IRS Form 941 and a current QWR (IRS Form 4361 may also be required)	<b>Farm</b>	IRS Schedule F (Form 1040)
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<b>Church</b>	IRS Form 941 and a current QWR (IRS Form 4361 may also be required)						
<b>Farm</b>	IRS Schedule F (Form 1040)						
<b>Deductible Credit</b>	<p>For new groups, UnitedHealthcare will credit members for the amount of the deductible satisfied under the prior carrier’s plan during the same calendar year. This applies to like plans within similar product types. There is no deductible credit for outpatient prescription drug coverage. Deductible credit is applicable for calendar year to calendar year plans only. Credit is limited to the lesser of the plan deductibles or actual experience. Members enrolling after open enrollment are not eligible for deductible credit.</p>						
<b>Employer Application</b>	<ul style="list-style-type: none"> <li>• All questions answered.</li> <li>• Select Waiting Period.</li> <li>• List employer premium contribution percentage or dollar amount for all coverages selected.</li> <li>• Sign and date the group application within 6 months of the requested effective date.</li> </ul>						
<b>HRA, GAP, and Self-Funding Arrangement Guidelines</b>	<p>No UnitedHealthcare plan may be used with any form of wrap product.</p> <p>A “wrap product” includes any employer-sponsored plan that is:</p> <ol style="list-style-type: none"> <li>(1) paid for or funded, in whole or in part, by the Enrolling Group and/or Subscriber;</li> <li>(2) (a) provides reimbursement for health plan deductibles, co-payments, co-insurance, or medical expenses; or</li> <li>(b) provides for the payment of set amounts in the event of hospitalization.</li> </ol> <p>Examples include: an employer-funded flexible spending account (FSA), an HRA, self-funding of the deductible, an IRS Section 105 plan, a medical expense reimbursement plan (MERP), or a hospital confinement policy. A wrap product does not include a health savings account (HSA).</p> <p>Gap or self-funded plans are not permitted alongside any UnitedHealthcare medical plan.</p>						