

NY State of Health Small Business Marketplace (SBM) Certification Training for Navigators

Small Businesses

The Small Business Marketplace can make it simple and easy for you to offer high quality, affordable health and dental insurance coverage to your employees.

You can compare multiple plans and carriers online, enrollment is streamlined and available 24/7. Billing is consolidated so you pay only one monthly bill. Click on "Get Quick Quote & Get Started" now to view the plans and rates available for your small business.

[GET QUICK QUOTE & GET STARTED](#)

Get help finding a health insurance broker in your area.



Sole Proprietors You can buy health insurance coverage through the Individual Marketplace, where you may be eligible for tax credits that reduce the cost of coverage.



Objectives

- Outline the SBM Employer and Employee Registration and Enrollment process.
- Describe the benefits for employers who enroll in the Small Business Marketplace
- Explain the rules of enrollment timing in the Small Business Marketplace
- Provide an Overview of the Small Business Marketplace (SBM) rules and regulations.

Small Business Marketplace Overview

Who is Eligible?

A Small Business Employer is eligible to purchase a health plan through the Small Business Marketplace (SBM) if the business:

- Is based in NYS or has employees with a physical location in NYS.
- Has 100 or fewer Full-Time Equivalent (FTE) employees.
 - At least one common law employee must enroll.



Who is Eligible?

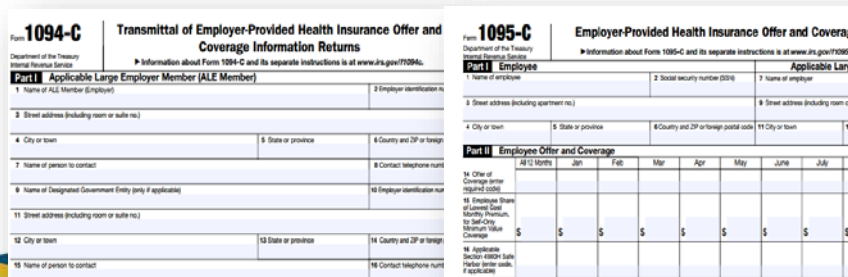
Small Business Employers who elect to offer coverage through the SBM, must offer health insurance coverage through the Small Business Marketplace to all eligible employees:

- Eligible employees must include those working 30 or more hours per week.
- Employers may also offer coverage to part-time employees who work, on average, 20 hours per week or more. However, it is not required.
 - Employees who work less than 20 hours per week are not eligible.

Overview

What Employers Should Know

- **Small employers are not** required to offer health coverage or pay for coverage for their employees.
- Employers employing a least 50 full-time employees (or a combination of full-time and part-time employees that is equivalent to 50 full-time employees) may be subject to the Employer Shared Responsibility provisions under section 4980H of the Internal Revenue Code (added to the Code by the Affordable Care Act).
 - The employer may be subject to an Employer Shared Responsibility payment if at least one of its full-time employees receives a premium tax credit for purchasing individual coverage in the Marketplace.
 - Beginning in January 2016 (for 2015 plan years), the federal government will require applicable large employers and insurers to report annually to employees and the IRS on the health care coverage they provided.



The image shows two IRS forms side-by-side. The left form is Form 1094-C, titled 'Transmittal of Employer-Provided Health Insurance Offer and Coverage Information Returns'. It is for 'Applicable Large Employer Member (ALE Member)'. The right form is Form 1095-C, titled 'Employer-Provided Health Insurance Offer and Coverage'. It is for 'Applicable Large Employer'. Both forms have sections for 'Part I Employee' and 'Part II Employee Offer and Coverage'. The 1095-C form includes a table for reporting the offer of coverage for each month of the year.

Overview

Businesses can:

- Buy insurance through the NY State of Health Marketplace, Small Business Marketplace (SBM), or
- Choose to provide insurance through their current options.

Employer Benefits of Enrolling in the SBM

Choice

- Employers can choose whether to offer all, some or a single QHP to their employees.
- Employees can choose from the health plan options made available by their employer.

Contribution Options

- The Marketplace gives business owners the flexibility to define the coverage tier of the health plan(s) which will be offered to employees and the amount they would like to contribute toward the premiums for the employee.
- Employers may pay a percentage of premiums, pay a fixed amount, or pay nothing at all.

Minimum Participation Required

- NY State only requires a minimum of one (1) enrolled common law employee in order to be eligible as a small business with the NY State of Health SBM.

Administrative Simplicity

- The Marketplace provides monthly billing to employers along with other administrative simplifications.

Tax Credits

- The Marketplace is the exclusive place to access small business tax credits

What Do Plans Cover?

1. All QHPs must cover the Essential Health Benefits
 - Preventive services will be offered at no cost to the consumer
 - Each plan must have an adequate network
 - All state consumer and provider protections are in place

2. QHP offered within each Metal Level provide standard plans which offer the same benefit packages.
 - The Metal tier of the plan determines the amount of cost sharing for services.
 - Attachment B outlines the Out-Of-Pocket costs for SBM Standard QHPs in the same way that it does for the Individual Marketplace.

3. Non-Standard QHPs are also available for selection in the SBM.

Navigators are familiar with these concepts as they are the same as in the Individual Marketplace.

Ambulatory Patient Services	Emergency Services
Hospitalization	Maternity and Newborn
Mental Health and Substance Use Disorder Services, including Behavioral Health Treatment	Rehabilitative and Habilitative Services and Devices
Prescription Drugs	Laboratory Services
Preventive and Wellness and Chronic Disease Management	Pediatric Services, including oral and vision care

Platinum (90% Actuarial Value)
• Highest premiums, lowest out-of-pocket expenses (cost-sharing)
Gold (80% Actuarial Value)
• Higher premiums, lower out-of-pocket expenses
Silver (70% Actuarial Value)
• Lower premiums, higher out-of-pocket expenses
Bronze (60% Actuarial Value)
• Lowest premiums, highest out-of-pocket expenses

TYPE OF SERVICE	Platinum (AV = 0.88 to 0.92)	Gold (AV = 0.78 to 0.82)	Silver (AV = 0.68 to 0.72)	Bronze (AV = 0.58 to 0.62)
DEDUCTIBLE (single)	\$0	\$600	\$2,000	\$4,000
MAXIMUM OUT OF POCKET LIMIT (single) Includes the deductible	\$2,000	\$4,000	\$6,750	\$7,150
COST SHARING - MEDICAL SERVICES				
Inpatient Facility/SNF/Hospice	\$500 per admission	\$1,000 per admission	\$1,500 per admission	50% cost sharing
Outpatient Facility - Surgery, including freestanding surgicenters	\$100	\$100	\$100	50% cost sharing

Employer Choice



QHP Naming Format

Same elements as in the Individual Marketplace

Specific to SBM only

Field Name	Values	Meaning
Product Name	To be assigned by Insurer	
Metal Tier	Bronze, Silver, Gold, Platinum, Child Only	Identifies Metal Level and whether Child Only Product
Standard/Non-standard	ST, ST3PCP or NS	Identifies Standard (ST), Standard with 3 PCP Visits, or Non-Standard (NS) Product
Network Coverage	INN or OON	Identifies in-network coverage (INN) or out-of-network coverage (OON)
Dental Coverage	Pediatric Dental, Adult/Family Dental	Identifies type of dental coverage included, if any, in QHP
Dependent Age Coverage	Dep25, Dep29	Identifies the maximum age of covered dependents
Non-Standard Details	Adult Vision, Family Dental, Family Vision, Wellness, Other	Identifies additional covered benefits
Domestic Partner	DP	Identifies that domestic partners are covered
Family Planning	FP	Identifies that family planning benefits are covered

Qualified Religious Organization Exemption:

- An employer who is determined to be a qualified religious organization will be able to claim an exemption from the requirement to provide, without cost-sharing, coverage of certain contraceptive services for employees.
 - Employers who qualify and want to claim this exemption should be helped to understand that in claiming this exemption, they are restricting family planning services from their plan's coverage.

Qualified Religious Organization Exemption ✕

Selection of this Qualified Religious Organization exemption will exclude coverage for family planning services, including contraceptive coverage, from your employer sponsored health insurance plan(s).

By choosing this exemption, you attest to be qualified based on all the criteria:

- The inculcation of religious values is the purpose of the organization.
- The organization primarily employs and serves persons who share the religious tenets of the organization.
- The organization is nonprofit.

Coverage Options for Employers to choose from to be made available to their employees through the SBM

- 1) Select among QHPs offered by a specific carrier
- 2) Select specific QHPs offered by multiple carriers
- 3) Select metal levels and carriers
- 4) Select coverage tier options (i.e employee only coverage, employee plus spouse, employee plus child, or employee plus family coverage)
- 5) Allow employees to select any Marketplace QHP

Employer Premium Contribution Options

- 1) No Contribution
- 2) Uncapped percentage
(e.g., employer pays 55% of premium)
- 3) Capped percentage
(e.g., employer pays 55% of premium, up to \$300)
- 4) Defined dollar amount
(e.g., employer pays \$300/month)

Small Business Marketplace (SBM)

Administrative Simplicity

Billing and Payments

- The Marketplace provides employers with a single monthly bill.
 - Monthly bill will include breakdown of employer/employee contribution due to each QHP (employers remain responsible for collecting premiums from employees).
- The Marketplace collects monthly payment from the employer and remits payment to insurers.
- SBM will provide record maintenance for ten (10) years.



Accounting Procedures

- NY State of Health will maintain books, records and documents as well as other evidence of accounting procedures and practices of the premium aggregation program for each benefit year for at least 10 years.
- Invoicing timeline: Employers of participating small businesses will be billed a month in advance for all plan policies on the 1st of each month, beginning at the start of their selected plan year.

Note: Navigators do not collect premiums.

SBM Dependents who have aged out:

- Dependents who are turning either 26 or 30 years old (depending on the rider options selected) will have aged out.
- The SBM tracks each enrolled dependents' age and will send disenrollment notices 45 days prior to plan termination.

Field Name	Values	Meaning
Dependent Age Coverage	Dep25, Dep29	Identifies the maximum age of covered dependents



Small Business Marketplace (SBM)

Small Business Tax Credit

Small Business Tax Credit



As of January 1, 2014, the Small Business Health Care Tax Credit is only available through the NY State of Health, Small Business Marketplace (SBM).

- The credit is available to eligible employers for two consecutive taxable years.
- There is currently no end date to claim the tax credit for groups that have not yet received it.
- For tax-exempt employer, if there is no taxable income, the employer may be eligible to receive the credit as a refund.
- The credit is calculated on a sliding scale for up to 50% of premiums paid for small business employers and 35% of premiums paid for small business employers that are tax-exempt.

Small Business Tax Credit

To be eligible, the small business employer must:

- Purchase health care coverage through the Small Business Marketplace (SBM).
- Have fewer than 25 full-time equivalent employees (FTEs).
- Have average employee wages of less than \$50,000 a year. This excludes the owner and their immediate family.
- Contribute at least 50% of the employee-only premium cost (not family or dependent).

Employer contributions to health savings accounts, health reimbursement arrangements, and flexible spending accounts are not counted as insurance premium payments when determining the credit amount.

Employers must use Form 8941 and Form 990T for tax-exempt organizations.



Small Business Tax Credit



Maximum Small Business Tax Credit

- Available to eligible employers for two (2) consecutive taxable years.
 - If an employer does not owe taxes during the year, they may be eligible to carry the credit back or forward per applicable IRS guidelines.
- Up to 50% of a taxable small business's premium costs.
 - Traditional businesses may receive a tax credit, but are ineligible to receive this in the form of a refund.
- Up to 35% of a tax-exempt small business's premium costs
 - Tax exempt small businesses can receive their tax credit in the form of a refundable credit. If they take the credit in the form of a refund, then the amount of the refund cannot exceed the total of the employer's income tax withholding from employee wages plus the employer's share of the Medicare tax withholdings

Credit is reduced on a sliding scale (The smaller the business or charity, the bigger the credit)

- As average wages increase from beyond \$25,000 up to \$50,000
- As FTEs increase beyond 10 up to 25 employees

Small Business Tax Credit



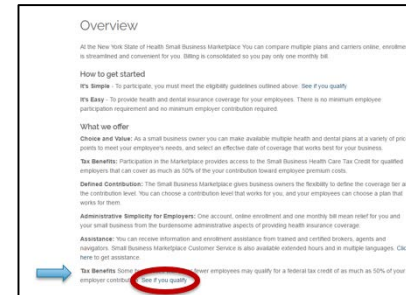
Marketplace is the **only place** to access the tax credit beginning in 2014.

There are a few exceptions to this rule.

NY State of Health Tax Credit Calculator:

<https://nystateofhealth.ny.gov/employer>

- Scroll to the bottom of the page to the “Overview” section.
- Under “Tax Benefits” click on “See if you qualify”



IRS Tax Credit Estimator:

<http://www.taxpayeradvocate.irs.gov/estimator/smallbusiness2014/estimator.htm>

Tax Credit Calculator

The calculator below will provide an estimate of the small business tax credit you may be eligible for. To calculate the estimated tax credit, please enter the information below. Owners should not be counted in number of employees, wages, or premium contribution amount.

Full-time employees	<input type="text"/>
Full-time equivalent of part-time employees	<input type="text"/>
Total Employees	<input type="text"/>
Total annual wages paid for employees	\$ <input type="text"/>
Total annual employer premium contribution	\$ <input type="text"/>
Are you a tax-exempt/non-profit employer?	<input type="radio"/> No <input type="radio"/> Yes

Total tax credit \$

How is Full Time Equivalent (FTE) Calculated?

Firm Size (FTEs) = Total Full Time Employees + (Total Annual Part Time Hours/2080)

- Owners are excluded from FTE count and employers cannot receive a tax credit for owner's insurance.
- All employee hours are counted and based on a 40-hour work week.

Wages = Total Wages Paid/ FTEs

- Owners and family member wages are excluded from total wages.



Small Business Tax Credit

Tax Credit for Non-Tax Exempt Employer

The tax credit amounts are as follows:

Up to a maximum potential tax credit 50% of employer contribution for businesses.



- The employer has 9 FTE employees
- The average wage of the employees is \$23,000 per employee
- The employer pays \$72,000 in premiums for his employees

The employers credit is calculated as follows:

- $50\% \times \$72,000 = \mathbf{\$36,000^*}$

*This is an estimate only. Employers are advised to work with a tax professional to determine eligibility for and to claim this credit.

Small Business Tax Credit

Tax Credit for Tax Exempt Employer

The tax credit amounts are as follows:

Up to a maximum potential tax credit 35% of employer contribution for a tax-exempt business.



Employer has 10 FTE employees with an average wage of \$25,000 per employee. The employer pays \$69,000 in health insurance premiums for those employees.

Please note: For tax exempt employers, the amount of refund cannot exceed the total of the employer's income tax withholding from employee wages + the employer's share of the Medicare tax withholdings (equals \$29,500 in this scenario).

Tax credit is calculated as follows:

- 1) The initial amount before any reduction: $(35\% \times \$69,000) = \mathbf{\$24,150}$
- 2) The employer's withholdings and Medicare taxes are $\mathbf{\$29,500}$
- 3) The total tax credit is $\mathbf{\$24,150}$

*This is an estimate only. Employers are advised to work with a tax professional to determine eligibility for and to claim this credit.

Small Business Tax Credit

Tax Credit for Tax Exempt Employer

The tax credit amounts are as follows:

Up to a maximum potential tax credit 35% of employer contribution for a tax-exempt business.



Employer has 10 FTE employees with an average wage of \$25,000 per employee. The employer pays **\$100,000** in health insurance premiums for those employees.

Please note: For tax exempt employers, the amount of refund cannot exceed the total of the employer's income tax withholding from employee wages + the employer's share of the Medicare tax withholdings (equals \$29,500 in this scenario).

Tax credit is calculated as follows:

- 1) The initial amount before any reduction: $(35\% \times \$100,000) = \$35,000$
- 2) The employer's withholdings and Medicare taxes are: **\$29,500**
- 3) The total tax credit is **\$29,500**

*This is an estimate only. Employers are advised to work with a tax professional to determine eligibility for and to claim this credit.

Small Business Marketplace (SBM)

Employer Enrollment Offering for Employees

Employer Registration Process

1. Employers will register and enroll through the SBM.
2. Employers will be asked to create an account. In order to do this, employers will go through the Identity Proofing process to validate their own identity. They will be asked to answer some personal questions and provide some of their personal information:
 - Personal Address
 - Personal Phone Number
 - Gender
 - Date of Birth
 - Social Security Number
3. Employers will then be asked specific identifying and contact information about their company.
 - Employer Identification Number (EIN) or Tax Identification Number (TIN).
4. Employers will be asked to check attestations that they meet the requirements of the Small Business Marketplace and that they have the authority to enter into agreements for insurance coverage on behalf of the business.
5. Employers must also agree to the Terms, Rights, and Responsibilities, and the Privacy Attestation.

Employer Registration Process

Employers will be required to provide data on:

- Number of full time employees
- FTEs (Full Time Equivalents)
- Average annual wage
- Employee roster data:
 - Name
 - Email
 - Address
 - DOB
 - SSN
 - Hire Date



Employer Registration Process

Employers will be able to:

- Find and authorize a Navigator/Broker
- Compare health plans

Employers must:

- Select health plans and coverage tiers
 - The Marketplace contains a full list of available QHPs.
 - Navigators should know how to compare the SBM QHP options to guide employers through the process.
 - Navigators should serve customers by remaining neutral and helping the employer find suitable health plans.
- Determine employer premium contributions

Employees must:

- Use the same Navigator that the employer offers

Employer Registration Process

Employers may also:

- Set up “classes” of their employees complete with defined new hire waiting periods, premium contribution amounts, and plan offerings.
- Each class is to be set up for similarly situated employees. Examples of a class might include:
 - Managers
 - Full-Time Employees
 - Part-Time Employees
 - Retiree Beneficiary
 - COBRA Beneficiary
 - ✓ If it is the employers initial open enrollment period in the SBM and the employer has existing COBRA participants to whom the employer would like to offer an SBM enrollment opportunity, the employer must create a “COBRA” class and assign the COBRA participants to this class.
 - ✓ If employees were enrolled in COBRA during a previous SBM plan year, those individuals will automatically be assigned to the “COBRA_Internal” class.

Employer Registration Process

- An employer that offers coverage through the Small Business Marketplace will decide whether they will offer coverage to the employee only or to additional family members as well.
- Employees can then choose from the options their employer provides.
- Qualified Health Plans are available in four standard tiers of coverage:
 - Employee only
 - Employee and spouse
 - Employee and child/ren
 - Employee and family



Class : Employees not classified

Select Coverage Tiers *

- Employee
- Employee + Spouse
- Employee + Child/ren
- Employee + Family

Employer Registration Process

Employers have the option to select one or all of the following health option riders:

- Dependent Coverage through age 29 Option
- Domestic Partner Coverage Option
- Qualified Religious Organization Option

Health Options

Extend Coverage for dependent children from age 26 through age 29 (cost of coverage may increase)

After your initial plan offering, changes will affect your employees enrollment offering pertaining to this class, requiring them to go back and re-select plans and enroll again.

When creating class offerings, employers may decide to add a rider for dependents through age 29 at the class level; i.e., they could choose to offer this benefit for their executive staff but not their management staff if they choose to do so.

Health coverage options and riders

Cover domestic partners

Qualified Religious Organization (exclude coverage for family planning and counseling services) ⓘ

Note*: The rider option to extend dependent child coverage to age 29 will be available at the employee class level

This selection applies to all class offerings. After your initial plan offering, changes will affect your employees enrollment offering requiring them to go back and re-select plans and enroll again.

The option to cover Domestic Partners or claim a Qualified Religious exemption is at the “group” level and will apply to all employee offerings.

Employer Registration Process

Dental enrollment is linked to enrollment into a QHP; employers cannot offer dental without also offering QHP coverage.

- Dental Plans are available in five tiers of coverage:
 - Employee only
 - Employee and spouse
 - Employee and child/ren
 - Employee and family
 - Pediatric only dental



Select Coverage Tiers *

<input type="checkbox"/>	Employee
<input type="checkbox"/>	Employee + Spouse
<input type="checkbox"/>	Employee + Child/ren
<input type="checkbox"/>	Employee + Family
<input checked="" type="checkbox"/>	Pediatric only dental

Employer Registration Process

Pediatric dental cannot be offered unless a coverage tier that includes children is offered.

For tiers of coverage that include children, pediatric dental is either embedded in the QHP or made available as a stand-alone product:

- When creating an offer for a class, if the employer chooses to offer dental, the employer will be presented with the equivalent dental plan tiers and Pediatric Only dental.
 - For the employee to select Pediatric Only dental, the child dependent must be included in the QHP enrollment.
- The Pediatric Dental premium that displays during plan selection is per child and will be multiplied by the number of children covered, capped at three children (one-child x 3 rate).

Employee Registration and Enrollment Process

- To be able to participate in the SBM, an employee must receive an offer of coverage from a qualified employer.
- After the employer adds the employee to the company roster and adds the employee to a class offering, the employee will receive an automated email from the SBM with an invitation to participate and an employer participation code.



Employee Registration and Enrollment Process

- Must use the employer participation code which will be sent to the employee's email address.
- Create username, password, choose personal email
- Employee enrollment – (similar to enrollment on the Individual Marketplace)
 - Add employee's identifying information
 - Add family details (if applicable)
 - Compare plans offered by employer
 - Select plan, tier of coverage, and metal level

Employee Registration and Enrollment Process

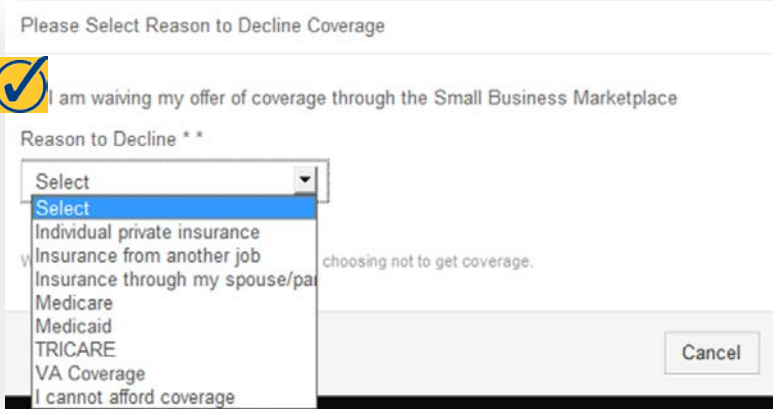
- Navigators should serve consumers by remaining neutral and helping employees select a suitable health plan from the options their employer is offering through the SBM.



Completing the Application

Employee Registration and Enrollment Process

- If the employee does not want to enroll, they may choose to decline the coverage and select a reason from the dropdown.



When the employee clicks the checkbox to waive the offer, the status of the employee is marked as “Declined” in the employer’s “My Enrollments” tab.

Employee Enrollments

Employee Name	Class	Enrollment Period	Effective Date	Status
Carlos Vincent	Full time staff	05-15-2015 - 05-31-2015	07-01-2015	Enrolled
Maria Thompson	Full time staff	05-15-2015 - 05-31-2015	07-01-2015	NOTIFIED
Arriana Walker	Full time staff	05-15-2015 - 05-31-2015	07-01-2015	Declined

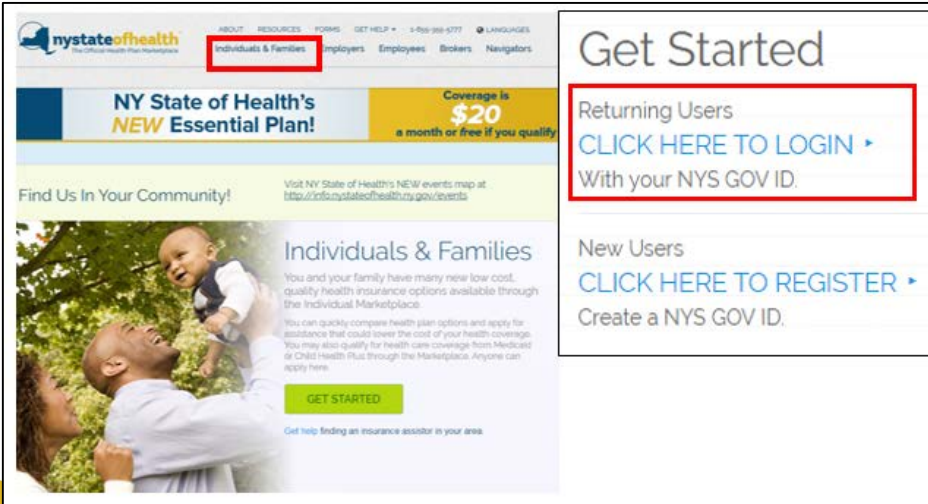
Employee Registration and Enrollment Process

- SBM Certified Navigators are positioned to assist in both the Small Business Marketplace and in the Individual Marketplace.
- If an employee presents to a Navigator for assistance, and has employee-only coverage, and that employee also has uninsured family members:
 - Navigators should encourage the employee to have his/her family explore coverage options through the Individual Marketplace, if needed.

Completing the Application

Employee Registration and Enrollment Process

- Individuals who have Employee accounts which were created through their Employer, will automatically have an account set up for them in the Individual Marketplace.
 - Navigators can assist employees in accessing their Individual account, if they need to enroll a dependent, by going to www.nystateofhealth.ny.gov and clicking on “Individuals and Families”
 - Then click on “Returning User” and sign into the Individual account using the same NY.gov Username and Password which is used to access the Employee Account.



The screenshot shows the nystateofhealth website interface. The navigation menu at the top includes 'Individuals & Families', 'Employers', 'Employees', 'Brokers', and 'Navigators'. The 'Individuals & Families' menu item is highlighted with a red box. Below the navigation, there is a banner for 'NY State of Health's NEW Essential Plan!' with a price of '\$20 a month or free if you qualify'. The main content area is divided into two sections: 'Individuals & Families' on the left and 'Get Started' on the right. The 'Get Started' section has two options: 'Returning Users' with a 'CLICK HERE TO LOGIN' button and 'New Users' with a 'CLICK HERE TO REGISTER' button. Both buttons are highlighted with red boxes. The 'Returning Users' section also includes the text 'With your NYS GOV ID.' and the 'New Users' section includes 'Create a NYS GOV ID.'

Small Business Marketplace (SBM) Enrollment Timing

SBM Enrollment Timing

An eligible business may enroll in the SBM at any time during the calendar year. Once a group effective date is selected— the first of any month of the calendar year – it becomes the start date for that group’s **plan year**.

- Effective date is always the first of the month. The employer can elect one group plan effective date to enroll their employer group at the first of any month throughout the year.
- The Small Business Marketplace allows qualified individuals a special enrollment period if they experience a change in circumstances that is deemed a “qualifying event”.



SBM Provides Year-Round, Online Open Enrollment

SBM Open Enrollment End Dates for Employer
Group Effective Dates

Open Enrollment End Dates	Group Effective Dates
December 15	January 1
January 15	February 1
February 15	March 1
March 15	April 1
April 15	May 1
May 15	June 1
June 15	July 1
July 15	August 1
August 15	September 1
September 15	October 1
October 15	November 1
November 15	December 1

Annual Open Enrollment for Subsequent Years of Coverage

Annual Open Enrollment for Employers:

- Annual Open Enrollment begins 90 days prior to the renewal effective date.
- For subsequent years of coverage, employers can **only** change coverage options during the annual open enrollment period.
- The annual open enrollment period each year for an employee must be no less than 30 days after the employer's annual open enrollment period.
- If an employee remains eligible for coverage through SBM, they will remain in the same QHP unless they choose another QHP, if such option exists, or the QHP is no longer available to the employee.



SBM Enrollment Timing



During the Open Enrollment Period the employer can make the following edits:

- The group effective coverage date can be changed during the initial open enrollment period only.
 - Cannot be changed when renewing coverage
- Health option riders, QHP metal level, carriers, and dental options
- Premium Contributions
- Coverage Tiers
- Add or delete Dental offering
- Edit the employees' information
- Add or remove employees from the Roster

*If during the Open Enrollment period, the employer makes a change to a plan offering that an employee has already enrolled in, making that plan no longer available to that employee, then the employee may receive a new enrollment offering and may have to re-enroll.

Special Enrollment Periods (SEPs)

Qualifying life events will allow the employee to enroll outside of the business's annual open enrollment period.

- Most changes must be reported within 30 days from the date of the Qualifying Event.

After reporting a Qualifying Event, the effective date will depend on the type of event being reported. The effective date could be:

- The date of the Qualifying Event
- The day after the Qualifying Event
- The first of the following month after the Qualifying Event



SBM Enrollment Timing



The Small Business Marketplace allows qualified individuals a Special Enrollment Period (SEP) if they have one of the following changes of circumstances:

Marriage
Divorce/Legal Separation
Birth/Adoption
Relocation
American Indian/Alaskan Native
Legal Orders
Death
Remove Enrolled Dependents
Loss of Medicaid/Child Health Plus Coverage
Loss of Health Insurance for a Qualified Dependent

SBM Enrollment Timing



How to enter a qualifying event in the application:

- If the employee has access to their account, they are able to report most Qualifying Events (QE) by clicking on the “Report Change in Circumstance” tab.
- The Employer or Navigator can report a QE on behalf of the Employee. From the Employer Roster, the Employer clicks the “Manage” button for the Employee with the QE; a Navigator can access the employee’s account from the Navigator Dashboard.
- Some QEs must be reported through the NY State of Health Call Center (855-355-5777).
 - Changes in Circumstances which involve American Indians/Alaskan Natives or Legal Orders must be reported by calling the Call Center.

Can an employer terminate SBM participation?

An employer can choose to terminate Small Business Marketplace participation at any time.

- Coverage terminates at the end of the month in which the termination request was received.
- When an employer terminates Small Business Marketplace participation, the system will automatically disenroll all enrolled employees (and employer, if applicable) and send notices to both employee(s) and employer(s) that coverage has been terminated.
- This notice will also contain information about potential tax implications for the employer.
- An Employer Group can be terminated for non-payment of premiums – termination is initiated by the Small Business Marketplace.
 - Termination for non-payment occurs on the last day of the month for which payment was received

SBM Training Resource



All SBM Certified Navigators will receive resources accompanying this training.

You will receive:

- **How to Enroll an Employee**
 - Simple instructions accompanying each screenshot for your reference.
- **How to Create an NY.gov ID for all types of Marketplace applicants.**

NY State of Health Resources available at info.nystateofhealth.ny.gov/resources

- **Producer Tools and Resources:** <https://info.nystateofhealth.ny.gov/ProducerToolkit>
 - Includes an administrative guide for Producers
 - Details on Eligibility and Enrollment Policies
 - Step-by-step User Guides
 - Videos on account set-up and enrollment
 - Benefit and Rate Details
 - So much more.....
- **Small Business Premiums “Quick Quote”**
<https://nystateofhealth.ny.gov/employer>
- **Small Business Marketplace marketing materials (available in English + 7 additional languages – order online)**
https://info.nystateofhealth.ny.gov/sites/default/files/Overview%20for%20Small%20Business%20Owners_1.pdf
<http://info.nystateofhealth.ny.gov/sites/default/files/Poster-Small%20Businesses%208.5%20x%2011.pdf>

SBM Assessment for Certification

- Navigators who complete this training and need to be certified in the Small Business Marketplace must go to the link below and take the assessment.

https://www.surveymonkey.com/r/small_business_marketplace_assessment

nystateofhealth.ny.gov

1-855-355-5777

Assistor.Admin@health.ny.gov