

The ACA's Impact on Nonprofits: Preparing Your Group Health Plan

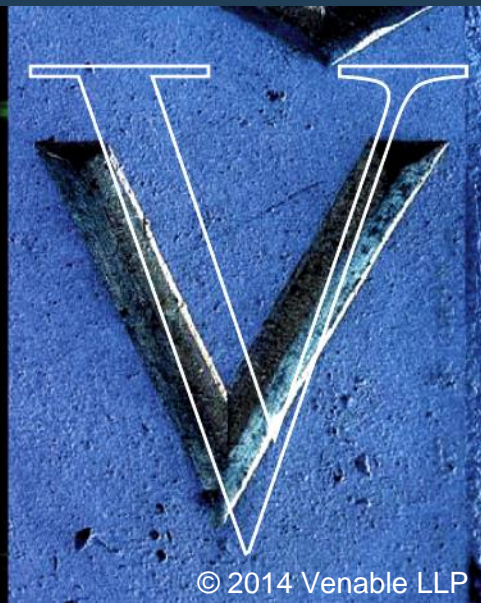
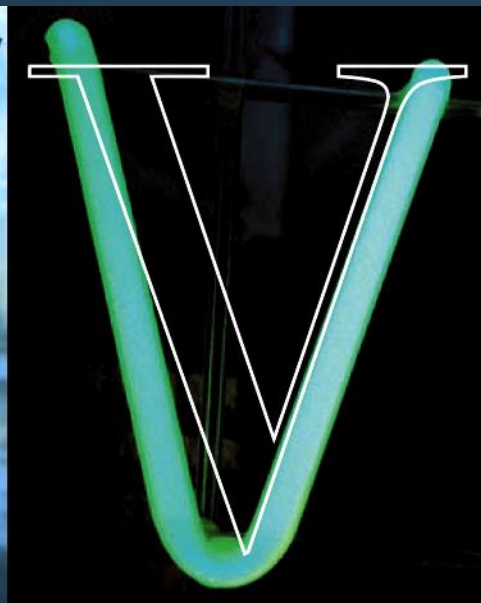
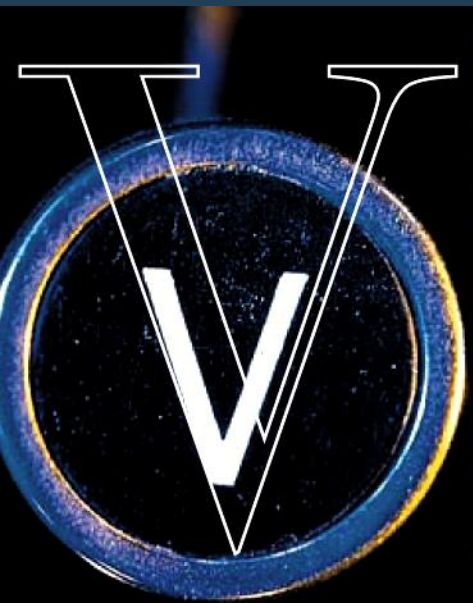
Thursday, November 13, 2014, 2:00 p.m. – 3:30 p.m. ET

Venable LLP and Association TRENDS

Speakers

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Agenda

- “Play-or-Pay” Rules
- Identifying Full-Time Employees
- Affordability and Minimum Value Standards
- Interacting with the Exchanges
(the “Health Insurance Marketplace”)
- Next Steps



Introduction to the Play-or-Pay Rules

Introduction to the Play-or-Pay Rules

- Individual Mandate (effective January 1, 2014)
 - The Patient Protection and Affordable Care Act (ACA) requires individuals to maintain minimum essential coverage or pay a penalty tax.
 - Some individuals qualify for a premium subsidy from the government to purchase such coverage on the Exchanges.



Introduction to the Play-or-Pay Rules

- Employer Mandate (generally effective January 1, 2015)
 - A one-year delay; originally effective January 1, 2014
 - Special rules for fiscal year plans
 - The ACA imposes a mandate on large employers to offer minimum essential coverage to their full-time employees and their dependent children (up to age 26) or pay a penalty tax
 - In addition, if that minimum essential coverage is not affordable or does not provide minimum value, the employer is subject to a penalty tax



Introduction to the Play-or-Pay Rules

- The Employer Mandate applies to “applicable large employers,” defined as “an employer that employed an average of at least 50 full-time employees [including full-time equivalent employees (FTEs)] on business days during the preceding calendar year.”
 - Determined on a controlled group basis
 - Full-time means an average of 30 hours/week or 130 hours/month
 - Common law test used for identifying employees

Note – Special Transition Rule for 2015 – At least 100 full-time employees (including FTEs)



Play-or-Pay – Penalty Tax Trigger

- A penalty tax is due for any month in which at least one full-time employee is certified to the employer as having purchased health insurance through an Exchange with a premium subsidy from the government for that coverage.
- An individual is NOT eligible for a premium subsidy offered through the Exchange if he or she is eligible for employer-sponsored coverage that is affordable and provides minimum value.



The Mechanics of the Play-or-Pay Penalties

The “No Coverage” Penalty

- Penalty for failure to provide coverage
 - If more than 5% of full-time employees are not offered coverage and even ONE full-time employee obtains a subsidy through an Exchange → the no coverage penalty is triggered

Note – Special Transitional Rule for 2015 – if more than 30% (not 5%)



The “No Coverage” Penalty

- Penalty for failure to provide coverage
 - Penalty = \$2,000/year * TOTAL number of full-time employees
 - Assessed on a monthly basis (\$166.67/employee/month)
 - First 30 (*80 for 2015*) full-time employees are disregarded
- Penalty applies on an employer-by-employer basis and not on a controlled group basis
- Be careful not to play AND pay



Identifying Full-Time Employees

- An employee is full-time if he or she works an average of at least 30 hours of service/week or 130 hours of service/month
- Hours of service
 - Each hour for which an employee is paid, or entitled to payment, for performance of work; and
 - Each hour for which an employee is paid, or entitled to payment, for vacation, holiday, illness, incapacity (including disability), layoff, jury duty, military leave, or leave of absence



Identifying Full-Time Employees

- There are two measurement methods of determining “full-time” status
 1. The monthly measurement method
 2. The look-back measurement method



The Monthly Measurement Method

- Ongoing employees
 - Determine each employee's status as a full-time employee by counting the employee's hours of service for the prior calendar month
 - Little margin for error (5%, 30% for 2015)
- New hires
 - If full-time, must be offered coverage no later than the first day of the first calendar month immediately following three full months of employment
 - Ex: Hired June 15 into full-time position, must be offered coverage as of October 1 to avoid penalties
 - Remember, maximum 90-day waiting period



The Look-Back Measurement Method

- Safe harbor to determine if employee is full-time
 - If an employee averages 30 or more hours of service per week during a measuring period → he or she should be treated as “full-time” (*i.e.*, offered coverage) during the subsequent stability period
 - There is an administrative period between the measuring period and the stability period to (1) determine if an individual is full-time, and (2) offer coverage

Measuring Period

Administrative Period

Stability Period



The Look-Back Measurement Method

- **Standard Measuring Period** = 3 to 12 months
- **Standard Administrative Period** = Up to 90-day period between a standard measuring period and a corresponding stability period
- **Standard Stability Period** = 6- to 12-month period immediately following the standard measuring period (and any applicable administrative period)



The Look-Back Measurement Method

Ongoing Testing of Employees

<p>Standard Measuring Period 1 (11/1/13-10/31/14)</p>	<p>Administrative Period 1 (11/1/14-12/31/14)</p>	<p>Stability Period 1 (1/1/15-12/31/15)</p>		
		<p>Standard Measuring Period 2 (11/1/14-10/31/15)</p>	<p>Administrative Period 2 (11/1/15-12/31/15)</p>	<p>Stability Period 2 (1/1/16-12/31/16)</p>



The Look-Back Measurement Method

- New hires
 - Any individual reasonably expected to work at least 30 hours per week is automatically considered a “full-time” employee
 - All other employees = variable hour
 - Includes part-time employees (*i.e.*, employees not expected to work 30 hours/week)
 - “Seasonal employees” (even if they are initially expected to work 30 or more hours per week)



The Look-Back Measurement Method

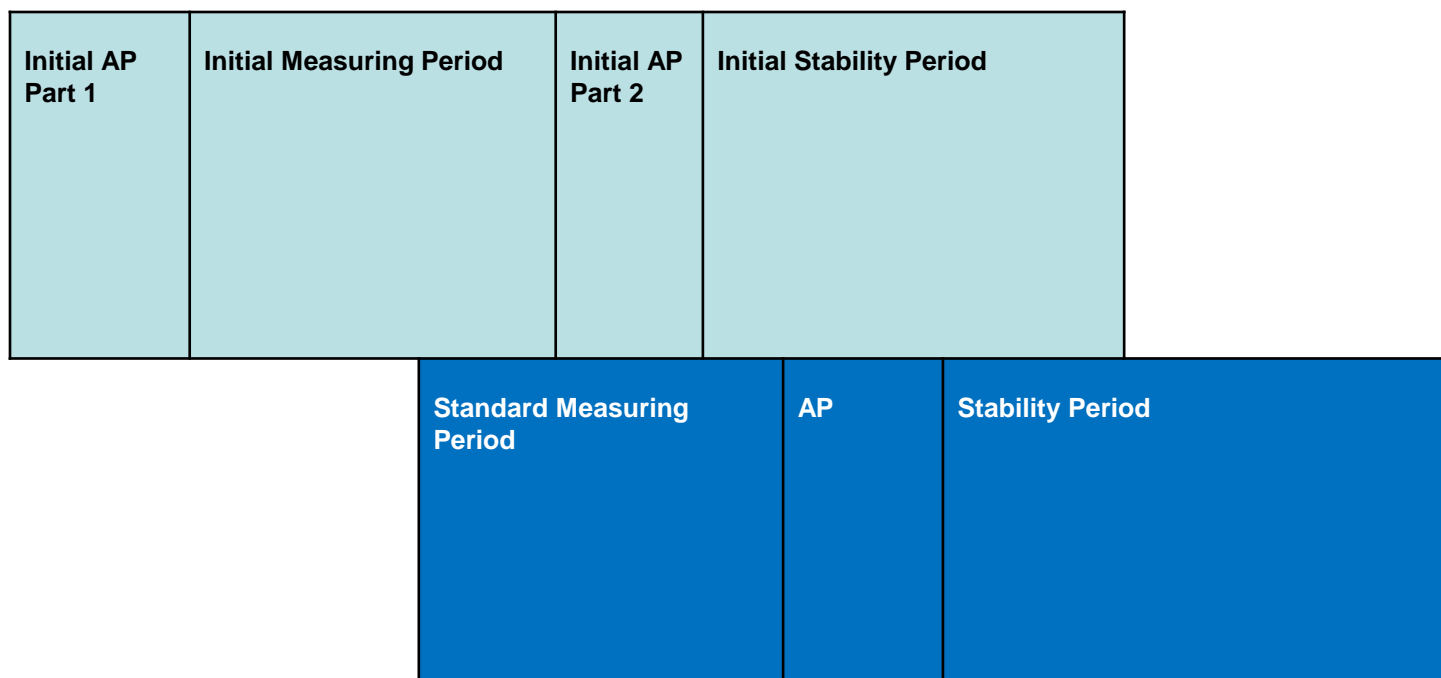
- New hire reasonably expected to work 30 hrs/week
 - Must be offered coverage no later than the first day of the first calendar month immediately following three full months of employment
 - Again, remember the maximum 90-day waiting period

- New hire variable hour employee
 - **Initial Measuring Period** = 3 to 12 months from date of hire
 - Overlaps with first full **Standard Measuring Period** after employment begins



The Look-Back Measurement Method

Testing for New Variable Hour Employees



The Look-Back Measurement Method

- Change in employment status rule
 - General rule: No changes in eligibility until next stability period
- Special rules apply to unpaid leaves of absence (such as unpaid FMLA leaves)
- Special rehire rules apply
 - Generally, rehires can be classified as new employees (and, therefore, subject to a new initial measuring period) only if they are not credited with any hours of service for at least 13 consecutive weeks



Using Different Measurement Methods

- Different measurement methods are permissible only for the following categories of employees
 - Employees employed by different entities
 - Salaried vs. hourly
 - Employees in different states
 - Collectively bargained vs. non-collectively bargained
 - Each group of collectively bargained employees

- Can't use monthly measurement for employees with predictable hours and look-back measurement method for all others



Determining Which Method to Use

- Monthly measurement
 - Not necessarily a planning tool
 - Little margin for error
 - Best for employers:
 - That offer minimum essential coverage to ALL employees
 - Use of a “skinny” or “basic” plan
 - Have employees who work steady hours
 - All employees work at least 30 hours/week, or
 - The hours worked by each employee do not vary



Determining Which Method to Use

- Look-back measurement method
 - Large portion of workforce has hours that vary; for example:
 - on call
 - per diem
 - shift
 - seasonal
 - Employer does not want to offer coverage to ALL employees
 - Employer okay with delay in coverage



The “Unaffordability” Penalty

- Penalty for not providing affordable/minimum value coverage
- Applies if:
 - Employee’s share of the premium for lowest-cost employee-only coverage would exceed 9.5% of the employee’s income, or an affordable plan does not provide minimum value—pay at least 60% of the allowed costs under the plan, AND
 - The employee receives a subsidy through an Exchange



The “Unaffordability” Penalty

- Penalty for providing “unaffordable” coverage
 - Penalty = \$3,000/year/employee
 - Assessed on a monthly basis (\$250/employee/month)
 - Applies only to employees who actually receive a premium subsidy for coverage on an Exchange



The “Unaffordability” Penalty

- Safe harbors for determining if the cost of coverage exceeds 9.5% of employee’s income
 - Form W-2 compensation
 - Rate of pay
 - Federal poverty limit

- Minimum value
 - Safe harbor plan designs
 - Minimum value calculator
 - Actuarial analysis



Interaction with the Exchanges

Subsidies Offered through the Exchanges

- GENERAL RULE: An individual is NOT eligible for subsidies offered through the Exchange if he or she is “eligible” for employer-sponsored coverage
 - So, even if your employees are subsidy-eligible, they CANNOT opt out of employer coverage, go to the Exchange, and access the subsidies



Subsidies Offered through the Exchanges

- EXCEPTION: The employer-sponsored coverage (1) is “unaffordable” [*i.e.*, the employee’s contribution for the lowest cost for self-only plan exceeds 9.5% of the employee’s household income (or certain other “safe harbor” measures)] or (2) does NOT provide “minimum value” (*i.e.*, the employer coverage does not pay for at least 60% of the benefits provided under the plan)
 - In this case, depending upon an employee’s income, an employee may opt out of employer coverage, go to the Exchange, and access the subsidies



Enrollment in the Exchanges

- Open enrollment period
 - Initial open enrollment period was Oct. 1, 2013 to March 31, 2014
 - For 2015, open enrollment is Nov. 15, 2014 to Feb. 15, 2014

- Special enrollment periods
 - Through April 15, 2014 for individuals who experienced difficulty enrolling in the Exchanges because of IT issues
 - Final Exchange regulations enumerate 9 special enrollment periods, including a special enrollment period upon becoming “eligible” for a premium subsidy because employer plan is “unaffordable” or not “minimum value”
 - HHS has authority to develop additional special enrollment periods



Enrollment in the Exchanges

- Enrollment process
 - The employee must access the Exchange [through, for example, Healthcare.gov or a “web-broker entity” (WBE)]
 - Complete an application for enrollment in a “qualified health plan”
 - Complete an application for premium subsidy



Interaction with the Exchanges

- Verification process
 - If an employee goes to the Exchange and applies for a premium subsidy, the Exchange will ask the employee for information about his/her employer plan
 - If the employee indicates that his/her employer plan was “unaffordable” or did not provide “minimum value,” the Exchange must access an electronic data source to verify whether this information is correct
 - If no electronic data source of information is available, the Exchange will contact the employer directly, asking the employer to verify the information



Interaction with the Exchanges

- Appeals process
 - If the employer is non-responsive, the Exchange must give the subsidy to the employee
 - The employer will be assessed a penalty tax by the IRS
 - Once assessed, the employer may appeal the determination and present information showing that its plan was “affordable” and provided “minimum value”



Next Steps

Next Steps

- Determine whether to play or pay
- Determine measurement method
- Update plan documentation
- Establish record-keeping system
 - Identify full-time employees
 - Document offers of coverage
 - Gather information for new reporting
- Determine whether employer should change from a fiscal plan year to a calendar plan year



Questions?

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