

EMPLOYER MANDATE FACT SHEET



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Overview

Employers must offer health insurance that is affordable and provides minimum value to their full-time employees and their children up to age 26 or be subject to penalties. This is known as the employer mandate. It applies to employers with 50 or more full-time employees, or full-time equivalents (FTE), and will be phased in during 2015 and 2016 based on employer size.

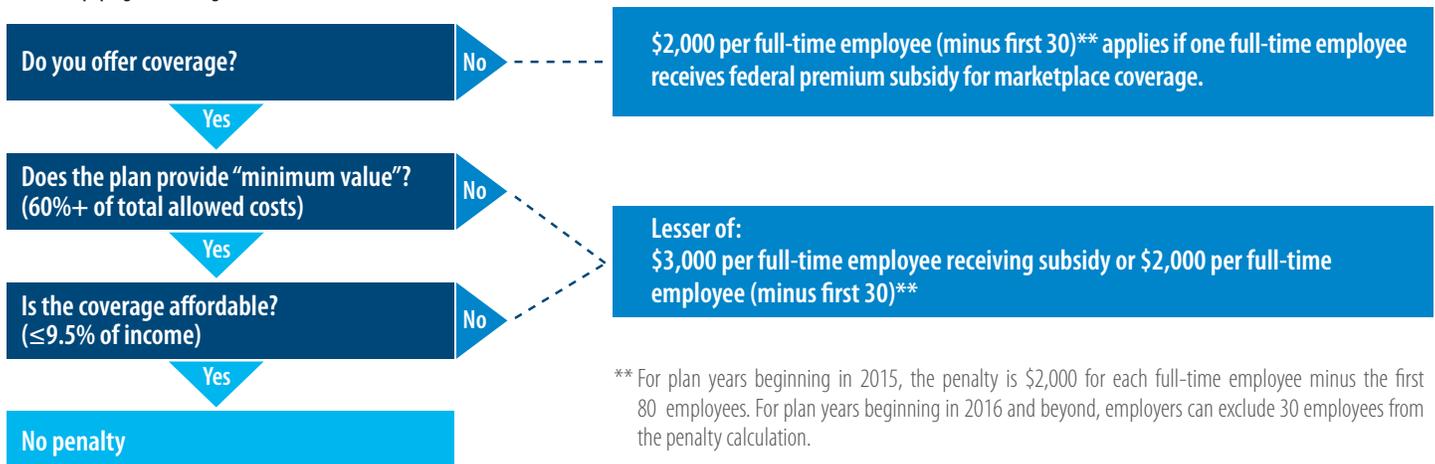
Employees who work 30 or more hours per week are considered full-time. This chart shows how the employer mandate will be phased in based on employer size:

EMPLOYER SIZE	2015 PLAN YEAR	2016 PLAN YEAR AND BEYOND
1-49 full-time and FTE employees	Does not apply	Does not apply
50-99 full-time and FTE employees*	Does not apply	Employer must offer coverage to 95% of full-time employees and dependents to age 26
100 or more full-time and FTE employees	Employer must offer coverage to 70% of full-time employees and dependents to age 26	Employer must offer coverage to 95% of full-time employees and dependents to age 26

* For 2015, these employers will need to certify that they are not reducing the size of their workforce to stay below 100 employees.

The employer mandate and employer penalties

Employers subject to the employer mandate are required to offer coverage that provides “minimum value” and is “affordable” or be subject to penalties. The chart below explains these requirements and the penalties that apply if they are not met:



** For plan years beginning in 2015, the penalty is \$2,000 for each full-time employee minus the first 80 employees. For plan years beginning in 2016 and beyond, employers can exclude 30 employees from the penalty calculation.

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Frequently asked questions

Q How do I determine if my plan provides “minimum value”?

A A plan provides “minimum value” if it **pays at least 60% of the cost of covered services** (considering deductibles, copays and coinsurance). HHS has developed a minimum value calculator that can be used to determine if a plan provides minimum value. The minimum value calculator is available at <http://www.cms.gov/site-search/search-results.html?q=minimum%20value%20calculator>.

Q How is “affordable” coverage determined?

A Coverage is considered “affordable” if employee contributions for employee only coverage do not exceed 9.5% of an employee’s household income. There are three safe harbor methods for determining affordability:

- › 9.5% of an employee’s W-2 wages (reduced for any salary reductions under a 401(k) plan or cafeteria plan)
- › 9.5% of an employee’s monthly wages (hourly rate x 130 hours per month)
- › 9.5% of the Federal Poverty Level for a single individual

In applying wellness incentives to the employee contributions used to determine affordability, assume that each employee earns all wellness incentives related to tobacco use but no other wellness incentives.

Q What are the employer mandate requirements for plan years beginning in 2015?

A For plan years beginning in 2015, employers with 100 or more full-time and FTE employees must offer affordable/minimum value medical coverage to their full-time employees and their dependents to age 26 or may be subject to penalties. The amount of the penalty depends on whether or not the employer offers coverage. For 2015, the employer is considered to offer coverage if it offers coverage to 70% of its full-time employees and their dependents. Employers who fail to offer coverage may be subject to a penalty of \$2000 per full-time employee minus the first 80. Employers who offer coverage may still be subject to a penalty if the coverage is not affordable or does not provide minimum value, which is the lesser of \$3,000 per full-time employee receiving a federal subsidy for coverage purchased on an exchange or \$2000 per full-time employee minus the first 80.

Employers must treat all employees who average 30 hours a week as full-time employees.

Examples

Assume each employer has 1000 full-time employees who work at least 30 hours per week.

- › Employer 1 currently offers medical coverage to 800 employees who work 40 hours a week and their dependents. The company is considered to offer coverage since it offers coverage to more than 70% of its full-time employees and their dependents.
- › Employer 2 currently offers medical coverage to 500 full-time employees and their dependents. The company will need to offer coverage to 200 more full-time employees and their dependents to meet the 70% requirement to be treated as offering coverage.
- › Employer 3 has 500 full-time salaried employees who are offered coverage and 500 full-time hourly employees who are not offered coverage. The company will need to offer coverage to at least 200 hourly employees (and their dependents) to meet the 70% requirement to be treated as offering coverage.
- › Employer 4 offers coverage to 700 full-time employees and their dependents. Only 600 of those employees actually enroll in coverage. The company meets the requirements to be treated as offering coverage.

Q How are dependents defined?

A Dependents include children up to age 26, excluding stepchildren and foster children. At least one medical plan option must offer coverage for children through the end of the month in which they reach age 26. Spouses are not considered dependents in the legislation, so employers are not required to offer coverage to spouses. The requirement to offer dependent coverage will not apply in 2015 to employers that are taking steps to add dependent coverage by 2016.

Q When do the penalties begin?

A The employer mandate penalty for employers with 100 or more full-time and FTE employees is effective for the first plan year beginning on or after January 1, 2015.

For employers with 50 to 99 full-time and FTE employees, the penalty is effective for the first plan year beginning on or after January 1, 2016.

Q How will an employer know if a penalty is due?

A If an employee receives subsidized coverage, the employer will be notified by the Health Insurance Marketplace. The employer will then be provided an opportunity to respond and appeal if the employee was offered coverage that meets the minimum value and affordability standards. The employer will not be contacted by the IRS about penalties for any given year until after individual tax returns and employer information reports on coverage are due, i.e. after tax-filing and reporting dates on any given calendar year.

Q How do penalties apply to companies with a common owner?

A Companies that have a common owner are combined for purposes of determining whether they are subject to the mandate. However, any penalties would be the responsibility of each individual company.

Q How will the Federal government know an employer is complying with the employer mandate?

A IRS Code 6056 requires all applicable large employers to file an annual report that ensures compliance with the employer mandate. The reporting will include information on all employees who were offered and accepted coverage, and the cost of that coverage on a month-by-month basis. More details on Large Employer reporting can be found on the [Reporting Requirements Fact Sheet](#).

Waiting period limitation

Employers may not impose enrollment waiting periods that exceed 90 days for all plans, both grandfathered and non-grandfathered, beginning on or after January 1, 2014. Shorter waiting periods are allowed. Coverage must begin no later than the 91st day after the enrollment date. All calendar days, including weekends and holidays, are counted in determining the 90-day period.

Examples of employer penalties

The employer does not offer coverage to full-time employees

The penalty is \$2,000 per full-time employee, excluding the first 30 employees.* This example shows how the penalty would be calculated.

EMPLOYER	TRIGGER	PENALTY
500 full-time employees No coverage offered	1 employee purchases coverage on the marketplace and is eligible for a federal premium subsidy	\$2,000 per full-time employee, minus the first 30 employees* $500 - 30 = 470$ employees $470 \times \\$2,000 = \\$940,000$ penalty

The employer offers coverage that does not meet the minimum value and affordability requirements

The penalty is the lesser of the two results, as shown in this example.

EMPLOYER	TRIGGER	PENALTY
1,200 full-time employees Employer offers coverage, but coverage is not affordable and/or doesn't provide minimum value	The penalty is triggered if 1 employee purchases coverage on the marketplace and receives a federal premium subsidy 250 employees purchase coverage on the marketplace and are eligible for a subsidy	Lesser of \$2,000 per full-time employee, minus the first 30 employees* OR \$3,000 per full-time employee receiving a federal premium subsidy $1,170 \times \$2,000 = \$2,340,000$ penalty $250 \times \\$3,000 = \\$750,000$ penalty (lesser penalty applies)

*For plan years beginning in 2015, the penalty is \$2,000 for each full-time employee minus the first 80 employees. For plan years beginning in 2016 and beyond, employers can exclude 30 employees from the penalty calculation.

Determining how many full-time employees you have

Companies that have 50 or more full-time or FTE employees during any calendar year must offer coverage that meets the employer mandate standards to all full-time employees and their dependents during the following calendar year (100 or more employees in 2014 for 2015 coverage) or be subject to penalties.

The regulations allow various methods for making this calculation. Because the determination of full-time status can be complex, employers should consult with their legal counsel.

- ▶ **Full-time** employees work an average of 30 hours per week or 130 hours per calendar month, including vacation and paid leaves of absence.
- ▶ **Part-time** employees' hours are used to determine the number of full-time equivalent employees for purposes of determining whether the employer mandate applies.
- ▶ **FTE** employees are determined by taking the number of hours worked in a month by part-time employees, or those working fewer than 30 hours per week, and dividing by 120.

The following information can help companies with part-time and seasonal employees determine their number of full-time and FTE employees.

- ▶ Only employees working in the United States are counted.
- ▶ Volunteer workers for government and tax-exempt entities, such as firefighters and emergency responders, are not considered full-time employees.
- ▶ Teachers and other education employees are considered full-time employees even if they don't work full-time year-round.
- ▶ Seasonal employees who typically work six months or less are not considered full-time employees. This includes retail workers employed exclusively during holiday seasons.
- ▶ Schools with adjunct faculty may credit 2¼ hours of service per week for each hour of teaching or classroom time.
- ▶ Hours worked by students in federal or state-sponsored work-study programs will not be counted in determining if they are full-time employees.



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