To comply with the federally-mandated provisions of the 2010 Patient Protection and Affordable Care Act (also known as the “Affordable Care Act,” or “ACA”), Florida State University anticipates offering State of Florida Group Health Insurance coverage as an optional benefit for all qualified OPS employees, starting on January 1, 2014.

- Existing OPS employees will be offered coverage if they have worked an average of at least 30 hours per week (0.75 FTE) during the six month look back period from April 1, 2013 through September 30, 2013. Eligible employees will then participate in the normal State of Florida Benefits Open Enrollment Period in late 2013, with health insurance coverage, if selected, to begin effective January 1, 2014.

- Any OPS new hire with a “reasonable expectation” to work a minimum of 30 hours per week (0.75 FTE) will be offered the opportunity to enroll in the plan within 60 days of initial employment.

- Moving forward, the FTEs of all actively employed OPS workers will be continuously evaluated during an annual measuring period, defined as October 1 through September 30 of the following year, to determine future health insurance plan eligibility. New hires who do not initially meet the “reasonable expectation” criteria will be measured for a 12 month period beginning on their start date.

- Once deemed eligible to receive this health insurance coverage, an employee will be entitled to receive the coverage benefit for 12 continuous months, known as the stability period. If enrolled, coverage will be maintained throughout the entire stability period, regardless of any changes in hours worked during the stability period.

IMPORTANT WEB LINKS:

HealthCare.gov (U.S. Department of Health & Human Services) – Comprehensive information about the Affordable Care Act.

Affordable Care Act FAQ (U.S. Department of Labor) – Frequently Asked Questions about employer implementation of the Affordable Care Act.

The Affordable Care Act (CUPA-HR) – News updates and resources related to the Affordable Care Act, provided by the College and University Professional Association for Human Resources (CUPA-HR).

Should you have any questions or concerns about the implementation of the OPS Health Insurance Plan, please contact the FSU Human Resources Benefits Office at (850) 644-4015, or email insben@fsu.edu. This notice, posted on the main Human Resources site [http://hr.fsu.edu], will be updated as new information is released.
**Employer Responsibility:**
The Affordable Care Act requires employers to offer affordable coverage to employees who work 30 hours on average per week. Federal guidelines require us to determine eligibility by measuring hours worked during specific periods. “Affordable” means that the employee portion of the premium cannot exceed 9.5% of the employee’s annual wages. Based on the current minimum wage, the monthly employee premium for single coverage cannot exceed $96.

Agencies, universities and non-warrant agencies (agency) must work with DSGI and People First to ensure the state does not pay a penalty for failure to comply with these guidelines. If only one eligible employee is not offered coverage, enrolls in coverage through an exchange, and receives a premium credit (subsidy), the state will be required to pay $2,000 penalty for every employee – approximately $321 million.

The following information is subject to change based on state and federal legislation.

**Definitions:**
- **New hire measurement period** – the 12-month period beginning on the first day of the first month following an OPS employee’s start date in which the average hours worked weekly will be measured to determine eligibility for coverage.

- **Open Enrollment (OE) measurement period** – the 12-month period from October 1 through the following September 30 in which the average hours worked weekly will be measured to determine eligibility for coverage for the subsequent stability period (plan year).

- **Stability period** – the 12-month period following a measurement period during which eligible employees who enroll in coverage must be covered.
  - Following the new hire measurement period, the stability period is dependent upon the hire date.
  - Following the OE measurement period, the stability period is January 1 through December 31.

**FAQs:**
1. Will all OPS employees be offered coverage?
   - No. To be eligible for coverage OPS employees must:
     - Be reasonably expected to work an average of 30 hours or more per week when they are hired; or
     - Work an average of 30 or more hours per week as measured during a 12-month period. Hours worked in multiple OPS positions will be combined.

2. What types of coverage will be available to eligible OPS employees?
   - Benefits, plans and dependent coverage all to be determined.

3. When will OPS coverage start?
   - Coverage will begin January 1, 2014 for those determined to be eligible.
4. How will eligibility for OPS employees be determined?
   - A special measurement period will be used to determine eligibility for coverage for all OPS employees working as of April 1, 2013.
     o If they work 30 hours on average or more per week from April 1 through September 30, they will be eligible to enroll in coverage during OE with an effective date of January 1, 2014.
     o If they do not work 30 hours or more, eligibility for future coverage will be determined at the end of the next OE measurement period.
   - OPS employees hired between April 2, 2013 and September 30, 2013 who are reasonably expected to work 30 hours or more per week will also be eligible to enroll in coverage during OE.
   - Employees hired April 2, 2013 and after and not reasonably expected to work 30 hours or more per week will not be eligible during OE to enroll in coverage for the next plan year. Eligibility for future coverage will be determined at the end of their new hire measurement period.

AGENCIES: keep a list of any OPS employees (Name and EE ID) hired between April 2, 2013 and September 30, 2013 who are expected to work 30 hours or more per week (template attached). It is recommended that BOSP agencies require OPS employees to submit timesheets through People First to help with this tracking component.

5. What if an OPS employee's hours increase from less than 30 to more than 30?
   - If the OPS employee is in the new hire measurement period and his hours increase to reasonably be expected to work an average of 30 hours per week or more, he is eligible for coverage.
   - If the OPS employee’s hours increase any time outside of the new hire measurement period, eligibility will be determined in the next measurement period.

6. Once enrolled, how long do OPS employees get to keep their coverage?
   - Coverage continues for 12 months, as long as they continue working for the state, even if their hours drop below an average of 30.
   - Eligibility to continue coverage for the subsequent plan year will be determined annually by measuring hours worked during the OE measurement period.
   - If covered OPS employees terminate employment, they are covered through the last day of the month following termination, provided premiums are paid in full. They are eligible to continue coverage through COBRA.

AGENCIES: Plan for a 12-month coverage period when establishing annual budgets.

7. What happens if an OPS employee has coverage and is then determined to be ineligible during the OE measurement period?
   - Coverage will end at the end of the 12-month stability period; however, they are eligible to continue coverage through COBRA. Eligibility for the subsequent plan year will be measured during the next OE measurement period.
8. Will this process be automated?
   - The goal is to automate all processes through People First; however, manual processes will be in place until all requirements, programming and testing have been completed.

9. Who will pay the premium for OPS coverage?
   - Employees and employers will make contributions for coverage. Premiums will be established in the GAA.
   - Eligible OPS employees working at multiple agencies will receive employer contributions from both agencies.

   AGENCIES: During the hiring process, agencies need to determine if the OPS candidate is already working at another agency and any potential budgetary impacts (see attached template).

10. Will agencies receive additional budget to pay these contributions?
    - To be determined by the legislature and the governor.