2015-2016: What You Need To Know About The Affordable Care Act





National strength. Local focus. Individual care.[™]

We are committed to making sure you have the information you need to stay ahead of changes that may impact you and your business. This guide includes details about key components of the Affordable Care Act that will help you plan for the future and stay compliant.

This information is to help you prepare. You should contact your tax advisor and legal counsel to determine the steps you need to take to comply with the legislation.

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Health Care Reform is Now Health Care

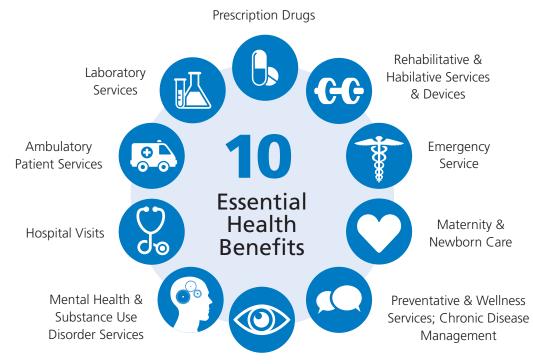


Key Components of the Affordable Care Act (ACA)

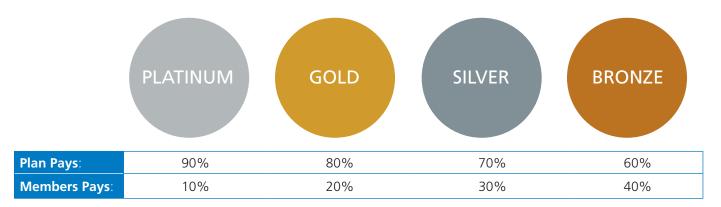
Provisions of the Affordable Care Act implemented between 2010 and 2014 are now part of everyday health care

Preventive Services

Essential Health Benefits



Community Rated products fall into one of four metal levels



- Dependents covered up to age 26
- Individuals and small businesses can buy health insurance on NY State of Health

Taxes & Fees

The Affordable Care Act introduced a number of taxes and fees that affect the cost of premiums. These taxes and fees keep the market stable and continue to fund parts of the ACA.

Not all fees are permanent:

- Reinsurance Fee ends after 2016
- PCORI Fee ends after 2019

		Amount	What it pays
Š	Excise Tax	\$8 billion (2014) - \$14.3 billion (2018)	Helps fund premium tax credits for individuals and families
Health Insurance Companies	Transitional Reinsurance Fee	\$2.25/enrollee/month	Helps stabilize the health insurance industry during the first years of Health Care Reform
Health nce Com	Risk Adjustment Fee	\$1.75/enrollee/year	Helps stabilize individual, family and small business health insurance markets
Insura	PCORI Fee	\$2 + inflation per average number of covered members	Helps fund research to improve health care decisions and delivery
٤	Cadillac Tax	40% tax on employer health insurance premiums that exceed IRS annual limits	Tax on high cost health insurance, beginning in 2018
d employe	Transitional Rein- surance Fee (for self-funded plans)	\$2.25/enrollee/month	Helps stabilize the health insurance industry during the first years of Health Care Reform
Self-funded employers	PCORI Fee (for Self-Funded, HRA and HSA Plans only)	\$2 + inflation per average number of covered members	Helps fund research to improve health care decisions and delivery
For Individuals	Medicare Surcharge	0.9% gross income	Supports the Medicare program and only applies to those earning more than \$200,000 (single) and \$250,000 (married)

Coming soon: Cadillac Tax

The Affordable Care Act introduced an Excise Tax on High Cost Employer-Sponsored Health Coverage, also known as the Cadillac Tax. The 40% tax on high cost premiums is meant to reduce employer-based health care spending.

When does it apply?

The tax first applies to health coverage offered in 2018.

What coverage is affected?

Any employer-sponsored health coverage that's deducted from an employee's gross income. This includes pre-tax coverage like medical plans and pre-tax contributions to FSAs and HSAs. It doesn't include coverage where medical isn't primary, like dental, vision, and disability coverage. The IRS is still determining the exact details, but this is what we know so far. For more information, go to http://www.irs.gov/Affordable-Care-Act/Affordable-Care-Act/Tax-Provisions.

Excellus BCBS will keep you informed of any updates through our employer e-newsletter. Sign up at ExcellusBCBS.com/EmployerEmail

Who pays the tax?

Fully insured health insurance	Health insurance company
Employer contributions to FSAs and HSAs	Employer
Self-funded health insurance	TBD: may be the TPA or plan sponsor

How does it work?

The Cadillac tax is calculated on a monthly basis and applies when an employee enrolls in coverage that costs more than the monthly limit set by the IRS. The 40% tax applies to the amount over the monthly limit.

	Estimated Monthly Limit*:	Estimated Annual Limit*:
Self-only coverage:	\$850	\$10,200
Self + at least one dependent**:	\$2291.66	\$27,500

*These limits apply in 2018, will increase each year to account for inflation, and may be higher for retirees ages 55-64 and employees in high-risk professions

** Multi-employer coverage uses self + dependent limits

Note: Self-only and self + dependent coverage are calculated separately. For example, if an employee has self-only coverage for 3 months and self + spouse coverage for 9 months, the limit is \$850/month for the 3 months of self-only coverage and \$2291.66/month for the 9 months of self + spouse coverage.

For example:

Let's say you offer two health plans:

	Health Plan			
	Plan A	Plan B		
CO	Single: \$1,000/month	Single: \$700/month		
	Family: \$2,500/month	Family: \$1,800/month		
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	Employee Plan			
	A single employee enrolls in Plan A	A single employee enrolls in Plan B		
	↓ ↓	L		
	Calculate Cadillac Tax			
	\$1,000 premium - \$850 monthly limit = \$150	\$700 premium - \$850 monthly limit = -\$150		
	40% of \$150 =\$60 owed for the Cadillac Tax	Cadillac Tax does not apply		

What Small Employers Need to Know



New! Beginning January 1, 2016, the federal government defines a Small Employer as one with 100 or fewer full-time equivalent (FTE) employees.

If you have 50 or fewer FTE employees

Not much is changing this year. You can continue to buy your health insurance coverage directly from Excellus BlueCross BlueShield or through the New York State of Health Small Business Marketplace.

If you buy coverage through the Small Business Marketplace, talk to your tax advisor to see if you qualify for the small business tax credit.

If you have 51-100 FTE employees

Employers with 51-100 employees will move to community-rated metal level products and will have the option to buy coverage through the New York State of Health Small Business Marketplace. We've identified employers that may be impacted by the proposed community rating change for renewals on or after January 1, 2016. Our account management team is working closely with the employers and their brokers to ensure they land in a plan that's not only compliant, but also meets the needs of their employees.

If you have more than 50 FTE employees, you may still be considered an "Applicable Large Employer." This means you need to think about how the Employer Shared Responsibility and Coverage Reporting mandates apply to your business. See page 7 for more information on additional requirements for Applicable Large Employers.

Is My Business an Applicable Large Employer?



Your Employees Have Options

If you have employees who aren't eligible for your health insurance plan, they can still enroll in an Individual & Family plan directly through Excellus BCBS or the NY State of Health marketplace. Federal financial assistance is available to individuals who qualify based on household income and size. Go to ChooseExcellus.com/Help for more information.

Your Action Plan At a Glance – Small Employers with 1-100 FTE employees

Action	Effective Date	Mandatory?	Create Your Action Plan
Employer Shared Responsibility			
Determine if you are an "Applicable Large Employer" with 50+ full-time equivalent employees	Review data annually	Yes	
If you have 50 or more full-time equivalent employees, offer coverage to full-time employees or you may pay a penalty	2016 and after	Yes	
Reporting & Notifications			
Notify new employees about NY State of Health coverage options	Upon hire	Yes	
If you have 50 or more full-time equivalent employees, report minimum essential coverage on Form 1095-C	2015 plan year and after	Yes	
Small Business Tax Credit			
Determine if you qualify for the Small Business Tax Credit	File with income taxes	No	
Provisions coming soon			
Cadillac Tax	2018	Yes	
Non-discrimination of highly compensated employees	TBD pending further guidance from IRS	Yes	
Report the cost of health insurance on employees' W-2 forms	TBD for em- ployers who file fewer than 200 forms	Optional until further guidance from IRS	

What Large Employers Need to Know



Employer Shared Responsibility

The Affordable Care Act's Employer Shared Responsibility mandate requires "Applicable Large Employers" to offer health insurance to fulltime employees and their dependent children OR pay a penalty. Penalties may also apply if you don't offer at least one plan that is affordable and provides Minimum Value.

Affordable Coverage

Coverage is affordable if an employee's share of the premium for self-only coverage is no more than 9.5% of their taxable household income. An Applicable Large Employer has 50+ full-time equivalent employees (see page 5 for calculator]

A full-time employee works 30+ hours/week

You can use any or all of these methods to figure out if the coverage you offer is affordable:

- 1. The employee's share of self-only coverage is no more than their wages in Box 1 of their W-2 form
- 2. The employee's share of self-only coverage is no more than 9.5% of the employee's rate of pay multiplied by 130 hours
- 3. The employee's share of self-only coverage is no more than 9.5% of the Federal Poverty Level (FPL) for one person

Insurance would not be considered "affordable" if:

Employee annual earnings:	\$30,000	\$50,000
Insurance plan: More than	\$238 per month	\$396 per month

IMPORTANT NOTE: If you offer more than one health insurance plan, the affordability test applies to the lowest-cost plan available to each employee

Minimum Value

A health insurance plan provides Minimum Value if it covers at least 60% of the total allowed cost of benefits.

Penalties	
If you don't offer coverage to at least 95% of your full-time employees + dependents	If you don't offer at least one plan that is afford- able and provides Minimum Value
\$2,000(+inflation) per full-time employee First 30 full-time employees are not counted	\$3,000 (+inflation) for each full-time employee who buys coverage from the NY State of Health or other marketplace AND receives a tax credit

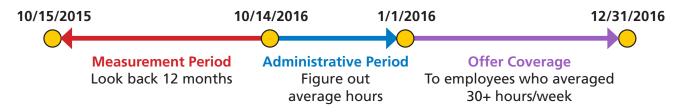
Do you have employees who work variable hours?

If you're not sure if an employee should be considered full time because they don't work a set schedule, you can use one of two methods to figure out if you're required to offer them coverage under the Employer Shared Responsibility mandate:

- 1. Calculate their actual hours worked each month OR
- 2. Use what's called the "Look Back" method to calculate average hours worked over a period of 3-12 months

How the "Look Back" method works:

Choose measurement period: Select a period of 3-12 months to measure the actual number of hours the employee worked.



Calculate employee hours: Take up to 90 days as an Administrative Period to determine the # of hours worked

Offer coverage: Offer coverage to employees who averaged 30+ hours per week

Your Employees Have Options

If you have employees who aren't eligible for your health insurance plan, they can still enroll in an Individual & Family plan directly through Excellus BCBS or the NY State of Health marketplace. Federal financial assistance is available to individuals who qualify based on household income and size. Go to ChooseExcellus.com/Help for more information.

Coverage Reporting Requirements - "6055" and "6056" Returns

Information Reporting of Offers of Health Insurance Coverage by Employers ("Section 6056 Returns")

Employers with 50+ FTE employees must file returns (Forms 1094-C & 1095-C) to the IRS beginning in 2016 for calendar year 2015. These returns provide information to the IRS to show whether the employer is or is not providing coverage to employees and that coverage meets minimum value and affordability levels. These returns will show if employers are compliant with the Employer Shared Responsibility mandate.

In addition to the returns, employers must send a statement to each employee. These statements give employees information they need when they file their taxes. These statements are used to determine if employees were eligible for a federal premium tax credit.

* Self-funded plan sponsors can use a combined form (Form 1095-C, including Part III) to file reporting information for both Sections 6055 and 6056.

Information Reporting by Health Coverage Providers ("Section 6055 Returns")

Insurance providers, including Excellus BCBS and self-funded plan sponsors, must report certain health coverage information to the IRS beginning in January 2016 for calendar year 2015. The information provided will include any months that individuals were covered by minimum essential coverage and will be used to verify the individual shared responsibility requirement.

In addition to the returns, Excellus BCBS and self-funded plan sponsors must send a statement to each employee. These statements give employees information they need when they file their taxes. They are used to determine if employees have to pay the Individual Mandate penalty for not having health insurance.

See the Group Administrator Guide for more information on how Excellus BCBS can help.



Action	Effective Date	Mandatory?	Create Your Action Plan
Employer Shared Responsibility			
If you have 50 or more full-time equivalent employees, offer coverage to full-time employees or you may pay a penalty	2016 and after	Yes	
Grandfathered Plans			
Review Grandfathered plans annually	Upon renewal	Yes (grandfathered plans only)	
Reporting & Notifications			
Notify new employees about NY State of Health coverage options	Upon hire	Yes	
If you have 50 or more full-time equivalent employees, report min- imum essential coverage on Form 1095-C	2015 plan year and after	Yes	
Report the cost of health insurance on employees' W-2 forms	Annually when you file W-2 forms	Yes; optional for employers who file fewer than 200 forms	
Provisions coming soon	1		
Cadillac Tax	2018	Yes	
Non-discrimination of highly compen- sated employees	TBD pending further guidance from IRS	Yes	
Automatic enrollment of new em- ployees	TBD pending further guidance from HHS	Yes, if you have 200+ employees	
Health Plan Identifier (HPID)	TBD until further notice from HHS	Yes, if you self- fund	

	2015	Employer Shared Responsibility begins for employers with 101+ FTE employees Coverage reporting for employers with 51+ FTE employees
	2016	Employers with 51-100 FTE employees become Community Rated Employer Shared Responsibility begins for employers with 51-100 First Minimum Essential Coverage reports are due.
	2017 2018	State can choose to open health insurance marketplace to large employers
		Cadillac Tax on plans with high premiums
	TBD	Non-discrimination rules for highly paid employees Auto-enrollment for employers with 200+ employees

Thank you for being our partners in health insurance. We will continue to keep you informed of any new guidance about the Affordable Care Act. Contact your Account Consultant for more information.

