



# *West Virginia National Guard Human Resources Office Bulletin*



**Bulletin Number:** 13-04

**Date:** 22 October 2013

**Applicability:** National Guard (NG) Technicians

## **The Patient Protection & Affordable Care Act**

**Subject:** Health Insurance Coverage under the Affordable Care Act

**References:** Public Law (PL) 111-148; Healthcare and Education Reconciliation Act of 2010

**Effective Date:** 1 October 2013

**Use:** The Patient Protection and Affordable Care Act, PL 111-148, and the Healthcare and Education Reconciliation Act of 2010, require all citizens to maintain minimum essential health coverage (MEC) for themselves and all dependents they claim on their tax returns. The Federal Government, state governments, insurers, employers, and individuals are given shared responsibility to reform and improve the availability, quality, and affordability of health insurance coverage in the United States.

The Health Insurance Marketplace does not affect the FEHB Program. All FEHB plans are eligible employer-sponsored plans, and provide minimum essential coverage; therefore, FEHB plans meet the definition of MEC.

**Employees Responsibility:** Effective 1 January 2014, the Affordable Care Act's individual shared responsibility provision requires each individual (including children) to:

- Maintain minimum essential health coverage (MEC) for each month; or
- Qualify for an exception; or
- Make a payment when filing his or her Federal income tax return.

Individuals who fail to maintain coverage will be assessed a monetary penalty when they file their Federal tax return, unless they qualify for an exemption for each month in a calendar year. Otherwise, the adult or married couple who can claim a child or other individuals as dependents for Federal income tax will owe a payment. Health insurance coverage under programs such as Federal Health Benefits (FEHB) including Temporary Continuation of Coverage (TCC), Medicare, TRICARE, and Children's Health Insurance Program meet the MEC requirement for MEC.

Employees who *are* eligible for the above mentioned coverage(s), have *not* elected coverage, and who are not covered under another program which meets MEC should review the IRS information on individual shared responsibility and the requirement to maintain MEC at <http://www.irs.gov/uac/Questions-and-Answers-on-the-Individual-Shared-Responsibility-Provision>.

Federal Employees are eligible to enroll in an FEHB program during Federal Employees Health Benefits Open Season beginning Monday, 11 November 2013 through Monday, 9 December 2013, or be subject to potential IRS penalties. Additionally, employees who are eligible for FEHB coverage, but who are not currently enrolled may enroll in an FEHB plan if they experience a Qualifying Life Event (QLE).

**Health Insurance Marketplace:** If you are ineligible to enroll in the FEHB Program, or if you are eligible to enroll in the FEHB Program, but you are not enrolled due to affordability issues or concerns, you may wish to visit the health insurance marketplace to review marketplace coverage options. Please be aware there are no government or employer contributions to the premiums for Health Insurance Marketplace plans. Also, premiums are paid on an after-tax basis for Health Insurance Marketplace plans. As a comparison point, the actuarial value of most FEHB plans meets or exceeds the actuarial value of the silver plan in the health insurance marketplace. Open Enrollment for health insurance coverage through the Marketplace begins 1 October 2013 for coverage effective as early as January 2014. More information and enrollment instructions may be found at [www.healthcare.gov/](http://www.healthcare.gov/).

If you are a Federal employee who is eligible to enroll in the FEHB Program, but you do not enroll or you cancel your FEHB enrollment to go under a health insurance marketplace plan, you should be aware of the consequences of such actions including the following but not limited to:

- If you die, you will not have an FEHB Self and Family enrollment for your survivors to continue, even if they are eligible for a survivor annuity.
- If you retire, you will not have an FEHB enrollment to continue in to retirement. Also, to be eligible to continue FEHB after retirement, a retiring employee must be enrolled or covered under the FEHB Program for the five years of service immediately before retirement, or if less than five years, for all service since the first opportunity to enroll. Employees may count their coverage under TRICARE toward meeting this requirement; however, the employee must be enrolled in an FEHB plan on the date of retirement to continue coverage.

**Resources:** The following links provide additional information on Affordable Care Act requirements, and IRS information on Individual Shared Responsibility Provision:

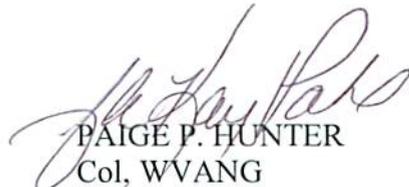
[www.opm.gov/insure](http://www.opm.gov/insure)

<http://www.opm.gov/healthcare-insurance/special-initiatives/health-care-reform>

<http://www.irs.gov/uac/Questions-and-Answers-on-the-Individual-Shared-Responsibility-Provision>

[www.healthcare.gov/](http://www.healthcare.gov/)

All references above, and other helpful information, may be found on the HRO website at [www.wv.ngb.army.mil/jobs](http://www.wv.ngb.army.mil/jobs). Your point of contact is the Employee Relations Specialist at (304) 561-6431.



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