Access to Health Care Benefits Under the Affordable Care Act

**Section A - Introduction**
The intent of the policy is to provide for the definitions and measurement periods for an otherwise non-health care benefit eligible employee to access the school district's group health insurance plan under provisions of the federal Affordable Care Act (ACA). This policy does not replace or otherwise impact employee health benefits provided to employees in accordance with negotiated agreements or other Board Policies.

**Section B – Employee Types**
The following are definitions for employee types utilized within this policy:
- Full-time employee: Employees hired to work a regular, ongoing schedule of at least 30 hours per week. This would include all employees assigned a 1.0 FTE and placed on a work calendar of 183 or more days.
- Part-time employee: Employees hired to work a regular, ongoing schedule of less than 30 hours per week (except part-time teachers).
- Part-time teacher: GEA employees hired to fill a position between 0.1 and 0.9 FTE, or GEA employees granted a “special leave of absence”.
- Seasonal employee: Employees hired into a position for which the district determines that the customary annual employment is six (6) months or less at approximately the same time each year.
- Variable hour employee: Hourly employees hired to work a schedule with hours that may vary above and below 30 hours per week.
- Ongoing employee: An employee employed for at least one full standard measurement period.

**Section C – Benefits Eligibility**
The following employee types defined in Section B are automatically eligible to participate in the plan:
- Full-time employees; and
- Part-time teachers.

The following employee types, as defined in Section B, may be eligible to participate in the plan with only single medical coverage at their full expense, without subsidization from the Board of Education, subject to the provisions of Section D:
- Part-time employees;
- Seasonal employees; and
- Variable hour employees.

**Section D – Access to Health Benefits through the Affordable Care Act**
An employee not eligible to access health benefits through Board Policy or negotiated agreement may be eligible to access benefits through the Affordable Care Act (ACA) provisions. Eligibility is determined through a look-back analysis of hours worked over the previous 12 months to determine if an employee has worked an average of 130 hours per month during a measurement period.

These measurement periods utilized include:
- Initial Measurement Period
A 12-month period from the first day of the month following the employee's date of hire unless the employee's date of hire is the first of the month (in which case the 12-month period will start on that date).

- **Standard Measurement Period**
  - A 12-month period during which an ongoing employee’s hours worked are counted monthly to determine benefits eligibility.

The Business Services department will perform a monthly look-back analysis to determine employees eligible to access health benefits through the ACA. Upon becoming eligible, the Benefits Manager will send a written notification to the employee, and the employee will have 30 days to enroll or waive coverage.

Once an employee becomes eligible for participation through the ACA, they remain eligible for either 12 months or the end of the current plan year, whichever is later.

Employees accessing benefits under this provision are subject to the following requirements:

- If an employee’s wages are insufficient to cover the employee’s share of the cost of coverage, they will be provided a 30-day grace period to resolve any remaining balance. Coverage will be terminated after the grace period if the balance is not paid in full. An employee who waives coverage or loses access to coverage will be able to enroll for coverage at the next open enrollment period, assuming that they remain eligible for coverage under the ACA.

- If an employee experiences a break in service (defined as any week in which the employee does not receive pay for an hour worked), their eligibility to access benefits may be impacted.
  - A service break does not include when an employee is on FMLA-eligible leave, jury duty, or military leave.
  - An employee who returns to work at the district after a break in service of at least four (4) weeks but less than twenty-six (26) weeks will be eligible for benefits upon return if the employee returns during an initial or standard measurement period in which the employee is treated as full-time under this policy.
  - An employee who returns to work at the district after a break in service of twenty-six (26) weeks or more or a break in service that is between four (4) and twenty-six (26) weeks but is longer than the employee’s prior period of employment, will be treated as a new hire for benefits eligibility determination and a new measurement period or waiting period to the extent any waiting period applies, as applicable, will be started.

- Should an employee no longer be eligible for access under the ACA, their benefits will terminate on the last day of the month for which they are eligible. However, the employee may remain eligible for benefits through COBRA (see Board Policy 5:115 - Eligible Former Employee Health Care Benefits).

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