

# Eligibility Information Businesses with One or More Eligible Employees

# **Group Size**

Benefits and rating guidelines are dependent on group size, which is determined by employee count.

- Under the Affordable Care Act (ACA), if your business has 50 or fewer full-time equivalent employees (FTEs), your medical plan must provide Essential Health Benefits (EHBs) including prescription drugs and pediatric oral and vision services.
- If your business has 51 or more FTEs, your medical plan is not required to include ACA-mandated EHBs.

Group size is determined as follows:

• Under the ACA, an FTE is one who worked at least 30 hours per week during the preceding calendar year, and part-time employees are included in the calculation.

Example: 3 employees each working 20 hours per week = 2 FTEs.

• Companies with a common owner or are otherwise related are generally combined and treated as a single group, and employees are combined for purposes of determining group size.

## **Business Eligibility Criteria**

In order to qualify for this health plan, your business must meet **all** of the following criteria:

- Operate in Hawaii with one or more employees who are not husband/wife nor parent/child
- □ Meet all federal and state employer requirements
- □ Have obtained a General Excise Tax License, Federal ID number, and Hawaii Department of Labor number
- □ Pay W-2 wages to employees and deduct FICA taxes from those wages
- □ Obtain a Department of Labor HC-5 Waiver Form annually for each eligible employee who waives employer-sponsored health coverage

### **Employee Eligibility Criteria**

Enrolling employees must meet **all** of the following criteria:

- Actively worked 20 or more hours each week for at least four consecutive weeks and continue to work 20 or more hours each week
- Earn at least 86.67 times the minimum hourly wage per month
- □ Receive regular monthly W-2 wages as statutory employees

### **HMAA Participation Requirements**

- HMAA does not co-exist with any other Preferred Provider Organization (PPO) plans in Hawaii
- HMAA does co-exist with Health Maintenance Organization (HMO) plans in Hawaii as follows:
  - Fewer than five eligible employees: 100% participation with HMAA required
  - Five or more eligible employees: 50% participation with HMAA and a minimum of four employees required

All final documents (including the first month's premium) must be received and approved by the 20<sup>th</sup> of the month in order for coverage to begin on the first of the following month. **Please do not cancel any existing coverage until underwriting has been completed and you have accepted the final rates.** 

If you have any questions, please contact HMAA at (808) 591-0088 or toll-free at (800) 621-6998.

Thank you for your interest in HMAA!