

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 20th 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!