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**MEMORANDUM #019---13HR**

**TO:** Agency Administrators

**FROM:** Carolyn Horwich, J.D., Director of Human Resources

**THROUGH:** Rip Colvin, Executive Director

**SUBJECT:** OPS Employees and State Group Insurance

**DATE:** June 28, 2013

As information and guidance come to the Justice Administrative Commission ("JAC") from the Department of Management Services ("DMS"), we are forwarding it to the agencies we administratively serve.

Attached to this memorandum is the most recent FAQ sheet from DMS regarding OPS employees. Although the FAQ builds on previous memos, some of the questions and answers are new, so please review the document carefully. The FAQ is also posted on DMS's website at:

[http://www.dms.myflorida.com/human\\_resource\\_support/state\\_group\\_insurance/state\\_employees\\_and\\_retirees](http://www.dms.myflorida.com/human_resource_support/state_group_insurance/state_employees_and_retirees).

If you have any questions, please do not hesitate to contact me at [Carolyn.Horwich@justiceadmin.org](mailto:Carolyn.Horwich@justiceadmin.org). Thank you.

1. I am an OPS employee at a state agency. Am I automatically eligible for health insurance coverage?

No. Federal guidelines say that employers must offer coverage to employees who work 30 hours per week or more on average. The guidelines further say that employers have to measure employees to determine their eligibility. We are working with state employers and People First to develop processes to accurately measure the hours OPS employees work in a 12-month period.

However, if you are hired by a state employer April 2, 2013, or after and your employer reasonably expects you to work 30 or more hours per week, you are automatically eligible for coverage.

2. I'm not called an OPS employee. Am I eligible?

Yes, if you work 30 hours per week or more on average over a 12-month period. "OPS (Other Personal Service) employee" is a term the state uses for variable hour or temporary employees. The following list of employees is an example of those whose work hours will be measured:

- Employees paid from OPS funds, except short-term and seasonal
- Exempt OPS salaried employees
- Employees hired on a temporary basis, unless they are leased from a staffing firm (e.g., Kelly Services)
- Employees paid an hourly wage or stipend who are not considered permanent
- Student workers and graduate assistants
- Adjunct professors
- Leased or contracted employees who are subject to control of the employer as to what is done and how it is to be done (Independent contractors whose work is dictated by the terms of a contract are *not* eligible for coverage through State Group Insurance.)
- Board members
- Fee for service employees
- AmeriCorps volunteers

3. How will I know if I'm eligible?

People First will mail you a package of information with your options, monthly costs, enrollment deadlines and other pertinent information.

4. What kinds of insurance can I get through the State Group Insurance Program?

Eligible OPS employees can enroll in State Group Insurance plans as follows:

- Health Insurance
  - Standard HMO or PPO - \$50 single or \$180 family per month
  - Health Investor HMO or PPO - \$15 single or \$64.30 family per month
  - Spouse Program - \$15 per spouse per month (spouses must both be employed by a state employer and eligible for coverage)
- Tax-favored Accounts
  - Health Savings Account - if enrolled in a Health Investor HMO or PPO, eligible to receive the monthly state contribution of \$41.66 single or \$83.33 family per month, as well as make their own pretax contributions
  - Dependent Care Reimbursement Account
- Life Insurance
  - Basic life – to participate, the employee must actively enroll and pay \$4.54 per month; coverage is effective on the effective date
- Dental, vision and other supplemental pretax plans

OPS employees will not be able to enroll in a Medical Reimbursement or Limited Purpose Medical Reimbursement Account or Optional Life insurance.

5. **When will coverage start?**

The earliest coverage will begin is Jan. 1, 2014.

6. **How will you determine who is eligible to participate in the upcoming open enrollment?**

- We will use a one-time, six-month measurement period to determine eligibility for coverage for all OPS employees working as of April 1, 2013.
  - If they work 30 hours on average or more per week from April 1, 2013, through Sept. 30, 2013, they will be eligible to enroll in coverage during open enrollment with an effective date of Jan. 1, 2014.
  - If they do not work 30 hours or more, eligibility for future coverage will be determined at the end of the next open enrollment measurement period (Oct. 1 through the following Sept. 30.)
- OPS employees hired between April 2, 2013, and Sept. 30, 2013, who are reasonably expected to work 30 hours or more per week will also be eligible to enroll in coverage during open enrollment.
- Employees hired April 2, 2013, and after but not reasonably expected to work 30 hours or more per week will not be eligible during open enrollment to enroll in coverage for Jan. 1, 2014. Eligibility for future coverage will be determined at the end of their 12-month new hire measurement period.

7. **What are the measurement and stability periods?**

The new hire measurement period is 12 consecutive months, beginning the first day of the first month following an OPS employee's hire date for which the average hours worked weekly will be measured to determine eligibility for coverage.

The open enrollment measurement period is also 12 consecutive months, from Oct. 1 through the following Sept. 30 for which the average hours worked weekly will be measured to determine eligibility for coverage for the subsequent plan year (Jan. 1 through Dec. 31).

The stability period is the 12-month period following a measurement period during which eligible employees who enroll in coverage must be covered.

- After the new hire measurement period, coverage can begin as soon as the second month. For example, an employee is hired January 22, 2014. The new hire measurement period is from Feb. 1, 2014 through Jan. 1, 2015. If the employee is determined to be eligible, coverage can begin March 1, 2015 and continue through Feb. 1, 2016, provided she stays employed with the state.
- Following the OE measurement period, the stability period is Jan. 1 through Dec. 31.

8. **Once enrolled in insurance, how long will I get to keep my coverage?**

- Coverage continues for 12 months (your stability period), as long as you continue working for the state, even if your hours drop below an average of 30.
- Eligibility to continue coverage for the subsequent plan year will be determined annually by measuring your hours worked during the open enrollment measurement period.
- If you terminate employment, you are covered through the last day of the month following termination, provided premiums are paid in full. You can continue health, dental and vision coverage through COBRA for up to 18 months if you were enrolled in those plans at the time of termination.

9. **What happens if I have coverage but I'm determined to be ineligible during the next open enrollment measurement period?**

Coverage will end at the end of your 12-month stability period; however, you can continue health, dental and vision coverage through COBRA for up to 18 months if you were enrolled in those plans at the time of your ineligibility. Eligibility for the subsequent plan year will be measured during the next open enrollment measurement period.