

Q. If we hire an OPS employee full time on a contract and grant basis and at some point before the end of the measurement period their hours have been cut back to less than the 30 hour full time status, do we have a way to just end their insurance?

A. The short answer is no. However, this is an excellent example of the change in measurement periods.

Example:

- Sam is hired in March 2015 expected to work 30+ hours per week. He enrolls in health insurance effective April 1, 2015. He now has coverage for the remainder of 2015 (April through December) and all of 2016.
- Even if Sam's standard hours are reduced, he remains eligible for health insurance. The only ways for him to cancel his insurance are:
 - During the Open Enrollment period for the 2016 year, Sam chooses to end his health insurance effective 1/1/16
 - Sam experiences a Qualifying Status Change (QSC Matrix can be found [here](#))
 - Termination
- If Sam leaves your department on 8/1/15 and goes to work for another department (regardless of his standard hours) he remains eligible for the duration of his stability period, so the other department is now responsible for the full employer premium until 12/31/16, or while he remains employed with them.
- The only exception to this would be if Sam experiences a "break in service." You hire Sam in March 2015 expected to work 30+ hours per week (health insurance eligible). He terminates 8/8/15. You hire him again 2/19/16, expected to work only 20 hours per week. He is now considered a new hire, and his eligibility will be measured based on the standard hours entered when he was hired on 2/9/15. A break in service for OPS employees is defined as termination of employment that exceeds 26 consecutive weeks, or a period of termination exceeding than the period of initial employment.

Q. Are Federal Work Study students who are on our payroll at .50 FTE and are then hired as an OPS employee by another department at .50 FTE eligible for Health Insurance?

A. Technically, no, they should not be. This is because Federal Work Study students are not eligible for insurance. However, there is a chance that this can occur, due to the programming involved in generating the eligibility standards. In the past, we were able to have this corrected, and the eligibility removed. Going forward, due to the “Recession of Coverage” prohibition mentioned in the conference call, we are unable to “unoffer” coverage once eligibility has been granted. The best mode of action for these situations would be (if possible) to notify the HR Benefits department before the second hire occurs. At that point, we should be able to prevent the coverage from being offered. We are currently working on the programming to prevent these types of errors in the future.

Q. Are OPS Employees eligible for Leaves of Absence?

A. It is university practice for an OPS employee to request a leave of absence if out more than ten days. Please reference the [Leave of Absence section of the HR website](#) for additional information.

Q. What if an employee is not getting paid?

A. Regardless of the employee class, if an employee remains active with your department and is enrolled in health insurance, your department is responsible for the employer portion.

Q. If an employee is on an official University Leave of Absence, what should we expect?

A. For an employee on a paid leave of absence (Leave With Pay), their premium deductions will be deducted from their paycheck for the duration of their leave. For an employee on an unpaid status (Leave Without Pay), the premiums will be charged to your department’s expense account during an off cycle payroll to pay for the employer portion of their health coverage. This will continue for the remainder of the time the employee is enrolled in health insurance.

Q. What is the difference between OPS and Line employees with measuring eligibility?

A. Line employees are measured based on their FTE. If a Line employee has an FTE of .75 or higher, they are considered full time and are eligible for the full employer premium for their health insurance. Note: All Line employees are eligible for health insurance, regardless of their FTE. However, only Line employees with an FTE of .75 or greater are eligible for the full employer contribution towards their health insurance premium. For Line employees with an FTE of less than .75, the employer portion of their health insurance premium is prorated based on their FTE.

OPS employees are measured based on their work hours. If an OPS employee works an average of 30 hours per week (1560 hours) during their Open Enrollment Measurement Period (October 3, 20xx through October 2, 20xx), they are eligible for health insurance and the full employer premium for the next year. All OPS employees are measured every year.

Please reference the [OPS Eligibility and Measurement Periods Guide](#) for additional information.

Q. How does the eligibility affect our responsibility during an unpaid leave of absence?

A. There are two things to consider when answering this question – what type of employee, and how long is the leave of absence?

Example:

Sam has been employed since 2011 expected to work 30+ hours per week, and most recently was measured full time for plan year 2015 and is enrolled in family health coverage. Sam has been approved for an unpaid education leave of absence beginning 6/19/15 through 6/19/16.

- As a line employee with a 1.00 FTE, Sam is eligible for the plan year 2015, and eligible for the plan year 2016. The employer premium would be charged to your expense account during an off cycle payroll to pay for the employee's coverage for the duration of his leave, unless he chooses to end his insurance or terminates employment.

- As an OPS employee, Michael is eligible for the plan year 2015. The employer premium would be charged to your expense account during an off cycle payroll to pay for the employee's coverage for the duration of his eligibility. In October 2015 (Open Enrollment Measurement Period for the next year), his eligibility for plan year 2016 will be reviewed. During the measurement period 10/3/2014-10/2/2015, Michael worked 40 hours per week until 6/19/2015, when he dropped to zero. This only equals 1,480 hours. Michael is not eligible for health insurance for the 2016 plan year. The department would only be charged for the remainder of 2015.