

Applicable Large Employer (ALE) Shared Responsibility Penalty (IRC §4980H, Forms 1094-C & 1095-C)

		<u>2014 (N/A)*</u>	<u>2015</u>	<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>
4980H(a) penalty	Annual amount	\$2,000	\$2,080	\$2,160	\$2,260	\$2,320	\$2,500	\$2,570	\$2,700
	Monthly amount	\$166.67	\$173.33	\$180.00	\$188.33	\$193.33	\$208.33	\$214.17	\$225.00
	Required MEC offer % of full-time	n/a	70%	95%	95%	95%	95%	95%	95%
	Full-time exemption	n/a	80**	30	30	30	30	30	30
4980H(b) penalty	Annual amount	\$3,000	\$3,120	\$3,240	\$3,390	\$3,480	\$3,750	\$3,860	\$4,060
	Monthly amount	\$250.00	\$260.00	\$270.00	\$282.50	\$290.00	\$312.50	\$321.67	\$338.33
	Affordability Safe Harbor %	9.50%	9.56%	9.66%	9.69%	9.56%	9.86%	9.78%	9.83%
	Applicable 100% FPL (prior year)	\$11,490	\$11,670	\$11,770	\$11,880	\$12,060	\$12,140	\$12,490	\$12,760
	FPL affordability annual amount	\$1,091.55	\$1,115.65	\$1,136.98	\$1,151.17	\$1,152.94	\$1,197.00	\$1,221.52	\$1,254.31
	FPL affordability monthly amount	\$90.96	\$92.97	\$94.75	\$95.93	\$96.08	\$99.75	\$101.79	\$104.53

* No employer shared responsibility penalties were assessed for 2014

** 80 FT exemption for 2015 only applied if 2015 ALE "size" was 100 or more

Individual Shared Responsibility Penalty (IRC §5000A, Form 8965)

	<u>Dollar Amount Penalty</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>
Annual Dollar Amount Penalty per Adult		\$95	\$325	\$695	\$695	\$695	Repealed	Repealed	Repealed
Maximum Dollar Amount Penalty per Household (3 x adult rate)		\$285	\$975	\$2,085	\$2,085	\$2,085	Repealed	Repealed	Repealed
% of Excess Modified Adjusted Gross Income Penalty		1.00%	2.00%	2.50%	2.50%	2.50%	Repealed	Repealed	Repealed

Premium Tax Credits (IRC §36B, Form 8962)

	<u>2014</u>	<u>2015</u>	<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>	
Household % of Income Contribution Range Start	2.00%	2.01%	2.03%	2.04%	2.01%	2.08%	2.06%	2.07%	
Household % of Income Contribution Range End	9.50%	9.56%	9.66%	9.69%	9.56%	9.86%	9.78%	9.83%	
100% Federal Poverty Line 1 Person Household (start PTC)	\$11,490	\$11,670	\$11,770	\$11,880	\$12,060	\$12,140	\$12,490	\$12,760	
400% Federal Poverty Line 1 Person Household (end PTC)	\$45,960	\$46,680	\$47,080	\$47,520	\$48,240	\$48,560	\$49,960	\$51,040	
100% Federal Poverty Line 4 Person Household (start PTC)	\$23,550	\$23,850	\$24,250	\$24,300	\$24,600	\$25,100	\$25,750	\$26,200	
400% Federal Poverty Line 4 Person Household (end PTC)	\$94,200	\$95,400	\$97,000	\$97,200	\$98,400	\$100,400	\$103,000	\$104,800	
PTC test of affordability of employer offer of self-only coverage	9.50%	9.56%	9.66%	9.69%	9.56%	9.86%	9.78%	9.83%	
Marketplace Open Enrollment (most States)	Begin	10/01/13	11/01/14	11/01/15	11/01/16	11/01/17	11/01/18	11/01/19	11/01/20
	End	03/31/14	02/15/15	01/31/16	01/31/17	12/15/17	12/15/18	12/15/19	12/15/20

Group Health Insurance Reforms (IRC §9815 & §4980D, Form 8928)

	<u>2015</u>	<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>
Maximum Out of Pocket Limit Self-Only Coverage	\$6,350	\$6,600	\$6,850	\$7,150	\$7,350	\$7,900	\$8,150
Maximum Out of Pocket Limit Family Coverage	\$12,700	\$13,200	\$13,700	\$14,300	\$14,700	\$15,800	\$16,300
Maximum Flexible Spending Account (FSA) Employee Contribution	\$2,500	\$2,550	\$2,550	\$2,600	\$2,650	\$2,700	\$2,750

Qualified Small Employer Health Reimbursement Account (QSEHRA) Contribution Limits (IRC §9831(d))

	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>
Employee Only	\$4,950	\$5,050	\$5,150	\$5,250	\$5,300
Employee + Family	\$10,000	\$10,250	\$10,450	\$10,600	\$10,700

Health Savings Accounts (IRC §223, Form 8889)

	<u>2014</u>	<u>2015</u>	<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>
Maximum Contribution/Deduction	Single	\$3,300	\$3,350	\$3,350	\$3,400	\$3,450	\$3,550	\$3,600
	Family	\$6,550	\$6,650	\$6,750	\$6,750	\$6,900	\$7,000	\$7,200
	Age 55+ Extra \$	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000
HDHP Maximum Out of Pocket	Self-only	\$6,350	\$6,450	\$6,550	\$6,550	\$6,650	\$6,900	\$7,000
	Family	\$12,700	\$12,900	\$13,100	\$13,100	\$13,300	\$13,500	\$13,800
HDHP Minimum Deductible	Self-only	\$1,250	\$1,300	\$1,300	\$1,300	\$1,350	\$1,350	\$1,400
	Family	\$2,500	\$2,600	\$2,600	\$2,600	\$2,700	\$2,700	\$2,800