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## Temporary Delay on ACA Compliance for Expatriate Insured Health Plans

On March 8<sup>th</sup>, 2013, the Departments of Labor, Health and Human Services, and Treasury issued a [Frequently Asked Questions \(FAQs\)](#) indicating a temporary delay for fully insured expatriate health plans to comply with most Affordable Care Act (ACA) provisions.

The FAQ guidance for fully-insured expatriate health plans, communicates the following key pieces of information:

- The definition of an expatriate plan as, “an insured group health plan with respect to which enrollment is limited to primary insureds who reside outside their home country for at least six months of the plan year and any covered dependents, and its associated group health insurance coverage.”

In the event that an expatriate employee wishes to come off an International Plan while on furlough, the site is: <https://www.healthcare.gov/>

To view by state, the site is: <https://www.healthcare.gov/what-is-the-marketplace-in-my-state/>

Expatriate plans will not be subject to the individual mandate and penalties until 1.1.16 (due to the delay – see attached US DOL FAQ.)

International employees may be stateside up to six months and remain on an International plan as long as they will be returning to the field. To be eligible for an expatriate International plan, they must reside outside of the USA for at least six months of a given year.

If they will be stateside more than 6 months, they could either take the penalty or elect a plan of their choosing in the marketplace.