1. Why do I have to count people who are not on my regular monthly payroll?
   Please refer to the How to Count Employees Guide that was included in the packet of information you received. If you cannot find that information, we can send you a new How to Count Employees Guide or you can get additional information by visiting the CMS website at cms.gov/Medicare/Medicare.html.

2. When I count employees for each month, what date do I use?
   Use the total number of employees at the end of each month.

3. Do I have to provide my group size to my health insurer every time it changes?
   We will request your group size annually. You do not have to provide us with your group size every time it changes. However, if the group size changes to above or below 20 employees or goes above or below 100 employees for a time frame of more than 20 weeks in a calendar year, we ask that you notify us of that change.

4. Where do I go to get more information regarding the Centers for Medicare and Medicaid Services (CMS) regulations or Patient Protection and Affordable Care Act (PPACA)?
   You can get more information by visiting the CMS website at cms.gov/Medicare/Medicare.html. For more information on PPACA, please visit the Department of Health & Human Services website at hhs.gov.

5. What information in the packet do I need to send back to my health insurer?
   Every group received a group size letter. The letter must be filled out and returned to us. Completed letters can be mailed, faxed, or completed online.
   - Mail: WPS, Attn: Customer Service, P.O. Box 8190, Madison, WI 53708
   - Fax: 608-223-3639
   - Online: wpshealth.com/resources/employer-resources/group-size-questionnaire.shtml

6. Do I have to send the information back to you or can I give you the information over the phone?
   We must have a form with an authorized group representative signature to submit to CMS in certain situations. Therefore, we are unable to take information over the phone. This information must be sent to us either by mail, fax, or through the online form.
   - Mail: WPS, Attn: Customer Service, P.O. Box 8190, Madison, WI 53708
   - Fax: 608-223-3639
   - Online: wpshealth.com/resources/employer-resources/group-size-questionnaire.shtml

7. I received a group size letter recently—for example, in October 2018—and have sent it back to you already. Do I still need to complete the letter that was just sent to me in January 2019?
   Yes. The process has been updated to meet the needs of PPACA for reporting information to the appropriate governmental agencies.
8. The mailing indicates the required information must be submitted within 10 business days. When do the 10 business days begin?

The 10 business days begin the day the group leader receives the mailing from us.

9. What should I do if I did not send the required information within 10 business days?

Please still send us the information as soon as possible.

10. I recently received this form or a similar request in the past. Why does it request 12 months of data instead of only one set of data for employee counts?

The PPACA provisions require detailed information regarding total number of employees as defined under the federal government guidelines. In order for us to accurately calculate for Medical Loss Ratio (MLR) under the PPACA, employer group size is needed for each month from the previous calendar year.

11. I cannot find my letter. How can I receive a copy of what was mailed to me?

A copy of this letter is available for download from the Employer section on our website. You can also complete the questionnaire online.

12. Our group canceled coverage in 2018. Do I still need to provide the information to you?

Per CMS guidelines, we are required to provide information for any group that was effective with us during 2018. If you terminated your group’s coverage after Jan. 1, 2018, you still need to provide us with the information. This information is also used in the event your group may be eligible for any rebates for MLR as defined under the PPACA.

13. Is there a difference between the Employer Identification Number (EIN) and Tax Identification Number (TIN)?

No, both numbers are the same.

14. I have a retiree or a spouse of a retiree under an association who is able to continue on the group health plan, but there is no EIN/TIN. Do I need to include that person in the group size?

A retiree or spouse of a retiree who is still active under the group health plan does not qualify as a reportable “Active Covered Individual.” Therefore, you do not need to report that person as part of the group size.

15. What is a LGHP (Large Group Health Plan)?

Under Medicare Secondary Payer determination rules:

- A single employer or employee organization that employed at least 100 full- or part-time employees on 50% or more of its regular business days during the previous calendar year; or

- Two or more employers or employee organizations, at least one of which employed at least 100 full- or part-time employees on 50% or more of its regular business days during the previous calendar year.

Remember:

Answers to any questions on group size can be found in the How to Count Employee Guide or by visiting the CMS website at cms.gov/Medicare/Medicare.html.