Named after America’s luxury automobile, the “Cadillac Tax” refers to an annual excise tax on high-cost employer-sponsored health insurance. Although the tax is still several years away and regulations may evolve before it may be implemented, employers and benefits professionals have questions about whether it could affect them. Let’s take a look at the details:

**THE TAX IS DELAYED UNTIL 2022**
The effective date of the tax continues to be delayed. It is currently scheduled for 2022.

**WHO WILL PAY THE TAX?**
Employers calculate the taxes owed, and then the tax itself will be paid by the “coverage provider” or “person who administers the plan benefits.”
- For a typical health insurance plan, the insurer will pay the tax.
- For self-funded health care, whoever implements the plan’s benefits will pay the tax.
- For HSAs and Archer MSAs, the employers will pay the tax.

**WHAT IS ITS PURPOSE?**
- To reduce health care spending overall by discouraging expensive employer-sponsored plans.
- To help pay for other provisions of the Affordable Care Act (e.g., the Medicaid expansion and insurance subsidies for low-income individuals).

**HOW WILL THE TAX BE CALCULATED?**
The tax will be equivalent to 40 percent of the cost of health coverage beyond a certain threshold, depending on the type of plan. The threshold also adjusts to account for age, gender, retirement status and high-risk professions. These thresholds will increase in future years because they are indexed for inflation.

**NOTE:** Examples shown above were based on proposed 2018 threshold amounts. These amounts are expected to be indexed for inflation.
WHAT WILL BE INCLUDED IN THE TAX?

The tax will apply to pretax group employer-sponsored coverage, including employer- and employee-paid portions.

- Health coverage, including medical, behavioral, and prescription drug.
- Health flexible spending accounts (FSAs).
- Health savings accounts (HSAs).
- Archer Medical Savings Accounts (MSAs).
- Governmental plans, with the exception of military coverage.
- On-site medical clinics, with exception of clinics that provide minimal medical care.
- Retiree coverage.
- Multi-employer plans.
- Specified disease or illness and hospital indemnity or other fixed indemnity insurance only when any portion of the premium is paid pretax or by the employer.

WHAT WILL NOT BE INCLUDED IN THE TAX?

The tax will not apply to the following insurance policies:

- Accident insurance.
- Disability insurance.
- Life insurance.
- Supplemental liability insurance.
- Liability insurance, including general and automobile liability insurance.
- Workers’ compensation or similar insurance.
- Automobile medical payment insurance.
- Credit-only insurance.
- Stand-alone Vision insurance.
- Stand-alone Dental insurance.
- Cancer/Specified-Disease and Hospital Fixed Indemnity insurance are excluded if not sponsored by the employer and paid for on an after-tax basis.

IS SUPPLEMENTAL INSURANCE INCLUDED?

Supplemental insurance policies are defined as excepted benefits and will not be included in the Cadillac Tax calculation, with the exception of two types of coverage — cancer/specimen—disease and hospital indemnity — but only if they are paid for using pretax dollars. In other words, as long as an employer offers these two products after tax, they will also be excluded from the tax calculation.

WHAT SHOULD OR SHOULDN’T EMPLOYERS DO NOW?

Employers do not need to make changes to their policies in anticipation of the tax just yet. It’s important to wait for further guidance since the tax and regulations may continue to change as 2022 draws near — including the tax threshold amounts and other implementation details.

LEARN MORE

Aflac will continue to monitor healthcare reform legislation and provide helpful resources for businesses at aflac.com/health-care-reform.