

COMMON QUESTIONS

The PCBP, answered.

A quick read on how the Preventive Care Benefits Program generates FICA savings, what compliance it sits inside, and what implementation looks like.

Q1 How does the program generate FICA tax savings for the employer?

The program applies a fixed pre-tax deduction to each participating employee's paycheck. This lowers their taxable wages, which reduces the FICA tax liability for the employer. **The FICA rate of 7.65% remains the same**, but is now at a lesser amount due to the reduction in gross taxable income of the employees.

Q2 Where did this program come from?

The program derives from the **Affordable Care Act** (initially put in place January 1st, 2014), which combined aspects of the Section 125 pre-tax employee plan (put in place under ERISA Act of 1974), improved efficiency in the healthcare industry (put in place under the HIPAA Act of 1996), and the hyper-focus of the U.S. government to provide employees proper benefits at a subsidized cost.

Q3 Is the Preventive Care Program compliant with IRS and ACA regulations?

Yes, the program is **fully compliant with IRS Sections §125, §104(a)(3), §105(b), §106(a), and §213(d)**, as well as ERISA and ACA regulations such as **42 U.S. Code §300gg-4(i)(3)(c)**. All documentation and administration are handled by licensed third-party providers to ensure compliance.

Q4 How does this affect employees' current healthcare plans?

It doesn't replace any existing health plans. Employees can keep their current coverage. The **ReviveHealth Program** simply adds additional wellness benefits and includes a **Minimum Essential Coverage (MEC)** plan to help meet ACA requirements. If the employee does not have any major medical coverage, this can act as a stand-alone offering.

Q5 What are the requirements for employees to be eligible for this program?

Employees must earn **at least \$26,000 per year** and average **30 hours or more per week**, as outlined by Department of Labor standards. Employees do not need to have pre-existing major medical coverage, as a Minimum Essential Coverage (MEC) plan is automatically included. **However, employees currently enrolled in Medicaid are not eligible** for this program.

Q6 Does this cost anything out of pocket for employees or employers?

There is **no out-of-pocket cost for either the employer or employee**. The program is funded through a pre-tax structure that reallocates part of the employee's tax savings to subsidize benefits. There are no admin fees charged on the employer savings.

Q7 What does the process look like to get this program implemented?

It's a quick and simple 3-step process:

1. **Discovery & Eligibility Review** — We assess your eligibility and potential savings.
2. **Implementation & Payroll Setup** — We handle the technical payroll setup process.
3. **Employee Onboarding** — Employees are enrolled through a guided, digital onboarding process.

Most companies are up and running within 2-3 weeks.
