

PART A: General Information

When key parts of the health care law take effect in 2014, there will be an additional way to buy health insurance, through the Health Insurance Marketplace (part of your State Exchange). To assist you as you evaluate options for you and your family, this notice provides some basic information about the new Marketplace and employment-based health coverage offered by your employer.

What is the Health Insurance Marketplace?

The Marketplace is designed to help you find health insurance that meets your needs and fits your budget. The Marketplace offers “one-stop shopping” to find and compare private health insurance options. This is an additional way to purchase coverage – you would still be able to go direct to insurance carriers to purchase individual coverage as well. But, if you purchase your individual coverage through the Marketplace, you may also be eligible for a new kind of tax credit that lowers your monthly premium right away. Open enrollment for health insurance coverage through the Marketplace begins October 2013 for coverage starting as early as January 1, 2014.

Can I Save Money on My Health Insurance Premiums in the Marketplace?

You may qualify to save money and lower your monthly individual coverage premium, but only if your employer does not offer coverage to you, or offers coverage that is either not “affordable¹” or does not meet “minimum value²”.

Does Employer Health Coverage Affect Eligibility for Premium Savings through the Marketplace?

Yes. If you have an offer of health coverage from your employer that meets certain standards, you will not be eligible for a tax credit through the Marketplace and may wish to enroll in your employer’s health plan. In addition, any household members claimed on your annual tax return would not be able to receive these tax credits.

However, you may be eligible for a tax credit that lowers your monthly premiums, or a reduction in certain cost-sharing, if your employer does not offer coverage to you at all or does not offer coverage that is either “affordable¹” or meets “minimum value²”.

NOTE: If you purchase a health plan through the Marketplace instead of accepting health coverage offered by your employer, then you may lose the employer contribution (if any) to the employer-offered coverage. Also, this employer contribution – as well as your employee contribution to employer-offered coverage – is often excluded from income for Federal and State income tax purposes (in other words, on a pre-tax basis). Your payments for coverage through the Marketplace are made on an after-tax basis.

How Can I Get More Information?

For more information about your coverage offered by your employer, please review the information on the next page, or contact your company’s representative, also noted on the next page.

The Marketplace can help you evaluate your coverage options, including your eligibility for coverage through the Marketplace and its cost. Please visit Healthcare.gov for more information, including an online application for health insurance coverage and contact information for a Health Insurance Marketplace in your area.

¹ An employer-sponsored medical plan is “affordable” if the annual cost of the plan for you (and not any other members of your family) is no more than 9.5% of your household income for the year.

² An employer-sponsored medical plan meets the “minimum value” standard if the plan’s share of the total allowed benefit costs covered by the plan is no less than 60% of such costs.

PART B: Information about Health Coverage Offered by Your Employer

This section contains information about any health coverage offered by your employer. If you decide to complete an application for coverage in the Marketplace, you will be asked to provide this information. ***This information is numbered to correspond to the Marketplace application.***

3. Employer Name	4. Employer Identification Number (EIN)	
5. Employer Address	6. Employer Phone Number	
7. City	8. State	9. Zip code
10. Who can we contact about employee health coverage at this job?		
11. Phone number of contact (if different from above)	12. Email address of contact	

Here is some basic information about health coverage offered by this employer:

- As your employer, we:
 - Do not offer a health plan to any employees
 - Offer a health plan to some employees. The following classifications of employees are not eligible for our group-sponsored health coverage:
 - Seasonal employees
 - Temporary workers
 - 1099 contractors
 - Other excluded employees: _____
 - Employees working less than ____ hours per week on average
 - Employees who have not met our health plan's waiting period. Coverage begins on 1st of the month following
 - Date of hire
 - ____ months
 - ____ days
- With respect to dependents, we:
 - Do not offer a health plan to any dependents
 - Offer a health plan to dependents, including spouses, and children under age 26 (see our plan summary for more information)

The following is information about our health plan's minimum value (if a health plan is offered):

- We offer at least one health plan that meets the minimum value standard as set forth by the Affordable Care Act
- We do not offer at least one health plan that meets the minimum value standard as set forth by the Affordable Care Act

The following is information about our health plan's cost to you as an employee (if a health plan is offered):

Our lowest cost plan that meets the minimum value standard costs an employee \$_____ per month for employee-only coverage.

If you decide to shop for coverage in the Marketplace, [Healthcare.gov](https://www.healthcare.gov) will guide you through the process. The above is the employer information you'll enter when you visit [Healthcare.gov](https://www.healthcare.gov) to find out if you can get a tax credit to lower your monthly premiums.