

New Health Insurance Marketplace Coverage Options and Your Health Coverage

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PART A: General Information

When key parts of the health care law take effect in 2014, there will be a new way to buy health insurance: the Health Insurance Marketplace. 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. 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 in 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 premium, but only if your employer does not offer coverage, or offers coverage that doesn't meet certain standards. The savings on your premium that you're eligible for depends on your household income.

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. However, you may be eligible for a tax credit that lowers your monthly premium, or a reduction in certain cost-sharing if your employer does not offer coverage to you at all or does not offer coverage that meets certain standards. If the cost of a plan from your employer that would cover you (and not any other members of your family) is more than 9.5% of your household income for the year, or if the coverage your employer provides does not meet the "minimum value" standard set by the Affordable Care Act, you may be eligible for a tax credit.¹

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. 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 check your summary plan description or contact Human Resources (269) 387-3620.

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 health 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 percent 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: WESTERN MICHIGAN UNIVERSITY		4. Employer Identification Number (EIN) 38-6007327		
5. Employer address: 1903 W. Michigan Ave		6. Employer phone number (269) 387-3620		
7. City: Kalamazoo		8. State MICHIGAN		9. ZIP code 49008-5217
10. Who can we contact about employee health coverage at this job? Human Resources Service Center				
11. Phone number (if different from above)	12. Email address Hr-hris@wmich.edu			

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

- •As your employer, we offer a health plan to:
 - ☐ All employees. Eligible employees are:
 - Some employees. <u>Eligible Employees Are:</u>
 - Faculty (AAUP) eligible for benefits per the terms of their collective bargaining agreement
 - Dining Services, Facility Management and Other (AFSCME) staff eligible for benefits per the terms of their collective bargaining agreement
 - Police Officers (POA) eligible for benefits per the terms of their collective bargaining agreement
 - Power Plan (MSEA) staff eligible for benefits per the terms of their collective bargaining agreement
 - Staff Compensation System: Non-Bargaining Exempt staff with employment appointments of at least 0.50 FTE
 - Staff Compensation System: Non-Bargaining Nonexempt staff with employment appointments of at least.0.50 FTE
 - Temporary Employees who qualify as full-time under the Affordable Care Act (regularly scheduled for 30 hours or more per week or a variable work schedule that averages 30 hours or more per week during the most recent 12-month look-back period (generally mid-October of the current year to mid-October of the previous year)
- •With respect to dependents:
 - We do offer coverage <u>: Eligible Dependents Are:</u>
 - Eligible employee's legal spouse
 - Eligible employee's birth child or legally adopted child under the age of 26
 - A child under the age of 26 placed with an eligible employee for adoption
 - Child of eligible employee's legal spouse by birth; by legal adoption; by legal foster care; or by legal guardianship for whom the employee is legally obligated by court order to provide health insurance and is under age 26
 - A child under age 18 for whom the eligible employee is recognized as the legal guardian and legally obligated by court order to provide health insurance
 - Eligible employee's child who is age 26 or older and is totally and permanently disabled
 - A child of an eligible employee named as an alternate recipient under a medical child support order
 - Adult designated by eligible employee who resides in the same residence with the employee and has done so for at least the previous 18 consecutive months and the employee does not have a spouse enrolled (does not include IRS dependents of employee, relatives or tenants)
 - Dependent child of individual designated by eligible employee who is under the age 26
 - \square We do not offer coverage.
 - If checked, this coverage meets the minimum value standard, and the cost of this coverage to you is intended to be affordable, based on employee wages.
 - ** Even if your employer intends your coverage to be affordable, you may still be eligible for a premium discount through the Marketplace. The Marketplace will use your household income, along with other factors, to determine whether you may be eligible for a premium discount. If, for example, your wages vary from week to week (perhaps you are an hourly employee or you work on a commission basis), if you are newly employed mid-year, or if you have other income losses, you may still qualify for a premium discount.

If you shop for coverage in the Marketplace, HealthCare.gov will guide you through the process. Here's the employer information you'll enter when you visit HealthCare.gov to find out if you can get a tax credit to lower your premiums. *Benefit costs covered by the plan is no less than 60% of such costs (Section 36B(c)(2)(C)(ii) of the Internal Revenue Code of 1986)

The information below corresponds to the Marketplace Employer Coverage Tool. Completing this section is optional for employers, but will help ensure employees understand their coverage choices.

13.	Is the employee currently eligible for coverage offered by this employer, or will the employee be eligible in the next 3 months? Yes (Continue) 13a. If the employee is not eligible today, including as a result of a waiting or probationary period, when is the employee eligible for coverage?(mm/dd/yyyy) (Continue) No (STOP and return this form to employee)			
	Does the employer offer a health plan that meets the minimum value standard*? Yes (Go to question 15) No (STOP and return form to employee) For the lowest-cost plan that meets the minimum value standard* offered only to the employee (don't include family plans): If the employer has wellness programs, provide the premium that the employee would pay if he/ she received the maximum			
discount for any tobacco cessation programs, and didn't receive any other discounts based on wellness programs. a. How much would the employee have to pay in premiums for this plan? \$ 60.98				
	b. How often? Weekly Every 2 weeks Twice a month Monthly Quarterly Yearly			