



## NEW HEALTH INSURANCE MARKETPLACE COVERAGE OPTIONS AND YOUR HEALTH COVERAGE

### 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 LEARN.

### 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 LEARN 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 LEARN that meets certain standards, you will not be eligible for a tax credit through the Marketplace and may wish to enroll in LEARN'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 LEARN 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 LEARN provides does not meet the “minimum value” standard set by the Affordable Care Act, you may be eligible for a tax credit.<sup>1</sup>

Note: If you purchase a health plan through the Marketplace instead of accepting health coverage offered by LEARN, that you may lose the LEARN employer contribution (if any) to the employer-offered coverage. Also, this LEARN 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 though the Marketplace are made on an after-tax basis.

### How can I get More Information?

For more information about your coverage offered through LEARN, please check the summary plan description on the LEARN webpage under LEARN employee information at [www.learn.k12.ct.us](http://www.learn.k12.ct.us) or contact Human Resources at 860-434-4800 ext. 135.

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<sup>1</sup> An employer-sponsored health plan meets the “minimum value standard” if the plan's share of the total allowed benefit cost covered by the plan is no less than 60 percent of such costs.

## PART B: INFORMATION ABOUT HEALTH COVERAGE OFFERED BY LEARN

This section contains information about health coverage offered by LEARN. 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: <b>LEARN</b>		4. Employer Identification Number (EIN) <b>06-0883604</b>	
5. Employer Address <b>44 Hatchetts Hill Road</b>		6. Employer Phone Number <b>860-434-4800</b>	
7. City <b>Old Lyme</b>	8. State <b>Connecticut</b>		9. Zip Code <b>06371</b>
10. Who can we contact about employee health coverage at this job? <b>Michael Marchewka, Personnel Coordinator</b>			
11. Phone number <b>860-434-4800 extension 135</b>		12. Email address <b>mmarchew@learn.k12.ct.us</b>	

Here is some basic information about health coverage offered by LEARN:

- As your employer, we offer health coverage to some employees.  
**Eligible employees are those that the meet the minimum number of work hours in an assigned position to qualify for employee benefits. Please review the Summary of Benefits for your particular position or contact the Human Resources office at 860-434-4800 ext. 135.**
  
- With respect to dependents:  
**We do offer coverage. Your dependent(s) must meet all of the eligibility requirements prior to their effective date of coverage. Eligible dependents include: Spouse (lawful spouse of the covered person under a legally valid, existing marriage); unmarried dependent child under age 26 including step-child of either employee or spouse, a child legally placed for adoption, a legally adopted child, a child for whom the covered person has been appointed a legal guardian, the dependent child under age 26 of the covered person or spouse for whom the covered person has been designated as the responsible party under a Qualified Medical Child Support Order (QMCSO).**

**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 LEARN 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), if you are newly employed mid-year, or if you have other income losses, you may still qualify for a premium discount.**

If you decide to shop for coverage in the Marketplace, **HealthCare.gov** will guide you through the process. This is the employer information you'll enter when you visit **HealthCare.gov** to find out if you can get a tax credit to lower your monthly premiums.



Name of Employee: \_\_\_\_\_

This information corresponds to the Marketplace Employer Coverage Tool.

13. Is the employee currently eligible for coverage offered by the employer or will the employee be eligible in the next three 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 the employee)**

14. Does the employer offer a health plan that meets the minimum value standard? **Yes**

15. For the lowest-cost plan that meets the minimum value standard offered **only to the employee** (do not 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. **Not applicable**

If the plan year will end soon and you know that the health plans offered will change, go to question 16. If you don't know, STOP and return form to employee.

16 What change will the employer make for the new plan year?

\_\_\_\_\_ Employer won't offer health coverage

\_\_\_\_\_ Employer will start offering health coverage to employees or change the premium for the lowest-cost plan available only to the employee that meets the minimum value standard. (Premium should reflect the discount for wellness programs)

a. How much will the employee have to pay in premiums for that plan? \$ \_\_\_\_\_

b. How often? \_\_\_ Weekly \_\_\_ Every 2 weeks \_\_\_ Twice a month \_\_\_ Monthly \_\_\_ Quarterly \_\_\_ Yearly

Date of change \_\_\_\_\_ (mm/dd/yyyy)