EMPLOYEE BENEFITS

County of R verside Human Resources

Great Benefits For A Great Place To Work



Important Information about the Notice on Health Insurance Marketplace Coverage Options and Your County of Riverside Group Health Plan

To: County Employee

To comply with rules under the Federal Patient Protection and Affordable Care Act (ACA), the County of Riverside is required to send the enclosed notice to all employees.

This notice provides you with instructions on how to access information about the Health Insurance Marketplace (also known as the Health Exchange or Covered California).

Our records indicate that you are currently eligible to participate in the County of Riverside group health plan. You don't need to do anything with this notice unless you're interested in obtaining health coverage through the Marketplace.

What if I'm interested in Marketplace coverage?

California has announced that it will offer a health benefit marketplace, called Covered California. For information, go to www.CoveredCA.com or call (888) 975-1142.

How does my County of Riverside coverage compare with the Marketplace?

The County of Riverside group health plan tends to provide more coverage at a lower cost to you than a Marketplace health plan.

If you choose to buy health insurance in the Marketplace and decline health coverage through the County of Riverside, you will not receive a Flexible Benefit Contribution from the County of Riverside. The County of Riverside group health plan already meets or exceeds the government's standards for providing affordable minimum coverage.

What if I obtain coverage through the Marketplace and later decide to cancel coverage and elect a County of Riverside health plan?

At this time, coverage purchased through the Marketplace or Covered California does not meet the requirements of a "group plan." As a result, loss of coverage or canceling coverage through the Marketplace is not an eligible mid-year qualifying event to enroll or cancel a County of Riverside health plan.

However, you can re-enroll in a County of Riverside health plan during the Annual Enrollment period.

What if I have questions?

For Marketplace coverage, please call (800) 318-2596 (TTY: (855) 889-4325) or visit HealthCare.gov. Questions pertaining to County of Riverside benefits can be answered by calling the Benefits Help Line at (951) 955-4981 or http://benefits.rc-hr-com

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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:

County of Riverside

Human Resources Department – Employee Benefits Division P.O. BOX 1569
Riverside, CA 92502-1569
(951) 955-4981

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.

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

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 Ident	4. Employer Identification Number (EIN)	
County of Riverside		95-6000930	95-6000930	
5. Employer address		6. Employer phon	6. Employer phone number	
P.O. Box 1569		951-955-4981		
7. City		8. State	9. ZIP code	
Riverside		CA	92502-1569	
10. Who can we contact about employee health cove	rage at this job?			
Employee Benefits Help Line				
Phone number (if different from above) 12. Email address		STORES IN LINE OF		
951-955-4981	benefits@rc-hr.con	n		
Here is some basic information about health cover As your employer, we offer a health plan t All employees. Some employees. Eligible employees Regular County employees scheduled to determines which plan options are availated. With respect to dependents:	s are: work at least 20 hours per lable to you.		nit or Employee Group	
We do offer coverage. Eligible depen	dents are:			
As defined by the County's Dependent E	ligibility Rules.			
☐ We do not offer coverage.				
✓ If checked, this coverage meets the minim be affordable, based on employee wages		the cost of this covera	ge to you is intended to	
** Even if your employer intends your condiscount through the Marketplace. The to determine whether you may be eliging week to week (perhaps you are an hour examples).	Marketplace will use you ble for a premium discou	ir household income, a int. If, for example, you	along with other factors, ur wages vary from	

If you decide to 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 monthly premiums.

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

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 e the next 3 months?	mployee be eligible in		
☐ Yes (Continue)			
13a. If the employee is not eligible today, including as a result of a waiting or probationary p	period, when is the		
employee eligible for coverage?(mm/dd/yyyy) (Continue)			
No (STOP and return this form to employee)			
14. 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)			
15. 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? b. How often? Weekly Every 2 weeks Twice a month Monthly Quarterly Yearly			
If the plan year will end soon and you know that the health plans offered will change, go to questic know, STOP and return form to employee.	on 16. If you don't		
Employer will start offering health coverage to employees or change the premium for the low available only to the employee that meets the minimum value standard.* (Premium should revellness programs. See question 15.) 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 Quebate of change (mm/dd/yyyy):			

[•] 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 (Section 36B(c)(2)(C)(ii) of the Internal Revenue Code of 1986)