Affordable Care Act Health Insurance Marketplace Notification Frequently Asked Questions

1. What is the Health Insurance Marketplace?

The Health Insurance Marketplace is a new way for individuals to obtain health insurance as part of the Affordable Care Act. It is a way to make health insurance coverage available for individuals who currently do not have access to coverage. To use the Health Insurance Marketplace, go to the Health Insurance Marketplace website at https://www.healthcare.gov/families/ and fill out an application. After you complete the application, you will see all the health plans available in your area.

2. When can I enroll in Health Insurance Marketplace?

The Health Insurance Marketplace Open Enrollment is October 1, 2013 through March 31, 2014.

3. What happens if I don't enroll in health insurance in 2014?

Beginning January 1, 2014, the Affordable Care Act requires all individuals to have health insurance coverage or pay a penalty; for an individual, the penalty is \$95 annually, or 1 percent of their family income, whichever is greater; for a child, the penalty is \$47.50 annually. The maximum penalty for a family would be either \$285 annually, or 1 percent of income.

4. I am enrolled in health insurance coverage through USG. Do I need to enroll in coverage through the Health Insurance Marketplace?

No. If you are enrolled in healthcare coverage through USG, you do not need to enroll in coverage through the Marketplace.

5. I am not eligible for health insurance through USG right now. Will I be eligible for health insurance through USG in 2014?

At this time, to be eligible for health insurance through USG, you must be employed in a regular position working 30 hours per week or more. An internal USG HR committee is working on changes to the Employee Category policy which would go into effect mid-year 2014. These changes may affect the healthcare benefits eligibility definition. Your campus Human Resources office will communicate directly to employees who are affected by these changes.

6. What should I do if I am not eligible for health insurance coverage through USG?

If you are not eligible for the USG healthcare plan, you can get information about enrolling in health insurance through the Health Insurance Marketplace at the following website: https://www.healthcare.gov/families/. Georgia opted not to operate a Health Insurance Marketplace in 2014 and therefore, individuals in Georgia will utilize the federal marketplace. Or, if you are eligible, you may obtain coverage through your spouse's health insurance or if you are under age 26, through your parent's health insurance.

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7. What do I need to do if I am enrolled in health insurance coverage through the USG healthcare plan?

If you are currently enrolled in health insurance coverage through the USG health plans, you will need to re-enroll in this coverage during the USG Open Enrollment period from **November 11** – **November 22, 2013**.

8. What should I do if I am eligible for health insurance coverage in the USG plan but I am not enrolled?

If you are eligible for healthcare coverage through USG but are not enrolled, you may enroll in coverage during the USG Open Enrollment Period which is November 11 – November 22, 2013. Or, you can shop for coverage through the Health Insurance Marketplace.

9. I am enrolled in health insurance coverage through my spouse's employer. Do I need to enroll in the USG coverage also?

No. The Affordable Care Act only requires that you have health insurance coverage in 2014. The law does not require that you obtain health insurance coverage through your employer. For instance, you may obtain coverage through your spouse's employer or through the Health Insurance Marketplace.

10. If I enroll in health insurance coverage through the Health Insurance Marketplace, will I be able to receive a tax credit or subsidy?

If you are eligible for the USG healthcare plan, generally you will not receive a subsidy if you enroll in the Health Insurance Marketplace instead of the USG plan. This is because USG offers a plan that meets the definition of Affordable under the law.

Affordable, as defined under the Affordable Care Act, is a health insurance premium that is 9.5% or less of household income. The Federal Government set an Affordable Safe Harbor which means if an employer offers a healthcare plan with a premium at or below the Safe Harbor, then it is deemed "Affordable". The Safe Harbor is set at 9.5% of \$11,850, which is 100% of Federal Poverty level, estimated at \$94 per month for individual coverage; the USG HSA OA POS (HDHP) plan's 2014 monthly premium is set at \$47 for employee only coverage which is below the Safe Harbor premium; because our coverage meets the Affordable definition under the law, employees eligible for USG healthcare coverage generally will not be eligible for a subsidy if they enroll in coverage in the Health Insurance Marketplace

11. Where can I get more information about the Affordable Care Act and the new Health Insurance Marketplace?

If you have more questions about the Affordable Care Act or the new Health Insurance Marketplace, below are some links where you can find information:

<u>Federal Health Insurance Marketplace website</u>
<u>U.S. Department of Health and Human Services</u>
BCBSGa website

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12. What are some of the key provisions of the Affordable Care Act that go into effect January 1, 2014?

A few of the key provisions of the Affordable Care Act go into effect in 2014 are:

- Health Insurance Marketplace (or exchange) as a new way to purchase health insurance
- Individual health insurance mandate (this means individuals must enroll in health coverage or be penalized)
- Financial assistance for health coverage in the Marketplace for lower-income individuals
- New plan design standards for health plans (some of the plan design changes in the USG plans were due to ACA)
- Additional fees assessed to employers