To: All Employees of Capital University

From: Human Resources Office

Subject: Health Insurance Marketplace

Under the Patient Protection and Affordable Care Act (PPACA), Capital University is required to provide notice to all employees, including those who are not currently eligible for benefits through Capital regarding the Health Insurance Marketplace. This notice shall serve as formal notification to all current employees.

Starting October, 1 2013, one of the components of Health Care Reform provides individuals with the ability to shop their health insurance through the Marketplace. Attached is the government notice titled “New Health Insurance Marketplace Coverage Option and Your Health Coverage”. This notice provides details on how you can obtain additional information about a new way to obtain health coverage, if you are interested.

Those employees who are not eligible for healthcare coverage through Capital University may shop the marketplace as outlined in the attached memo. Employees who are currently enrolled in one of our health plans and wish to stay enrolled, need not do anything at this time. However, you may also shop the Marketplace if you choose to do so.
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 your Human Resources Office at (614) 236-6168.

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.

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<tbody>
<tr>
<td>3. Employer name</td>
<td>4. Employer Identification Number (EIN)</td>
</tr>
<tr>
<td>Capital University</td>
<td>31-4379435</td>
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<tr>
<td>5. Employer address</td>
<td>6. Employer phone number</td>
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<tr>
<td>1 College and Main</td>
<td>(614) 236-6168</td>
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<tr>
<td>7. City</td>
<td>8. State</td>
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<tr>
<td>Columbus</td>
<td>OH</td>
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<tr>
<td>10. Who can we contact about employee health coverage at this job?</td>
<td>Theresa Feldmeier</td>
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<tr>
<td>11. Phone number (if different from above)</td>
<td>12. Email address</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:hr@capital.edu">hr@capital.edu</a></td>
</tr>
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Here is some basic information about health coverage offered by this employer:

- As your employer, we offer a health plan to:
  - [ ] All employees.
  - [x] Some employees. Eligible employees are:
    - Employees contracted to work three-quarter time or greater are eligible to participate in Capital University’s sponsored group medical insurance plan. Three-quarter time is defined as an employee regularly scheduled to work 30+ hours in a week.

- With respect to dependents:
  - [x] We do offer coverage. Eligible dependents are:
    - The Subscriber’s legal spouse/domestic partner or a child of the Subscriber or the Subscriber’s spouse/domestic partner is eligible to participate in Capital University’s sponsored group medical insurance plan.

  The definition of Dependent is subject to the following conditions and limitations:

- A Dependent includes any child listed above under 26 years of age.
- A Dependent includes an unmarried dependent child who is 26 years or older, but less than 28 years of age only if all of the following are true:
  - The child is a natural child, stepchild or adopted child of the Subscriber.
  - The child is a resident of Ohio or a Full-time Student at an accredited public or private institution of higher education.
  - The child is not employed by an employer offering any health benefit plan under which the child is eligible for coverage.
  - The child is not eligible for Medicare or Medicaid coverage.
- A Dependent includes an unmarried dependent child of any age who is or becomes disabled and dependent upon the Subscriber.

- [ ] We do not offer coverage.

  - [x] 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 decide to shop for coverage in the Marketplace, [HealthCare.gov](http://HealthCare.gov) will guide you through the process.