



County of Humboldt  
Human Resources/Risk Management  
825 5<sup>th</sup> Street, Room 100  
Eureka, CA 95501

September 20, 2021

Dear County of Humboldt Employee:

Effective January 1, 2014 the Affordable Care Act (ACA) required that all Americans have health coverage for themselves and any dependent children. The Internal Revenue Service (IRS) may impose penalties for being without health insurance after January 1, 2014.

Effective January 1, 2020, California's new individual health insurance mandate (2019 Ch. 38, SB 78) requires state residents to maintain minimum essential coverage (MEC) for themselves and their dependents starting on January 1, 2020, or pay a state tax penalty.

In accordance with ACA requirements, Humboldt County is providing you with the attached Marketplace Notice explaining that you may obtain health insurance coverage through the state exchange (Covered California) that is created in compliance with the Affordable Care Act. The "Marketplace Notice" is a three page document, on page one is general information about what is available in the marketplace. Pages two and three contain important enrollment information on Humboldt County coverage (provided through CalPERS health) that you must provide when applying for Covered California plans. For more information please visit [www.coveredca.com](http://www.coveredca.com) or call (877) 752-4737.

Please be aware that the County of Humboldt's substantial employer contribution qualifies our coverage as affordable under the ACA. Also CalPERS has determined that all CalPERS coverage's offered exceed the Minimum Essential coverage requirements by the ACA. In summary, because you're eligible to be enrolled in our coverage and due to the affordability of our coverages and the quality of our plans offered; **our regular employees and their families may not qualify for federal subsidies to offset premiums on the Covered California exchange. This may be true even if the employee drops/waives County of Humboldt coverage.** We encourage you to keep this in mind when using the cost estimate calculator for Covered California.

In order to avoid confusion we would like to point out that there are two official open enrollment periods occurring at approximately the same time:

- 1) Covered California runs from November 1, 2021 to January 31, 2022
- 2) CalPERS Health with the County runs from September 20, 2021 to October 15, 2021

Please contact Human Resources, Risk Management Services at 707/268-3669 if you have any questions about your County of Humboldt health insurance coverage.

Sincerely,

Human Resources, Risk Management Services



# New Health Insurance Marketplace Coverage Options and Your Health Coverage

Form Approved  
OMB No. 1210-0149  
(expires 6-30-2023)

## 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.<sup>1</sup>

**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 Humboldt, Human Resources – Risk Management Services at 707/268-3669.

The Marketplace can help you evaluate your coverage options, including your eligibility for coverage through the Marketplace and its cost. Please visit [HealthCare.gov](http://HealthCare.gov) for more information, including an online application for health insurance coverage and contact information for a Health Insurance Marketplace in your area.

<sup>1</sup> 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 County of Humboldt		4. Employer Identification Number (EIN) 946000513	
5. Employer address 825 5 <sup>th</sup> Street		6. Employer phone number 707/268-3669	
7. City Eureka	8. State CA	9. ZIP code 95501	
10. Who can we contact about employee health coverage at this job? Human Resource - Risk Management Services			
11. Phone number (if different from above)		12. Email address RiskManagement@co.humboldt.ca.us	

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. Eligible employees are:

Regular Full-Time and Regular Part-Time Employees

- With respect to dependents:

We do offer coverage. Eligible dependents are:

-Current spouse/registered domestic partner  
 -Natural, adopted, step or registered domestic partner's children up to age 26  
 -Disabled Children of any age if enrolled prior to age 26  
 -Children up to age 26 whom the subscriber has assumed a parent-child relationship and is considered the primary care parent

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 decide to shop for coverage in the Marketplace, [HealthCare.gov](https://www.healthcare.gov) will guide you through the process. Here's the employer information you'll enter when you visit [HealthCare.gov](https://www.healthcare.gov) to find out if you can get a tax credit to lower your monthly premiums.

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)

**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? \$ 72.86

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 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. See question 15.)

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

\* 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)