# The Affordable Care Act (ACA) Notice of Health Insurance Marketplace Coverage Options and Your Public Employees Benefits Board (PEBB) Benefits

#### **General Information**

In 2014, a new way to buy health insurance through the new health insurance Marketplace, also known as the Health Insurance Exchange, was introduced. Washington Healthplanfinder is the Marketplace serving Washington residents. This notice provides basic information about the Marketplace as well as Public Employees Benefits Board (PEBB) health plan coverage offered by your employer and is intended to assist you in evaluating options for you and your family.

#### 1. What is the Health Insurance Marketplace?

Under the Affordable Care Act (ACA), every state must have a health insurance Marketplace to help people buy health insurance. The Marketplace offers assistance to help you find and compare health insurance options offered by private companies. The Marketplace will also help you find out if you qualify for premium tax credits or other financial assistance.

#### 2. When does open enrollment begin?

Open enrollment for the Marketplace may begin as early as October 1<sup>st</sup> for coverage starting as early as January 1<sup>st</sup> of the following year. However, please keep in mind that this can vary. Open enrollment in 2024 began October 28<sup>th</sup> for coverage starting in 2025.

#### 3. 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 you are <u>not</u> eligible for PEBB health plan enrollment as an employee. The amount of premium savings in the Marketplace will depend on your household income.

# 4. Does being eligible for an employer contribution for PEBB health plan coverage affect eligibility for premium savings through the Healthplanfinder?

Yes.

### • Employees eligible for employer contribution:

All **eligible** state employees receive an employer contribution for PEBB health plan enrollment and are not allowed to waive PEBB health coverage to enroll in coverage through the Marketplace. All or a portion of this contribution may be excluded from income for Federal and State income tax purposes. These employees should enroll or remain enrolled in a PEBB health plan.

State employees who are eligible to receive an employer contribution cannot use the employer contribution to purchase coverage through the Marketplace, and will not be eligible for a premium tax credit if they purchase coverage through the Marketplace.

However, if the cost of a PEBB health plan to cover you (and not any other members of your family) is more than 9.5% of your household income for the year, or does not meet the "minimum value" standard set by the ACA, you may be eligible for a tax credit or other financial assistance. An employer-sponsored health plan meets the "minimum value standard" if the health plan's share of the total allowed benefit costs covered by the health plan is no less than 60 percent of such costs.

#### • Employees not eligible for employer contribution:

Employees who are <u>not</u> eligible for the employer contribution for PEBB health plan enrollment should consider applying for health benefits in the Marketplace as they may qualify for a premium tax credit or other financial assistance. Your payments for coverage through the Marketplace are made on an after-tax basis.

# 5. How do I get additional information about the Marketplace?

The Marketplace simplifies your search for health coverage by gathering the options available in your area in one place. You can compare plans based on price, benefits, quality, and other features important to you before you make a choice.

Visit <a href="www.healthcare.gov">www.healthcare.gov</a> or also get help by phone, or in person.

Call 1-800-318-2596, 24 hours a day, 7 days a week (TTY: 1-855-889-4325)

#### 6. How do I contact the Washington Healthplanfinder?

For Washington State residents, Washington Healthplanfinder can help you evaluate Marketplace coverage options and possible premium savings online, by phone, or in person:

Washington Healthplanfinder 521 Capitol Way South Olympia, WA 98501

Toll-free: 1-855-923-4633 (TTY: 1-855-627-9604)

Submit a question online

#### 7. How do I get more information about PEBB health plans?

For more information about PEBB health plans offered by your employer, please check the Certificate of Coverage for your plan, or contact your benefits office.

You can also find complete information about PEBB employee and retiree benefits at the PEBB website:

https://www.hca.wa.gov/employee-retiree-benefits/public-employees

# Information about PEBB health plan coverage offered by your employer

This section contains information about any health plan coverage offered by your employer. If you decide to complete an application for coverage in the Marketplace, you will be asked to provide the information shown below. This information is numbered to correspond to the Marketplace application.

3. Employer name		4. Employer Identification Number (EIN)			
5. Employer address		6. Employer phone number			
7. City	8. State	9. ZIP code			
10. Who can we contact about employee health coverage at this job?					
11. Phone number (if different from above) 1		12. Email address			

Here is some basic information about health plan coverage offered by your employer:

•	As your	employer	, we offer a	health	plan to:
---	---------	----------	--------------	--------	----------

☐ All employees.

**☑** Some employees.

Employee eligibility is described in Washington Administrative Code (WAC) 182-12-114:

#### WAC 182-12-114

# How do employees establish eligibility for public employees benefits board (PEBB) benefits?

Eligibility for an employee whose work circumstances are described by more than one of the eligibility categories in subsections (1) through (5) of this section shall be determined solely by the criteria of the category that most closely describes the employee's work circumstances.

Hours that are excluded in determining eligibility include standby hours and any temporary increases in work hours, of six months or less, caused by training or emergencies (except governor-declared emergencies) that have not been or are not anticipated to be part of the employee's regular work schedule or pattern. Any hours worked in direct response to a governor-declared emergency are not excludable and must be included in determining eligibility. In order to include excluded hours in determining eligibility, employing agencies must request and receive the public employees benefits board (PEBB) program's approval.

For how the employer contribution toward PEBB benefits is maintained after eligibility is established under this section, see WAC <u>182-12-131</u>.

(1) Employees are eligible for PEBB benefits as follows, except as described in subsections (2) through (5) of this section:

- (a) Eligibility. An employee is eligible if they are anticipated to work an average of at least 80 hours per month and are anticipated to work for at least eight hours in each month for more than six consecutive months.
- (b) Determining eligibility.
- (i) Upon employment: An employee is eligible from the date of employment if the employing agency anticipates the employee will work according to the criteria in (a) of this subsection.
- (ii) Upon revision of anticipated work pattern: If an employing agency revises an employee's anticipated work hours or anticipated duration of employment such that the employee meets the eligibility criteria in (a) of this subsection, the employee becomes eligible when the revision is made.
- (iii) Based on work pattern: An employee who is determined to be ineligible, but later meets the eligibility criteria in (a) of this subsection, becomes eligible the first of the month following the sixmonth averaging period.
- (c) Stacking of hours. As long as the work is within one state agency, employees may "stack" or combine hours worked in more than one position or job to establish eligibility and maintain the employer contribution toward PEBB benefits. Employees become eligible through stacking when they meet the requirements described in (a) of this subsection. They must notify their employing agency if they believe they are eligible through stacking. Stacking includes work situations in which:
- (i) The employee works two or more positions or jobs at the same time (concurrent stacking);
- (ii) The employee moves from one position or job to another (consecutive stacking); or
- (iii) The employee combines hours from a seasonal position with hours from a nonseasonal position or job. An employee who establishes eligibility by stacking hours from a seasonal position or job with hours from a nonseasonal position or job shall maintain the employer contribution toward PEBB benefits as described in WAC <u>182-12-131(1)</u>.
- (d) When PEBB benefits begin. Medical, dental, vision, basic life insurance, basic accidental death and dismemberment (AD&D) insurance, employer-paid long-term disability (LTD) insurance, employee-paid LTD insurance (unless the employee declines the employee-paid LTD insurance as described in WAC 182-08-197(1)), and if eligible, benefits under the salary reduction plan begin on the first day of the month following the date an employee becomes eligible. If the employee becomes eligible on the first working day of a month, then coverage begins on that date. Supplemental life insurance and supplemental AD&D insurance begin on the first day of the month following the date the contracted vendor receives the required form or approves the enrollment.
- (2) Seasonal employees, as defined in WAC <u>182-12-109</u>, are eligible as follows:
- (a) Eligibility. A seasonal employee is eligible if they are anticipated to work an average of at least 80 hours per month and are anticipated to work for at least eight hours in each month of at least three consecutive months of the season.
- (b) Determining eligibility.

- (i) Upon employment: A seasonal employee is eligible from the date of employment if the employing agency anticipates that they will work according to the criteria in (a) of this subsection.
- (ii) Upon revision of anticipated work pattern. If an employing agency revises an employee's anticipated work hours or anticipated duration of employment such that the employee meets the eligibility criteria in (a) of this subsection, the employee becomes eligible when the revision is made.
- (iii) Based on work pattern. An employee who is determined to be ineligible for benefits, but later works an average of at least 80 hours per month and works for at least eight hours in each month and works for more than six consecutive months, becomes eligible the first of the month following a six-month averaging period.
- (c) Stacking of hours. As long as the work is within one state agency, employees may "stack" or combine hours worked in more than one position or job to establish eligibility and maintain the employer contribution toward PEBB benefits. Employees become eligible through stacking when they meet the requirements described in (a) of this subsection. They must notify their employing agency if they believe they are eligible through stacking. Stacking includes work situations in which:
- (i) The employee works two or more positions or jobs at the same time (concurrent stacking);
- (ii) The employee moves from one position or job to another (consecutive stacking); or
- (iii) The employee combines hours from a seasonal position or job with hours from a nonseasonal position or job. An employee who establishes eligibility by stacking hours from a seasonal position or job with hours from a nonseasonal position or job shall maintain the employer contribution toward PEBB benefits as described in WAC 182-12-131(1).
- (d) When PEBB benefits begin. Medical, dental, vision, basic life insurance, basic AD&D insurance, employer-paid LTD insurance, employee-paid LTD insurance (unless the employee declines the employee-paid LTD insurance as described in WAC 182-08-197(1)), and if eligible, benefits under the salary reduction plan begin on the first day of the month following the day the employee becomes eligible. If the employee becomes eligible on the first working day of a month, then coverage begins on that date. Supplemental life insurance and supplemental AD&D insurance begin on the first day of the month following the date the contracted vendor receives the required form or approves the enrollment.

**Exception:** Seasonal employees who work a recurring, annual season with a duration of less than nine months are not eligible for the employee-paid LTD insurance benefit.

- (3) Faculty are eligible as follows:
- (a) Determining eligibility. "Half-time" means one-half of the full-time academic workload as determined by each institution, except that half-time for community and technical college faculty employees is governed by RCW 28B.50.489.
- (i) Upon employment: Faculty who the employing agency anticipates will work half-time or more for the entire instructional year, or equivalent nine-month period, are eligible from the date of employment.
- (ii) For faculty hired on quarter/semester to quarter/semester basis: Faculty who the employing agency anticipates will not work for the entire instructional year, or equivalent nine-month period, are eligible at the beginning of the second consecutive quarter or semester of employment in which they are

anticipated to work, or has actually worked, half-time or more. Spring and fall are considered consecutive quarters/semesters when first establishing eligibility for faculty that work less than half-time during the summer quarter/semester.

- (iii) Upon revision of anticipated work pattern: Faculty who receive additional workload after the beginning of the anticipated work period (quarter, semester, or instructional year), such that their workload meets the eligibility criteria as described in (a)(i) or (ii) of this subsection become eligible when the revision is made.
- (b) Stacking. Faculty may establish eligibility and maintain the employer contribution toward PEBB benefits by working as faculty for more than one institution of higher education. Faculty workloads may only be stacked with other faculty workloads to establish eligibility under this section or maintain eligibility as described in WAC 182-12-131(3). A faculty becomes eligible through stacking when they meet the requirements as described in (a) of this subsection. When a faculty works for more than one institution of higher education, the faculty must notify their employing agencies that they work at more than one institution and may be eligible through stacking.
- (c) When PEBB benefits begin.
- (i) Medical, dental, vision, basic life insurance, basic AD&D insurance, employer-paid LTD insurance, employee-paid LTD insurance (unless the faculty declines the employee-paid LTD insurance as described in WAC 182-08-197(1)), and if eligible, benefits under the salary reduction plan begin on the first day of the month following the day the faculty becomes eligible. If the faculty becomes eligible on the first working day of a month, then coverage begins on that date. Supplemental life insurance and supplemental AD&D insurance begin on the first day of the month following the date the contracted vendor receives the required form or approves the enrollment.
- (ii) For faculty hired on a quarter/semester to quarter/semester basis under (a)(ii) of this subsection, medical, dental, vision, basic life insurance, basic AD&D insurance, employer-paid LTD insurance, employee-paid LTD insurance (unless the faculty declines the employee-paid LTD insurance as described in WAC 182-08-197(1)), and if eligible, benefits under the salary reduction plan begin the first day of the month following the beginning of the second consecutive quarter/semester of half-time or more employment. If the first day of the second consecutive quarter/semester is the first working day of the month, then coverage begins at the beginning of the second consecutive quarter/semester. Supplemental life insurance and supplemental AD&D insurance begin on the first day of the month following the date the contracted vendor receives the required form or approves the enrollment.
- (4) Elected and full-time appointed officials of the legislative and executive branches of state government are eligible as follows:
- (a) Eligibility. A legislator is eligible for PEBB benefits on the date their term begins. All other elected and full-time appointed officials of the legislative and executive branches of state government are eligible on the date their terms begin or the date they take the oath of office, whichever occurs first.
- (b) When PEBB benefits begin. Medical, dental, vision, basic life insurance, basic AD&D insurance, employer-paid LTD insurance, employee-paid LTD insurance (unless the employee declines the

employee-paid LTD insurance as described in WAC <u>182-08-197(1)</u>), and if eligible, benefits under the salary reduction plan begin on the first day of the month following the day the employee becomes eligible. If the employee becomes eligible on the first working day of a month, then coverage begins on that date. Supplemental life insurance and supplemental AD&D insurance begin on the first day of the month following the date the contracted vendor receives the required form or approves the enrollment.

# (5) Justices and judges are eligible as follows:

- (a) Eligibility. A justice of the supreme court and judges of the court of appeals and the superior courts become eligible for PEBB benefits on the date they take the oath of office.
- (b) When PEBB benefits begin. Medical, dental, vision, basic life insurance, basic AD&D insurance, employer-paid LTD insurance, employee-paid LTD insurance (unless the employee declines the employee-paid LTD insurance as described in WAC 182-08-197(1)), and if eligible, benefits under the salary reduction plan begin on the first day of the month following the day the employee becomes eligible. If the employee becomes eligible on the first working day of a month, then coverage begins on that date. Supplemental life insurance and supplemental AD&D insurance begin on the first day of the month following the date the contracted vendor receives the required form or approves the enrollment.

#### • With respect to dependents:

$   \overline{\mathbf{A}} $	We do offer coverage.		
	We do not offer coverage.		

# Dependent eligibility is described in Washington Administrative Code (WAC) 182-12-260:

- (1) Legal spouse. A former spouse is not an eligible dependent upon finalization of a divorce or annulment, even if a court order requires the subscriber to provide health insurance for the former spouse;
- **(2) State registered domestic partner.** A former state registered domestic partner is not an eligible dependent upon dissolution or termination of a partnership, even if a court order requires the subscriber to provide health insurance for the former partner;
- (3) Children. Children are eligible through the last day of the month in which their twenty-sixth birthday occurred except as described in (g) of this subsection. Children are defined as the subscriber's:
- (a) Children based on establishment of a parent-child relationship as described in RCW <u>26.26A.100</u>, except when parental rights have been terminated;
- (b) Children of the subscriber's spouse, based on the spouse's establishment of a parent-child relationship, except when parental rights have been terminated. The stepchild's relationship to the subscriber (and eligibility as a dependent) ends on the same date the marriage with the spouse ends through divorce, annulment, dissolution, termination, or death;
- (c) Children for whom the subscriber has assumed a legal obligation for total or partial support in anticipation of adoption of the child;

- (d) Children of the subscriber's state registered domestic partner, based on the state registered domestic partner's establishment of a parent-child relationship, except when parental rights have been terminated. The child's relationship to the subscriber (and eligibility as a dependent) ends on the same date the subscriber's legal relationship with the state registered domestic partner ends through divorce, annulment, dissolution, termination, or death;
- (e) Children specified in a court order or divorce decree for whom the subscriber has a legal obligation to provide support or health care coverage;
- (f) Extended dependent in the legal custody or legal guardianship of the subscriber, the subscriber's spouse, or subscriber's state registered domestic partner. The legal responsibility is demonstrated by a valid court order and the child's official residence with the custodian or guardian. Extended dependent child does not include a foster child unless the subscriber, the subscriber's spouse, or the subscriber's state registered domestic partner has assumed a legal obligation for total or partial support in anticipation of adoption; and
- (g) Children of any age with a developmental or physical disability that renders the child incapable of self-sustaining employment and chiefly dependent upon the subscriber for support and maintenance provided such condition occurs before the age of twenty-six:
- (i) The subscriber must provide proof of the disability and dependency within sixty days of the child's attainment of age twenty-six;
- (ii) The subscriber must notify the PEBB program, in writing, when the child is no longer eligible under this subsection as described in WAC <u>182-12-262</u> (2)(a);
- (iii) A child with a developmental or physical disability who becomes self-supporting is not eligible under this subsection as of the last day of the month in which they become capable of self-support;
- (iv) A child with a developmental or physical disability age twenty-six and older who becomes capable of self-support does not regain eligibility if they later become incapable of self-support; and
- (v) The PEBB program with input from the applicable contracted vendor will periodically verify the eligibility of a dependent child with a disability beginning at age twenty-six, but no more frequently than annually after the two-year period following the child's twenty-sixth birthday. Verification will require renewed proof of disability and dependence from the subscriber.
- ☑ 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.							
may still quality for a premium discount.							