



New Health Insurance Marketplace Coverage Options: Frequently Asked Questions for Episcopal Church Employees

The Patient Protection and Affordable Care Act (ACA) provides a new option for buying healthcare coverage. Under the ACA, individuals may enroll in a health plan through the Marketplace during the Marketplace's open enrollment period which begins November 15, 2014, with coverage starting January 1, 2015.

The Model Notice given to you by your employer provides more information about the Marketplace and options that may become available to you. You can get more information to help you evaluate your coverage options and eligibility for a premium tax credit, as well as information specific to your state's Marketplace, at www.healthcare.gov.

Why am I receiving this notice?

The ACA requires employers to notify their new employees of the existence of the Marketplace.

Do I have to get my health coverage through the Marketplace?

No. You may continue to be covered by your current health plan. The Marketplace is just one of the options available to you for coverage. Because the Marketplace is a new option, the ACA requires your employer to let you know about it.

You should be aware that, unlike plans offered through The Episcopal Church Medical Trust (the Medical Trust), if you choose to purchase healthcare coverage through the Marketplace, your employer will be unable to contribute towards the cost of that plan so you will lose all tax-free employer contributions toward the cost of healthcare coverage. Additionally, you will lose the pre-tax treatment of any required employee contribution because any premiums you pay for Marketplace coverage cannot be made on a pre-tax basis.

Am I eligible for a premium tax credit?

Premium tax credits are available only to individuals who purchase healthcare coverage through the Marketplace. However, an individual with access to employer-provided healthcare coverage that meets minimum value criteria (all Medical Trust plans are above minimum value) and whose contribution for the lowest cost single coverage option does not exceed 9.56% of his or her household income will not be eligible for a premium tax credit. Based on an analysis by the Medical Trust in 2013, it is unlikely that many employees currently enrolled in Medical Trust plans would meet the requirements for a premium tax credit.

Premium tax credits will be based on the second lowest cost Marketplace "silver plan". Since the majority of the Medical Trust's plans are "gold" or "platinum" plans, employees covered under the Denominational Health Plan (DHP) who purchase healthcare coverage through the Marketplace will probably have to pay more to obtain the same coverage they have now.

What should I do if I decide to purchase health coverage through the Marketplace?

In order to opt out of the DHP and purchase coverage on the Marketplace, you will need to certify that you are eligible for a premium tax credit on the Marketplace. The Medical Trust has prepared a Waiver of Health Benefits form and provided it to your employer. If you are eligible for OR have health benefits coverage through the Medical Trust, you must complete the form and return it to your employer, who will

send it to the diocesan health benefits administrator. If your diocesan health benefits administrator requires additional information, he or she will contact your employer. If you aren't eligible for or don't have health benefits coverage through the Medical Trust, there are no additional forms for you to complete.

How can I get more information?

For more information about coverage offered through the Medical Trust, please check your Open Enrollment Guide or contact Client Services at (800) 480-9967.

Please note that this document is provided for informational purposes only and should not be viewed as legal, tax, or other advice. Please consult with your own professional advisor for further guidance. Please contact your diocesan chancellor or other legal and/or tax advisors if you have questions or need additional information. This information is current as of April 2015 and does not reflect any guidance issued on or after such date.