



New Health Insurance Marketplace Coverage Options and Your Health Coverage

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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. If you are a MCCCCD benefits eligible employee, you do not qualify for a tax credit in the Health Insurance Marketplace. If you are not eligible for MCCCCD benefit plans, you may qualify for a tax credit. Please continue reading for additional information on the Health Insurance Marketplace.

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. MCCCCD health coverage does meet the required standards.

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 the Maricopa County Community College District human resource offices.

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.

3. Employer name Maricopa County Community College District		4. Employer Identification Number (EIN) 86-0185552	
5. Employer address 2411 W. 14 th Street		6. Employer phone number 480-731-8581	
7. City Tempe	8. State AZ	9. ZIP code 85281-6942	
10. Who can we contact about employee health coverage at this job? MCCCD Employee Benefits Hotline			
11. Phone number (if different from above)		12. Email address rx@domail.maricopa.edu	

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

- As your employer, we offer a health plan to:
 - All employees.
 - Some employees. Eligible employees are:

As a Maricopa County Community College District (MCCCD) employee, you are eligible to participate in MCCCD's health plan if you are employed by MCCCD per the following definition:

Persons who occupy a regular, classified, non-classified, Skill Center or Specially-funded non-faculty position scheduled to work at least 20 hours per week on a regularly scheduled basis for at least nine months per fiscal year, or persons who occupy a residential faculty position who carry at least a half-time instructional load. One-year-only (OYO) or one-semester-only (OSO) positions are only eligible for coverage as defined in the MCCCD Temporary Rates document available at: <http://www.maricopa.edu/employees/divisions/hr/managing/hiring/shortterm>

- With respect to dependents:
 - We do offer coverage. Eligible dependents under a MCCCD covered benefits eligible employee are:

Employee's spouse under a legally valid existing marriage.

Employee's children or the children of his/her spouse until age 26. This includes natural children, legally-adopted children, step children, children placed for adoption, children under legal guardianship substantiated by a court order and living with the employee and children who are entitled to coverage under a medical support order. You may cover the child whether he or she is a fulltime student, lives with the employee, is eligible for other group health coverage, or is financially dependent on the employee. Children under the age of 19 will not be subject to pre-existing condition limitations on MCCCD medical plans.

A domestic partner, and the children of the domestic partner as defined below, are eligible to enroll for group coverage as dependents on the same basis as other eligible dependents as long as the following criteria are met:

Domestic Partner: An individual of either sex who has shared a long-term committed Domestic Partnership relationship with an eligible employee for a minimum of the last 6 months.

Children of a Domestic Partner until age 26: The children of the domestic partner, including natural children, legally adopted children and children under legal guardianship substantiated by a court order. These children are eligible for dependent coverage if they are primarily dependent on the domestic partnership for support, reside with the domestic partners in a regular parent child relationship, meet the age requirements of the benefit plan and meet the definition of an eligible child under the Internal Revenue Service Code § 152. Children under the age of 19 will not be subject to pre-existing condition limitations on MCCCD medical plans.

Domestic Partnership: A relationship between an eligible employee and his/her domestic partner that meets all of the following criteria:

The partners currently reside together in an exclusive mutual commitment similar to marriage and have done so for at least the last 6 consecutive months and each intend to continue the relationship indefinitely;

The partners are jointly responsible for basic living expenses;

The partners are not married to each other or any other individual (statutory or common law), and neither is a member of another domestic partnership;

Both partners are 18 years old or older;

Partners are not related by blood or a degree of closeness which would prohibit marriage under the law of the State of Arizona;

Both partners were mentally competent to consent to contract when the domestic partnership began and remain so for purposes of contracting for coverage for the domestic partner;

Each partner is the other's sole domestic partner and is responsible for the other's common welfare;

The partners are financially interdependent, jointly responsible for each other's basic living expenses and able to provide documents for at least three (3) of the following situations to demonstrate that interdependence has existed for a minimum of the last 6 consecutive months:

- joint mortgage, joint property tax identification or joint tenancy on a residential lease;
- joint bank, investment and/or credit account;
- joint liabilities (e.g., credit cards, automobile loans);

- joint ownership of real property or a common leasehold, interest in real property, such as a residence or business, or common ownership of an automobile;
- a Will which designates the other as the primary beneficiary or a beneficiary designation form currently in effect for a retirement plan or life insurance policy setting forth that one partner is a beneficiary of the other;
- designation of one partner as holding power of attorney for health care or a general durable power of attorney for the other;
- written agreement(s) or contracts regarding the domestic partner relationship showing mutual support obligations.

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, or contact the Marketplace by phone at: 1-800-318-2596
TTY: 1-855-889-4325.