PART A: General Information

The Affordable Care Act makes available to you the opportunity to buy health insurance coverage for you and your family through the Health Insurance Marketplace.

To assist you as you evaluate your options, this notice provides some basic information about the Health Insurance Marketplace and how it relates to the Auburn University Health Plan.

What is the Health Insurance Marketplace?

The Health Insurance Marketplace (or Marketplace) is designed to help you find health insurance coverage 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 tax credit that lowers your monthly premium right away.

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 Auburn University does not offer health insurance coverage to you, or offers you coverage that doesn't meet certain Federal standards. The savings on your premium for which you may be eligible depends on your household income.

Currently, the Auburn University Health Plan meets all requirements of the Affordable Care Act.

Does Employer Health Insurance Coverage Affect My Eligibility for Premium Savings through the Marketplace?

Yes. If Auburn University offers health insurance coverage to you that meets certain Federal standards, you will not be eligible for a tax credit through the Marketplace, and you may wish to enroll in the Auburn University Health Plan.

If the cost of your coverage from Auburn University (and not the coverage of any other members of your family) is more than 9.5% of your household income for the year, or if Auburn University offers coverage that does not meet the "minimum value" standard set by the Affordable Care Act, you may also be eligible for a tax credit.

Note: If you purchase health insurance coverage through the Marketplace instead of accepting the health insurance coverage offered to you by Auburn University, then you will lose the employer contribution under the Auburn University Health Plan. Also, this employer contribution, as well as your employee contribution under the Auburn University Health Plan, is excluded from income for Federal and State income tax purposes. Your premium payments for health insurance coverage through the Marketplace are made on an after-tax basis.

If Auburn University does not offer health insurance coverage to you at all, or does not offer coverage to you that meets certain Federal standards, you may be eligible for a tax credit that lowers your monthly premium or for a reduction in certain cost-sharing within the coverage.

How Can I Get More Information?

For more information about your health insurance coverage offered by Auburn University, please check your Summary Plan Description at [www.auburn.edu/payroll](http://www.auburn.edu/payroll) and click on “Health (Medical) Insurance” under EMPLOYEE BENEFITS, or contact Auburn University Human Resources Payroll & Employee Benefits at (334) 844-4183.

The Marketplace can help you evaluate your health insurance coverage options, including your eligibility for coverage through the Marketplace and its cost. Please visit [www.healthcare.gov](http://www.healthcare.gov) for more information, including an online application for health insurance coverage and contact information for a Health Insurance Marketplace in your area.
PART B: Information About Health Coverage Offered by Your Employer
This section contains information about the health insurance coverage offered by Auburn University.

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: AUBURN UNIVERSITY
4. Employer Identification Number (EIN): 63-6000724
5. Employer address: 1550 EAST GLENN AVENUE
6. Employer phone number: (334) 844-4183
7. City: AUBURN
8. State: ALABAMA
9. ZIP code: 36849

10. Who can we contact about employee health coverage at this job?
    AUBURN UNIVERSITY HUMAN RESOURCES

11. Phone number (if different from above): (334) 844-4183
12. Email address: BENEFITS@AUBURN.EDU

Here is some basic information about the Auburn University Health Plan:

• As your employer, Auburn University offers health insurance coverage to:
  ☐ All employees.
  ☑ Some employees. Eligible employees are: Active, full-time, non-student employees, if the most recent appointment period is continuous for a minimum of one year (nine or twelve months as appropriate to the appointment).

• With respect to dependents
  ☑ We do offer coverage. Eligible dependents are: your spouse (person to whom you are legally married under Alabama law); and, your child under age 26 regardless of marital status or enrollment in school; and certain qualifying Sponsored Dependents.
  ☐ 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, www.healthcare.gov will guide you through the process. Here's the employer information you'll enter when you visit 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. If you are eligible for the Auburn University Health Plan you will answer “Yes” to this question #13 and continue on.

If you are NOT eligible for the Auburn University Health Plan you will answer “No” to this question #13, and stop here.

14. Does the employer offer a health plan that meets the minimum value standard?  
☑ Yes (Go to question 15)  
☐ No (STOP and return this 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?  
Select the proper amount in Column a. that corresponds to Annual Income (or Salary) and the payroll frequency in b. of your primary job.

b. How often?

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Less than $27,300</th>
<th>$27,300 up through $40,799</th>
<th>$40,800 or greater</th>
</tr>
</thead>
<tbody>
<tr>
<td>Every 2 Weeks</td>
<td>$47.57</td>
<td>$71.35</td>
<td>$95.14</td>
</tr>
<tr>
<td>Twice a Month</td>
<td>$68.71</td>
<td>$103.09</td>
<td>$137.45</td>
</tr>
<tr>
<td>Monthly</td>
<td>$103.09</td>
<td>$154.61</td>
<td>$206.15</td>
</tr>
</tbody>
</table>

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?  
☐ NO CHANGES  
☐ Employer won't offer health coverage  
☑ Premiums were increased by 5%; breakpoints in 15.b were not increased.

a. How much would the employee have to pay in premiums for this plan?  
Select the proper amount in Column a. that corresponds to Annual Income (or Salary) and the payroll frequency in b. of your primary job.

b. How often?  
☐ Every 2 Weeks  
☐ Twice a Month  
☐ Monthly  

Date of change (mm/dd/yyyy): 01/01/2017

* 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.