



# New Health Insurance Marketplace Coverage Options and Your Health Coverage

Form Approved  
OMB No. 1210-0149  
(expires 11-30-2013)

## 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?

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.

The new Health Insurance Marketplace for California is called "Covered California." Questions regarding the California Marketplace should be directed to Covered California at:

- Website: [www.coveredca.com](http://www.coveredca.com)
- Phone number: 888-975-1142

For more information about your coverage offered by your employer, please check your summary plan description or contact Benefits Administration at 213-241-4262 or at [benefits@lausd.net](mailto:benefits@lausd.net).

<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 <b>Los Angeles Unified School District</b>		4. Employer Identification Number (EIN) <b>95-6001908</b>	
5. Employer address <b>333 South Beaudry Avenue</b>		6. Employer phone number <b>213-241-4262</b>	
7. City <b>Los Angeles</b>	8. State <b>CA</b>	9. ZIP code <b>90017</b>	
10. Who can we contact about employee health coverage at this job? <b>Benefits Administration</b>			
11. Phone number (if different from above) <b>213-241-4262</b>		12. Email address <b>benefits@lausd.net</b>	

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:

*See Attachment A*

- **With respect to dependents:**

We do offer coverage. Eligible dependents are:

*See Attachment A*

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.

All plans offered by LAUSD meet the minimum value requirements of the Affordable Care Act.

\*\* 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](http://HealthCare.gov) will guide you through the process. Here's the employer information you'll enter when you visit [HealthCare.gov](http://HealthCare.gov) to find out if you can get a tax credit to lower your monthly premiums.



# Attachment A

## Los Angeles Unified School District

### Eligibility for Plans

Any certificated or classified employee who is assigned half-time or more of a full-time assignment in one class, in a status other than substitute, temporary, extra, exchange or relief, shall be eligible to enroll in a plan. In order to remain eligible, the employee must be in paid status within the assignment basis.

You might also be eligible for benefits if you are:

#### Adult Education Employees

The eligibility rules for adult education employees changed on July 1, 2001. You may be exempt from the rules if you qualified for coverage during the 1979-1980 or the 2000-2001 school year based on previous rules, and if you have continuously maintained eligibility since then. However, should you lose eligibility at any time due to changes in your assigned hours or actual hours worked, your eligibility may be affected. The eligibility rules as of July 1, 2001 are listed below:

- If you work at least 120 hours per pay period in one classification in a regular assignment or were in paid status for 1,200 hours during the previous school years as a regular or substitute employee, you are eligible for all benefits.
- If you work at least 72 hours per pay period in adult education regular assignments or were in paid status for 720 hours during the previous school year as a regular or substitute employee, you are eligible for a medical plan only and may cover only one dependent.

#### Half Time Employees

You must work one half-time as a part-time contract teacher with the remaining time covered by an approved half-time leave. District's benefits contribution is pro-rated on the hours you are contracted to work.

#### Substitutes

You must be in paid status in the previous fiscal year (July 1 – June 30) with the equivalent of 100 days: 600 regular hours in certificated service or 800 regular hours in classified service.

#### Teachers' Assistants (TAs)

You must work at least 80 hours per pay period in a regular assignment. TAs are only eligible for Kaiser medical coverage and are responsible for half the cost employee coverage and an additional amount for dependents.

### Eligible Dependents

Your eligible dependents include:

- Legal spouse or qualified domestic partner
- Dependent children up to age 26
- Dependent children of any age who are permanently disabled and who were continuously enrolled in the District's plans before age 26
- Your domestic partner's child who you have adopted or have been declared the child's legal guardian. You must be registered with the State of California.
- Court-ordered child who is included in your tax return

For additional details, visit [Benefits.lausd.net](http://Benefits.lausd.net) or refer to your Bargaining Unit Agreements.