

# Memorandum

**To:** All New ABC Employees **Date:** March 15, 2021

**From:** Department of Alcoholic Beverage Control

**Subject:** **HEALTH INSURANCE MARKETPLACE COVERAGE OPTIONS AND YOUR HEALTH COVERAGE NOTICE**

The purpose of this memorandum is to provide basic information about the Health Insurance Marketplace (Marketplace) and employment-based health coverage. Receipt of this notice does not confirm you are eligible for health coverage by your employer. Please refer to Part B below and to your departmental Human Resources Officers for eligibility requirements.

## **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 in California is known as "Covered California." Covered California 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. Open enrollment for health insurance coverage through Covered California usually begins in November each year, for coverage starting January 1 of the following year.

## **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 health 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 Covered California 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.

Note: If you purchase health coverage through Covered California instead of accepting health coverage offered by your employer, you may lose the employer contribution (if any) towards the employer-offered coverage. Also, the employer contribution as well as your employee contribution towards the employer-offered coverage is often excluded from income for federal and state income tax purposes. Your payments for coverage through Covered California are made on an after-tax basis.

### **How Can I Get More Information?**

For more information about health coverage offered by your employer, please check your summary plan description or contact your department's Human Resources Office.

For information about health coverage offered by Covered California, please visit [www.Coveredca.com](http://www.Coveredca.com) or call (888) 975-1142.

### **PART B: Information about Health Coverage Offered by Your Employer**

This section contains information about health coverage offered by your employer. If you decide to complete an application for coverage through Covered California, you will be asked to provide this information. This information is numbered to correspond to the Marketplace application.

- Employer Name: Department of Alcoholic Beverage Control
- Employer Identification Number:
- Employer Address:
- Employer Phone Number:
- Contact about Employee Health Coverage at this job:
  - Jessi Nobbe, Transactions Manager
  - Phone number: 916-419-7563
  - E-mail: [jessi.nobbe@abc.ca.gov](mailto:jessi.nobbe@abc.ca.gov)

#### **The following employees are eligible for health benefits:**

- Permanent Full-Time;
- Permanent Part-Time, if appointed half-time or more;
- Permanent Intermittent, after working >480 hours in control period;
- Limited Term of more than 6 months, Full-Time; and,
- Limited Term of more than 6 months, Part-Time, only if appointed to Time Base of half-time or more (Limited Term Intermittents are not eligible, regardless of their hours of work).

#### **The following dependents are eligible for health benefits:**

- Your spouse or registered domestic partner;
- Your children (including adopted, step, or registered domestic partner's children) up to age 26;
- Disabled adult children of any age if they were enrolled prior to age 26; and,

- Children up to age 26 for whom the employee has assumed a parent-child relationship and is considered the primary care parent. (Note: You will be asked to supply appropriate forms of documentation to certify this relationship.)

This coverage meets the minimum value standard and the cost of this coverage to you is intended to be affordable based upon employment wages. However, even though we intend your coverage to be affordable, you may still be eligible for a premium discount through Covered California. Covered California 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), 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 through Covered California, you will need the employer information to determine if you are eligible for a premium tax credit to lower your monthly premiums.

Please contact Covered California directly at (888) 975-1142 with questions regarding the Health Insurance Marketplace. Please contact your designated Personnel Specialist for clarification on information contained in this memorandum.