



IBEW/Western Utilities Health & Welfare Trust Fund



Re: **Important Notice from IBEW/Western Utilities Health & Welfare Trust Fund about Health Insurance Marketplace Coverage and Our Medical Plan**

THIS NOTICE IS FOR ALL EMPLOYEES

Please read this cover letter and the attached Notice carefully and keep this information where you can find it in the future. You are receiving the Notice because it is required by the Affordable Care Act (ACA), also known as Health Reform.

Spanish Language Assistance: Si usted no entiende la información en este documento, por favor de ponerse en contacto con personal del departamento de Beneficios en _925 - 398 - 7050 o visite este sitio web www.cuidadodesalud.gov.

Attached to this cover letter is a Notice called the “**New Health Insurance Marketplace Options and Your Health Coverage.**”

IF YOU ARE COVERED UNDER OUR MEDICAL PLAN, YOU DO NOT NEED TO SHOP FOR INSURANCE IN THE MARKETPLACE.

THE HEALTH INSURANCE MARKETPLACE

You will see in the Notice (attached to this cover letter) that the Health Insurance Marketplace is a place to purchase medical plan coverage.

ASSISTANCE WITH THE COST OF PREMIUMS ON THE HEALTH INSURANCE MARKETPLACE

Individuals who apply for health insurance coverage through the Health Insurance Marketplace may qualify for financial assistance to help buy that coverage. Depending on their annual household income, certain individuals may be eligible for premium assistance (such as a premium tax credit or a cost-sharing subsidy) to help lower the amount they pay toward the monthly health insurance premiums. Individuals must apply for the premium assistance by completing an application form through the Health Insurance Marketplace.

A few helpful points:

- An individual is not eligible for premium assistance if he or she is offered the opportunity to enroll in employer-sponsored medical plan coverage that is affordable and meets a required minimum value. If an employee is offered the opportunity to enroll in employer-sponsored medical plan coverage and they decline that employer-sponsored coverage, premium assistance may not be available to help the employee buy coverage in the Marketplace.
- Premium assistance may not be available to an individual if they make too much money to qualify for it.
- The amount of the premium assistance declines as an individual's income rises. Where an individual has received more premium assistance than they may have been eligible to receive, an adjustment will be

coordinated with the IRS (meaning you may have to repay part of the premium assistance you received if your income increases during the year).

IF YOU CURRENTLY ARE NOT ELIGIBLE FOR COVERAGE UNDER OUR MEDICAL PLAN

We know that some employees are not eligible to enroll for coverage under our medical plan; however, we are required by law to distribute this Notice to all existing employees and all new employees. If you are not eligible to enroll for coverage under our medical plan means that you should take the opportunity to see if coverage under the Health Insurance Marketplace is a good option for you. And, because you are not offered employer-sponsored coverage, you have the chance to qualify for premium assistance to help you buy that coverage in the Marketplace.

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HEALTH INSURANCE MARKETPLACE OPTIONS AND YOUR HEALTH COVERAGE (Read Below. No Action is Required on your Part)

To: Current & New Employees

PART A: GENERAL INFORMATION

Health care law requires that this letter be sent to you. Under the Patient Protection and Affordable Care Act (known as "PPACA" or the "health care law"), you can buy health insurance through the Health Insurance Marketplace ("Marketplace"). This Notice provides basic information about the Marketplace and health coverage offered through your employment.

Note: IF YOU HAVE COVERAGE UNDER THE IBEW/WESTERN UTILITIES HEALTH AND WELFARE TRUST FUND, NO ACTION IS REQUIRED ON YOUR PART. THE PLAN HAS SUFFICIENT BENEFIT LEVELS AND COVERAGE TO MEET THE HEALTH CARE LAW'S MINIMUM COVERAGE REQUIREMENTS. Thus, if you continue to accept health coverage through the Plan you will not have to take any action concerning the 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 in your geographic area.

Can I Save Money on my Health Insurance Premiums in the Marketplace?

You may qualify to save money and lower your monthly premium and other out-of-pocket costs, but only if you do not have coverage through the IBEW/Western Utilities Health and Welfare Trust Fund ("Plan"). **Because the Plan offers affordable health coverage and provides more than minimum value, no further action is required.** The savings that you're eligible for depends on your household income. You may also be eligible for a tax credit that lowers your costs.

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 is considered affordable for you and meets certain minimum value standards, you will not be eligible for a tax credit, or advance payment of the tax credit, for your Marketplace coverage and may wish to enroll in your employer-offered health plan. However, you may be eligible for a tax credit, and advance payments of the credit that lowers your monthly premium, or a reduction in certain cost-sharing, if your employer does not

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offer coverage to you at all or does not offer coverage that is considered affordable for you or meet minimum value standards. If your share of the premium cost of all plans offered to you through your employer is more than 9.12%¹ of your annual household income, or if the coverage through your employer does not meet the "minimum value" standard set by the Affordable Care Act, you may be eligible for a tax credit, and advance payment of the credit, if you do not enroll in the employment-based health coverage. For family members of the employee, coverage is considered affordable if the employee's cost of premiums for the lowest-cost plan that would cover all family members does not exceed 9.12% of the employee's household income.¹²

Note: If you purchase a health plan through the Marketplace instead of accepting health coverage offered through your employer, then you may lose access to whatever the employer contributes to the employer-offered coverage. Also, this employer contribution, as well as your employee contribution to employer-offered coverage, is generally excluded from income for federal and state income tax purposes. Your payments for coverage through the Marketplace are made on an after-tax basis. In addition, note that if the health coverage offered through your employer does not meet the affordability or minimum value standards, but you accept that coverage anyway, you will not be eligible for a tax credit. You should consider all of these factors in determining whether to purchase a health plan through the Marketplace.

When Can I Enroll in Health Insurance Coverage through the Marketplace?

You can enroll in a Marketplace health insurance plan during the annual Marketplace Open Enrollment Period. Open Enrollment varies by state but generally starts November 1 and continues through at least December 15.

Outside the annual Open Enrollment Period, you can sign up for health insurance if you qualify for a Special Enrollment Period. In general, you qualify for a Special Enrollment Period if you've had certain qualifying life events, such as getting married, having a baby, adopting a child, or losing eligibility for other health coverage. Depending on your Special Enrollment Period type, you may have 60 days before or 60 days following the qualifying life event to enroll in a Marketplace plan.

There is also a Marketplace Special Enrollment Period for individuals and their families who lose eligibility for Medicaid or Children's Health Insurance Program (CHIP) coverage on or after March 31, 2023, through July 31, 2024. Since the onset of the nationwide COVID-19 public health emergency, state Medicaid and CHIP agencies generally have not terminated the enrollment of any Medicaid or CHIP beneficiary who was enrolled on or after March 18, 2020, through March 31, 2023. As state Medicaid and CHIP agencies resume regular eligibility and enrollment practices, many individuals may no longer be eligible for Medicaid or CHIP coverage starting as early as March 31, 2023. The U.S. Department of Health and Human Services **is offering a temporary Marketplace Special Enrollment period to allow these individuals to enroll in Marketplace coverage.**

Marketplace-eligible individuals who live in states served by HealthCare.gov and either - submit a new

¹ Indexed annually; see <https://www.irs.gov/pub/irs-drop/rp-22-34.pdf> for 2023.

² An employer-offered or other employment-based 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. For purposes of eligibility for the premium tax credit, to meet the "minimum value standard," the health plan must also provide substantial coverage of both inpatient hospital services and physician services.

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application or update an existing application on HealthCare.gov between March 31, 2023 and July 31, 2024, and attest to a termination date of Medicaid or CHIP coverage within the same time period, are eligible for a 60-day Special Enrollment Period. **That means that if you lose Medicaid or CHIP coverage between March 31, 2023, and July 31, 2024, you may be able to enroll in Marketplace coverage within 60 days of when you lost Medicaid or CHIP coverage.** In addition, if you or your family members are enrolled in Medicaid or CHIP coverage, it is important to make sure that your contact is up to date to make sure you get any information about changes to your eligibility. To learn more, visit HealthCare.gov or call the Marketplace Call Center at 1-800-318-2596. TTY users can call 1-855-889-4325.

What about Alternatives to Marketplace Health Insurance Coverage?

If you or your family are eligible for coverage in an employer-offered health plan (such as an employer-sponsored health plan), you or your family may also be eligible for a Special Enrollment Period to enroll in that health plan in certain circumstances, including if you or your dependents were enrolled in Medicaid or CHIP coverage and lost that coverage. Generally, you have 60 days after the loss of Medicaid or CHIP coverage to enroll in an employment-based health plan, but if you and your family lost eligibility for Medicaid or CHIP coverage between March 31, 2023 and July 10, 2023, you can request this special enrollment in the employment-based health plan through September 8, 2023. Confirm the deadline with your employer or your employment-based health plan.

Alternatively, you can enroll in Medicaid or CHIP coverage at any time by filling out an application through the Marketplace or applying directly through your state Medicaid agency. Visit <https://www.healthcare.gov/medicaid-chip/getting-medicaid-chip/> for more details.

How Can I Get More Information?

For more information about your coverage offered through your employer, please check your health plan's summary plan description or contact BeneSys Administrators, 7180 Koll Center Parkway, Suite 200, Pleasanton, CA 94566 phone: 925-398-7050; email: staff@ibew-west.com.

The Marketplace can help you evaluate your coverage options, including your eligibility for coverage through the Marketplace and its cost. Please visit [HealthCare.gov](https://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 IBEW/WESTERN UTILITIES HEALTH & WELFARE TRUST FUND

This section contains information about any health coverage offered by the IBEW/Western Utilities Health and Welfare Trust Fund. 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:	PacifiCorp
4. Employer Identification Number:	93-0246090
5. Employer Address:	825 NE Multnomah Street Suite 1800

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6. Employer Phone Number:	(925) 398-7050 (Administrative Office)
7. City:	Portland
8. State:	Oregon
9. ZIP code	97232
10. Who can I contact about employee health coverage?	BeneSys Administrators 7180 Koll Center Parkway, Suite 200, Pleasanton, CA 94566; phone 925-398-7050
12. Email Address	staff@ibew-west.com

Basic Information about health coverage offered by your employer through the Plan.

- ✓ **This Plan offers health coverage to** Active Regular Full-time bargaining unit employees scheduled to work 40 or more hours per week; and active Part-time bargaining unit employees scheduled to work 20 or more hours per week. See Summary Plan Description for complete details.
- ✓ **This Plan offers health coverage to Eligible Dependents.** This includes: Spouse, natural children, step-children, adopted children, children placed for adoption, foster children, certain children under legal guardianship: see Summary Plan Description for complete definitions.
- ✓ **This Plan's 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.

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