PART A: General Information
As part of the requirements of the Patient Protection and Affordable Care Act ("PPACA"), the University of Illinois, as your employer, is required to provide you with information relating to the Health Insurance Marketplace ("Marketplace"). This notice serves to provide basic information about the Marketplace and how it may relate to coverage that is offered to eligible employees through the State Employees’ Group Insurance Program.

What is the Health Insurance Marketplace?
The Marketplace is designed to help individuals find health insurance that meets their needs and fits their budget. Through the Marketplace, Illinois residents will be able to compare and evaluate quality and affordable private health insurance options, apply tax credits directly, and receive enrollment support. The annual open enrollment period for health insurance coverage through the Marketplace occurs in the fall. Go to https://www.healthcare.gov/quick-guide/dates-and-deadlines/ to view the dates.

Does Having State of Illinois Employee Health Coverage Affect Eligibility for Premium Savings through the Marketplace?
Coverage provided by the health plans offered through the State Employees’ Group Insurance Program ("SEGIP") is considered to meet PPACA’s minimum value standard and is intended to be affordable based on employee wages. Accordingly, if you are eligible to participate in SEGIP, you will generally not be eligible for a tax credit through the Marketplace. However, if you are not eligible to participate in SEGIP, or if the cost of member-only coverage through SEGIP is more than 9.5% of your household income for the year, you may be eligible for a new tax credit that lowers your monthly premium if you purchase a qualified health plan through the Marketplace.

Note: If you are eligible for SEGIP and choose to purchase a health plan through the Marketplace instead of enrolling in a SEGIP plan, you will lose SEGIP vision and dental coverage, and also lose any employer contribution to SEGIP coverage. In addition, while both the employer contribution and your employee contribution to SEGIP coverage are typically excluded from income for Federal and State income tax purposes, your payments for coverage through the Marketplace will be made on an after-tax basis.

How Can I Get More Information?
You can evaluate your coverage options, including your eligibility for coverage through the Marketplace and the cost of such coverage, by visiting HealthCare.gov. This website also includes an online application for coverage and contact information for the Marketplace. The State of Illinois health care reform website has additional information regarding the Marketplace, including the In-Person Counselor Program, at the following address: https://getcovered.illinois.gov

If you need additional information regarding the coverage offered through SEGIP, please visit www.BenefitsChoice.il.gov or contact your University Payroll and Benefits office.
PART B: Information about State of Illinois Employee Health Coverage

If you decide to complete an application for coverage in the Marketplace, you will be asked to provide this information, which is numbered to correspond to the Marketplace application.

<table>
<thead>
<tr>
<th>3. Employer name</th>
<th>4. Employer Identification Number (EIN)</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Board of Trustees of the University of Illinois</td>
<td>37-6000511</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5. Employer address</th>
<th>6. Employer phone number</th>
</tr>
</thead>
<tbody>
<tr>
<td>352 Henry Administration Bldg., 506 S. Wright St.</td>
<td>217-333-1920</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>7. City</th>
<th>8. State</th>
<th>9. ZIP code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urbana</td>
<td>Illinois</td>
<td>61801</td>
</tr>
</tbody>
</table>

10. Who can we contact about employee health coverage at this job?

University Payroll & Benefits
177 Henry Administration Bldg., 506 S. Wright St.

11. Phone number (if different from above)

Urbana: 217-265-6363
Chicago: 312-996-7200
Springfield: 217-206-7144

12. Email address

benefits@uillinois.edu

Here is some basic information about health coverage offered by the University of Illinois through the State Employees’ Group Insurance Program (“SEGIP”):

- As your employer, we offer a health plan to:
  - ☐ All employees.
  - ☑ Some employees.
    
    The State Employees Group Insurance Act of 1971 sets forth the eligibility requirements for coverage under SEGIP. For further information concerning eligibility requirements, see the State of Illinois Employees’ Benefits Handbook at www.benefitschoice.il.gov.

- With respect to dependents:
  - ☐ We do not offer coverage.
  - ☑ We do offer coverage.
    
    An employee may, at additional cost, choose to provide coverage for eligible dependents. Eligible dependents of the employee include:
    - Spouse (does not include ex-spouses, common-law spouses, persons not legally married or the new spouse of a survivor).
    - Same-Sex Domestic Partner (enrolled prior to June 1, 2011).
    - Civil Union Partner (enrolled on or after June 1, 2011).
    - Child from birth to age 26, including
      - Natural child
      - Adopted child
      - Stepchild or child of a civil union partner
      - Child for whom the employee has permanent legal guardianship
      - Adjudicated child for whom a U.S. court decree has established an employee’s financial responsibility for the child’s medical, dental or other healthcare
    - Adult Veteran Child. Unmarried adult child age 26 up to, but not including, age 30, an Illinois resident and has served as a member of the active or reserve components of any of the branches of the U.S. Armed Forces and received a release or discharge other than a dishonorable discharge.
    - Disabled. Child age 26 or older who is continuously disabled from a cause originating prior to age 26. In addition, for tax years in which the child is age 27 or above, eligible to be claimed as a dependent for income tax purposes by the employee.
• Certain other eligible dependents.

For more information regarding dependent coverage, see the *State of Illinois Employees’ Benefits Handbook* at [www.benefitschoice.il.gov](http://www.benefitschoice.il.gov).

☑ 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 coverage is intended 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. For example, if you are newly employed mid-year, or if you have other income losses, you may still qualify for a premium discount through the Marketplace.

If you decide to shop for coverage in the Marketplace, [HealthCare.gov](http://HealthCare.gov) will guide you through the process. Following is the employer information that you will need to have available when you visit [HealthCare.gov](http://HealthCare.gov).

**The information below corresponds to the Marketplace Employer Coverage Tool.**

| 13. Is the employee currently eligible for coverage offered by this employer, or will the employee be eligible in the next 3 months? |

The State Employees Group Insurance Act of 1971 sets forth the eligibility requirements for coverage under SEGIP. For further information concerning eligibility requirements, see the *State of Illinois Employees’ Benefits Handbook* at [www.benefitschoice.il.gov](http://www.benefitschoice.il.gov).

For an employee who meets the eligibility criteria, there is no waiting period for SEGIP. Employees scheduled to begin employment on a day in which they are scheduled to work every available day in the pay period have an effective date of the first day of that pay period. Employees scheduled to begin employment on a day in which they are not scheduled to work every available day in the pay period have an effective date of the first day they physically begin work. Dependent coverage is effective the same day as the employee’s coverage.

Each new employee’s hiring department will inform the employee whether or not his or her position is eligible for SEGIP coverage. Any employee who is unsure whether he or she is eligible for SEGIP coverage should contact his or her supervisor or hiring manager.

| 14. Does the employer offer a health plan that meets the minimum value standard*? |

Yes, to employees who are eligible for health insurance coverage under the State Employees Group Insurance Act of 1971.
15. For the lowest-cost plan that meets the minimum value standard* offered only to the employee (not including dependent coverage):

a. How much would the employee have to pay in premiums for this plan? See table below.
b. How often? Most eligible employees pay premium contributions through payroll deduction either monthly or biweekly depending on their payroll schedule.

Under SEGIP, the premium amount is based on a contribution paid by the employee and a contribution paid by the State of Illinois. Full-time employees, those who work 100% of a normal work period, pay a premium based on their salary as set forth in the table below. Part-time employees, those who work 50-99% of a normal work period, pay an employee contribution based on their salary as set forth in the following table, and also pay a portion of the State contribution, based upon the percentage of the employee’s appointment.

<table>
<thead>
<tr>
<th>Employee Annual Salary</th>
<th>Lowest Cost Option Employee Contribution (Managed Care Plan)</th>
</tr>
</thead>
<tbody>
<tr>
<td>$30,200 or less</td>
<td>$74.00</td>
</tr>
<tr>
<td>$30,201 - $45,600</td>
<td>$93.00</td>
</tr>
<tr>
<td>$45,601 - $60,700</td>
<td>$112.00</td>
</tr>
<tr>
<td>$60,701 - $75,900</td>
<td>$129.00</td>
</tr>
<tr>
<td>$75,901 - $100,000</td>
<td>$148.00</td>
</tr>
<tr>
<td>$100,001 - $125,000</td>
<td>$201.00</td>
</tr>
<tr>
<td>$125,001 and above</td>
<td>$233.00</td>
</tr>
</tbody>
</table>

*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 (Section 36B(c)(2)(C)(ii) of the Internal Revenue Code of 1986).