



Oracle **US** Benefits

Health Insurance Marketplace

2019 Coverage Options and Your Health Coverage

The Health Insurance Marketplace (“Marketplace”) is another way to purchase health insurance for you and your family. To assist you as you evaluate options for you and your family, this notice provides some basic information about the Marketplace and employment based health coverage offered by Oracle.

Contents

PART A: General Information.....	3
What Is The Health Insurance Marketplace?	3
Can I Save Money On My Health Insurance Premiums In The Marketplace?	3
Does Employer Health Coverage Affect Eligibility For Premium Savings Through The Marketplace?	3
How Can I Get More Information?	3
PART B: Information Regarding Health Coverage Offered by Oracle	4
Marketplace Employer Coverage Tool Information	5





Health Insurance Marketplace Coverage Options and Your Health Coverage

PART A: GENERAL INFORMATION

When key parts of the health care law took effect in 2014, the Health Insurance Marketplace (“Marketplace”) was introduced as another way to purchase health insurance for you and your family. To assist you as you evaluate options for you and your family, this notice provides some basic information about the 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 tax credit that lowers your monthly premium right away. Open enrollment for health insurance coverage through the Marketplace is scheduled November 1, 2018 – December 15, 2018 for coverage starting as early as January 1, 2019. Visit <https://www.healthcare.gov/quick-guide/dates-and-deadlines/> for more information about the Marketplace enrollment period.

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 does not meet certain standards. The savings on your premium that you are 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.¹

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. In addition, 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?

For more information about your coverage offered by your employer, please check the [Summary Plan Description](#) and/or other plan information available on the [Oracle US Benefits Website – www.oraclebenefits.com](#). You may also contact Oracle US Benefits at benefits_us@oracle.com.

The Marketplace can also help you evaluate your coverage options, including your eligibility for coverage through the Marketplace and its cost. Please visit HealthCare.gov for more information, including an online application for health insurance coverage and contact information for a Health Insurance Marketplace in your area.

¹ 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 REGARDING HEALTH COVERAGE OFFERED BY ORACLE

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: Oracle America, Inc.	4. Employer Identification Number (EIN): 94-2805249
5. Employer Address: 500 Oracle Parkway	6. Employer Phone Number: 650-506-9800
7. City: Redwood Shores	8. State: California 9. Zip Code: 94065
10: Who can we contact about employee health coverage at this job: Email Oracle US Benefits at Benefits_us@oracle.com	

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:

- Regular full-time employees on the U.S. payroll scheduled to work 30 or more hours per week;
- Regular part-time employees on the U.S. payroll scheduled to work 20-29 hours per week; and
- Inpatriates (inpatriate is defined to only include foreign nationals) who will be residing in the U.S. for three or more months and working full-time at an Oracle America, Inc. office

With respect to dependents:

We do offer coverage. Eligible dependents are:

- Your spouse recognized under federal law (unless legally separated, divorced, or a “common law spouse”);
- Your qualified opposite and same-sex domestic partner;
- You or your qualified domestic partner’s children through the end of the month of the child’s 26th birthday;
- You or your qualified domestic partner’s children age 26 or over who are permanently and totally disabled prior to attaining age 26. Such children must (1) be unable to engage in any substantial gainful activity by reason of a physical handicap or mental impairment, (2) live with you for more than one-half of the year, and (3) not provide over one-half of their own support for the year;
- Dependent children to the maximum age of 26 for whom you or your qualified domestic partner have been assigned legal guardianship. Such children must have the same residence as you, and you must provide over one-half of the child’s support for the year; and
- You or your qualified domestic partner’s children who are “alternate recipients” under a qualified medical child support order.

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, HealthCare.gov will guide you through the process. Here is the employer information you will enter when you visit HealthCare.gov to find out if you can get a tax credit to lower your monthly premiums.

Marketplace Employer Coverage Tool Information

The information below corresponds to the Marketplace Employer Coverage Tool.

<p>13. Is the employee currently eligible for coverage offered by this employer, or will the employee be eligible in the next 3 months? <input checked="" type="checkbox"/> Yes</p> <p>If the employee meets the eligibility criteria set forth above, the employee is eligible on the employee's date of hire.</p>
<p>13a. If the employee is not eligible today, including as a result of a waiting or probationary period, when is the employee eligible for coverage?</p> <p><input checked="" type="checkbox"/> When the employee meets the eligibility criteria set forth above.</p>
<p><input type="checkbox"/> No (STOP and return this form to employee)</p>

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

- Yes (Go to question 15)
- No (STOP and return 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?

The employee would pay **\$15** twice a month for employee only coverage. Amount cited is effective January 1, 2018 – December 31, 2019.

b. How often?					
Weekly	Every 2 Weeks	Twice a Month <input checked="" type="checkbox"/>	Monthly	Quarterly	Yearly

If the plan year will end soon and you know that the health plans offered will change, go to question 16. If you do not know, STOP and return form to employee.

16. What change will the employer make for the new plan year?

- Employer won't offer health coverage
- Employer will start offering health coverage to employees or change the premium for the lowest-cost plan available only to the employee that meets the minimum value standard. (Premium should reflect the discount for wellness programs. See question 15.)

a. How much would the employee have to pay in premiums for this plan?

b. How often?					
Weekly	Every 2 Weeks	Twice a Month	Monthly	Quarterly	Yearly