

Dear Policyholder,

We are writing to inform you that you may keep this coverage for your employees for the upcoming plan year or may select another small employer health insurance plan.

How Do I Keep the Current Plan?

To keep your current plan, please contact us or pay the next premium due as provided in the enclosed payment invoice.

As you think about your options, there are some things to keep in mind. If you choose to renew the current policy, it will NOT provide your employees all of the rights and protections of the Affordable Care Act (ACA). These include one or more of the following new protections of the Public Health Service Act (PHS Act) that were added by the ACA. As a result, your employee's coverage:

- May not meet standards for fair health insurance premiums, so it can charge more based on factors such as gender or a pre-existing condition, and it doesn't have to comply with rules limiting the ability to charge older people more than younger people (section 2701).
- May not meet standards for guaranteed availability, so it can exclude customers based on factors such as a pre-existing condition (section 2702).
- May not meet standards for guaranteed renewability (section 2703).
- May not meet standards related to pre-existing conditions for adults, so it can exclude coverage for treatment of an adult's pre-existing condition (section 2704).
- May not meet standards related to discrimination based on health status (section 2705).
- May not meet standards for non-discrimination in providers (section 2706).
- May not cover essential health benefits or limit annual out-of-pocket spending, so it might not cover benefits such as prescription drugs and might have unlimited cost-sharing (section 2707).
- May not meet standards for participation in clinical trials, so you might not have coverage for services related to a clinical trial for a serious or life-threatening disease (section 2709).

Your current plan does include the following new required benefits:

- Elimination of annual limits on the dollar value of essential health benefits within Idaho.
- No pre-existing condition exclusions.
- If applicable, the waiting period for coverage will not exceed 90 days from first eligibility.

How Do I Choose A Different Small Group Plan?

You have options and rights for getting quality, affordable health insurance for your employees. If you have 50 or fewer full-time equivalent employees, you may enroll your employees in a small employer plan through Idaho's health insurance exchange, Your Health Idaho (YHI). All plans offered through YHI's Small Business Options Program (SHOP) meet certain standards to guarantee health care security and no small employer who is qualified to purchase coverage can be turned away or charged more because of employees' health conditions. YHI allows you to choose a SHOP plan that fits your budget and health care needs. You may also qualify for a small business tax credit if you enroll through the SHOP.

You can also get new small employer health insurance outside YHI. Most new plans guarantee certain protections, such as the ability to buy a plan even if you or your employees have a pre-existing condition. However, the small business tax credit is not available outside YHI's SHOP.

You should review your options as soon as possible, since you have to buy your coverage within a limited time period to preserve your employees' consumer protections.

How Can I Learn More?

To learn more about YHI and how to enroll in a small employer health plan through the SHOP, visit yourhealthidaho.org or call 1-855-YH-Idaho (855-944-3246).

You can also visit the Idaho Department of Insurance website at doi.idaho.gov for more information on health insurance options for small employers.

If you have questions, please contact us or your insurance agent or broker.