

ACA Exchange Notice Requirement— Template Form Helpful Hints for Local Churches and SPUs September 2013

The following is a guide to assist local churches and other salary-paying units (SPUs) in the Wisconsin Annual Conference with providing the required Exchange Notice under the Affordable Care Act (ACA) to their employees. This Notice describes the new Health Insurance Marketplaces (previously called “Exchanges”). The Department of Labor (DOL) has released two template forms for employers to rely upon in fulfilling this requirement:

- **Notice for employers that offer a health plan to some or all of its employees:** available online at www.dol.gov/ebsa/pdf/FLSAwithplans.pdf.
 - An MS Word version is available at www.dol.gov/ebsa/FLSAwithplans.doc.
 - A Spanish version is available at www.dol.gov/ebsa/pdf/FLSAwithplanssp.pdf.
- **Notice for employers that *do not* offer a health plan:** available online at www.dol.gov/ebsa/pdf/FLSAwithoutplans.pdf.
 - An MS Word version is available at www.dol.gov/ebsa/FLSAwithoutplans.doc.
 - A Spanish version is available at www.dol.gov/ebsa/pdf/FLSAwithoutplanssp.pdf.

Churches that provide coverage to clergy and not lay employees should use the form for employers that offer coverage to some employees. Employers that offer coverage must use the “Notice for employers that offer a health plan” (see above)—even if all employees decline that coverage. Employers should modify the template with certain information as described below regarding the employer and, if applicable, its health plan.

Completing the Notice Template Form—Employers *Not Offering* Health Coverage

Part B: Information About Health Coverage Offered by Your Employer

- Box 3: Enter the full name of the local church or other SPU.
- Box 4: Enter the employer identification number (EIN) or taxpayer identification number (TIN) of the local church/SPU. (This is the nine-digit employer identification number that is reported on the IRS Form W-2s that the church prepares for its employees.) If the local church shares an EIN or TIN with another employer, such as a day care center, the local church may need to coordinate distribution of this Notice with that affiliated employer.
- Box 5: Enter the street address of the local church/SPU.
- Box 6: Enter the main telephone number of the local church/SPU.
- Boxes 7, 8, 9: Enter the city, state and ZIP code of the local church/SPU.
- Box 10: Enter the name of the officer or employee at the local church/SPU whom the Health Insurance Marketplace (the “Exchange”) should contact with questions. (For local churches that may not have anyone readily available to address benefits questions, you may enter Steve Zekoff’s name and contact information.)
- Box 11: Enter the telephone number (the direct line) for the person or position named in question 10.
- Box 12: Enter the e-mail address for the person or position named in question 10.

Completing the Notice Template Form—Employers *Offering* Health Coverage to Some Employees (including clergypersons under appointment)

Part B: Information About Health Coverage Offered by Your Employer

- Boxes 3-12: Follow the instructions in part I. above.

Completing the section after question 12:

Answer the questions about the health plan offered by the local church/SPU. For example, indicate which employees are eligible for the plan. This may include only the appointed clergyperson or may also include lay employees. For those in the Wisconsin Conference Group Health Plan, it includes only employees who work $\frac{3}{4}$ time or above.

Indicate whether or not the plan offers coverage to dependents of the eligible employees. If coverage is offered to dependents, describe eligible dependents (i.e., spouse, children) in the space provided. For those in the Wisconsin Conference Group Health Plan, eligible dependents include both spouses and children.

Last box on the page 2: Check this box if the health plan offered meets the “minimum value” requirement under the ACA. This means that the plan is expected to cover at least 60% of the cost of claims (in other words, the plan has a 60% actuarial value). For those in the Wisconsin Conference Group Health Plan, check the box indicating the plan provides minimum value. If your church or SPU offers coverage through an insurance company, you should check with the issuer about minimum value.

Questions 13 through 16 are optional. The local church is not required to complete them before giving the Notice to employees. The Notice does not need to be customized to each employee. However questions 13-16 correspond to questions that employees must answer in their application for coverage through the Marketplace. Therefore, completing questions 13-16 on this Notice may help your employees understand and obtain coverage through the Marketplace where applicable. Suggested answers are below:

13: Indicate whether the employee is currently eligible for the local church’s/SPU’s health plan, or whether a waiting period applies. For those in the Wisconsin Conference Group Health Plan, no waiting period applies.

14: Indicate whether the plan provides minimum value (see above for more about minimum value).

15: Indicate the premium that the employee has to pay for coverage (this is the portion of the underlying premium paid to the annual conference or insurance company that the employee himself or herself is responsible for paying), and the applicable frequency (monthly, weekly, etc.) that the premium is paid. For clergy in the Wisconsin Conference Group Health Plan, this amount depends on whether and how much of the pastor’s portion of the premium the church pays, but would be no more than \$143.00 per month for 2013 (the pastor’s share of the CDHP plan, which is the lowest cost plan offered).

16: If the local church/SPU intends to cease offering coverage soon or will make changes to the plan or the premiums soon, indicate so here. For clergy in the Wisconsin Conference Group Health Plan, if already known, you should indicate the amount of the 2014 premium that the clergyperson is expected to pay; it should be no more than \$198.00 per month (the pastor’s share of the CDHP plan, which is the lowest cost plan offered).

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