

TriNet Notice

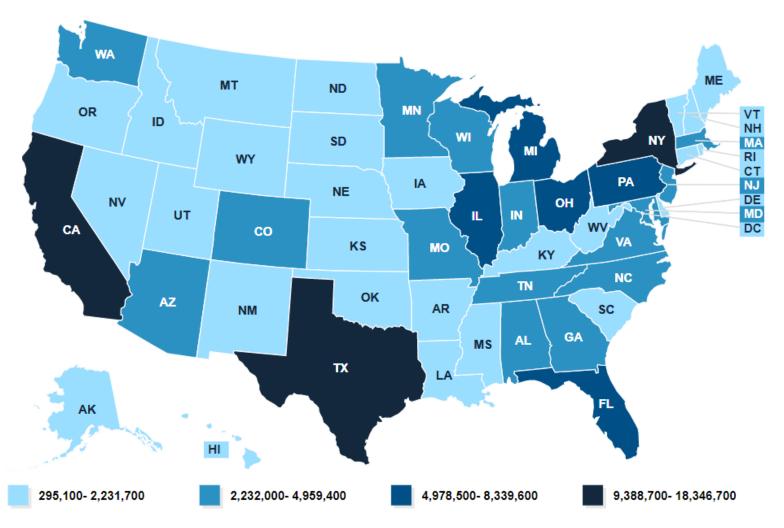
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The Healthcare Coverage Gap

- 156 million Americans

 (around 49 percent of the country's total population),
 receive employer-sponsored health insurance. *
- 67% is the average share of premiums paid by employer**





^{*}Source: Kaiser Family Foundation

^{**}Source: Bureau of Labor Statistics - September 2019

The Healthcare Coverage Gap

- 3.3 million workers in the US filed for unemployment in the week of 3/16 an all-time record
 - CA daily unemployment filings up 3,000%
 - NYC daily unemployment filings up 1,000%
- Unemployment rate rises from 3.5% in February to 5.5% in March*



Loss of Coverage Triggers







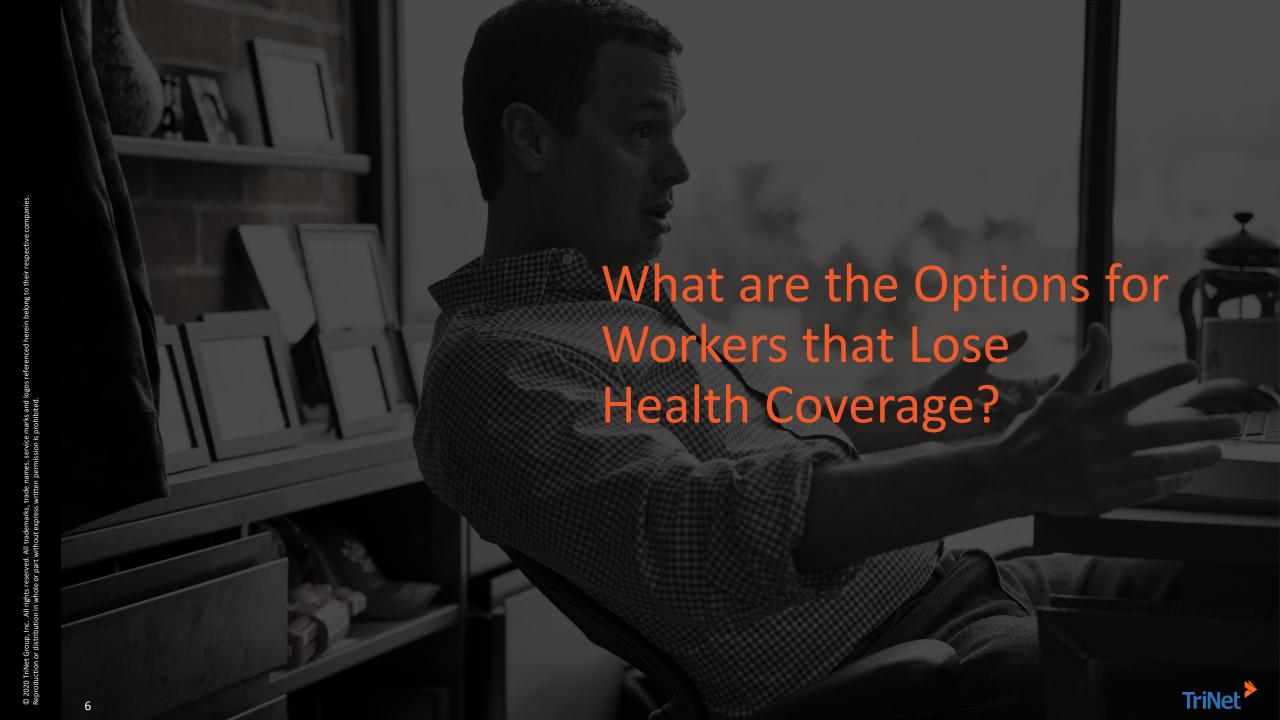


Loss of job

Company closure

Reduction in hours

Furlough



COBRA

Job Termination, Furlough or Business Closure

- Plan Coverage: employer sponsored group health plans for companies that employ at least 20 employees (sum of FT & PT)
- Eligibility: job termination (except for misconduct) and reduction of hours for employees enrolled in group health plan
- Duration: typically up to 18 months (eligible for longer if qualifying event occurs)
- Cost to worker: average yearly family premium of \$20,000*
- Most states have mini-COBRA options
- Unlike in 2008, as of the date of this presentation Congress has not approved any COBRA subsidies



ACA Marketplace Plans

- Availability: Federal (healthcare.gov) or state-based marketplaces
- Plan Coverage:
 - Meets "minimum value coverage requirements"
 - Many plans have high deductibles
 - Often have a narrow range of providers
 - Can't deny coverage based on health status
- Eligibility: Workers with "qualifying life event" and not eligible for job-based benefits or Medicaid
 - 11 states have created a special enrollment period for the uninsured. Federal exchanges have not
- Duration: Indefinite
- Cost: Varies by state, plan and premium subsidy (based on Federal Poverty Level)



ACA Subsidies

Who is eligible?

- Have a household income from one to four times the Federal Poverty Level (FPL)
- Individual: \$12,490 (100% FPL) to \$49,960 (400% FPL)
- Family: \$25,750 (100% FPL) to \$103,000 (400% FPL)
- Not have access to affordable coverage through an employer (including a family member's employer)
- Not eligible for coverage through Medicare, Medicaid, the Children's Health Insurance Program (CHIP), or other forms of public assistance
- Have U.S. citizenship or proof of legal residency*



Short-term Medical

- Plan Coverage
 - Temporary medical insurance plan that provides coverage to protect from unexpected medical bills
 - Provides insurance stability not permanent insurance product
 - Pre-existing conditions may not be covered
 - COVID-19 testing is included at no cost to insured.
- Eligibility: Anyone residing in states that permit (38 states; not CA, NY)
- Duration: One month to as long as 36 months depending on state
- Cost: Average monthly premium of \$107 (single) and \$258 (family)*



Telemedicine

- What it is: Not insurance. Remote medical care facilitated by phone or application
 - Real-time virtual engagement between patient and provider
 - Remote monitoring of patient's health
- Eligibility: All
 - Included with certain insurance coverage, dependent on carrier and state (34 states require coverage)*
- Cost: often included with insurance coverage; stand-alone starts at less than \$10 per month



Option Comparison

	COBRA	ACA Marketplace	Short-term Medical	Tele-Med	Medicaid
Cost	Expensive	Varies (income based)	Affordable	Inexpensive	Inexpensive
Subsidies	None (unless employer subsidy)	Yes; income-based	None	Covered by most health plans	Yes; heavy subsidy
Eligibility	Qualifying event	Qualifying event	Everyone	Everyone	Limited, Based on FPL
Scope	Same coverage as existing plan	Meets minimum value requirements	No pre-existing conditions	Virtual	Comprehensive but limited providers



Considerations When Electing Coverage

- Deductible
- Providers participating in the insurance carrier network
- Anticipated length of coverage loss
- Eligibility for premium subsidies
- Cost
- Pre-existing conditions
- Anticipated medical events (e.g., pregnancy)
- COVID-19 coverage



Impact of Legislation

- ACA plan open enrollment; anyone uninsured can apply (11 states, including CA, NY)
 - NY: Essential Care Plan
- All plans cover COVID testing and initial visit at zero cost
- Expansion of telemedicine options; HSA can cover costs
- Waiving early-withdrawal penalties from retirement accounts for COVID-19 related healthcare
- No subsidy for COBRA. Possible inclusion in future COVID related legislation



TriNet Resources

COBRA Administration

- Prepare and send notices (within 14 days of loss of coverage)
- Employee has 60 days to make election
- Employee has 45 days from election to make payment

Telemedicine

- Stand-alone virtual care discount program
- Base option \$9.95 per month. Allows access to talk to a doctor virtually for a \$0 copay, plus discounts on items such as prescriptions, dental and vision services.
- Enhanced option \$15.95 per month also includes access to mental health services for a \$0 copay, and additional discounts.
- info.newbenefits.com/trinet or call 877.240.3850

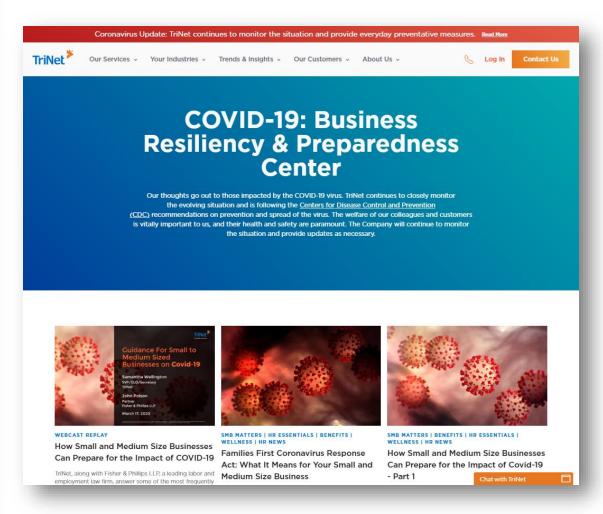


TriNet Resources

- Short-term Medical
 - Pivot Health, available in 38 states
 - For states that do not allow short-term medical (including CA and NY), Pivot Health will recommend your state's ACA Marketplace or other plans such as Essential Care in NY.
 - trinet.pivothealth.com or call 763.645.0171



Webcast Replay



Webcast replay will be available at:

trinet.com/covid-19



Thank you.

