



AFFORDABLE CARE ACT AND YOUR STRS OHIO HEALTH CARE PLAN

The Patient Protection and Affordable Care Act (ACA) requires all individuals to enroll in a health care plan that offers minimum essential coverage to avoid an individual mandate penalty fee. All STRS Ohio retiree medical plans are designed to satisfy the ACA minimum essential coverage requirements currently in effect. Participants in the STRS Ohio retiree health care program should not be subject to the individual mandate penalty fee.

Under current law, health plans offered through an individual, small group or state exchange product must pay at least 60% of the total allowed claims costs and provide coverage in 10 health care categories, known as essential health benefits. STRS Ohio retiree health care plans are intended to provide coverage under all 10 categories of essential health benefits and are expected to exceed the requirement to pay at least 60% of the cost of the plan's total allowed claims.

Each state is required to establish a state exchange — or health care marketplace. At present, Ohio has chosen to have the federal government operate the state's exchange.

Although each STRS Ohio retiree health care plan is designed with the intent to satisfy the ACA coverage requirements at a good value to participants, it may be advantageous for some individuals — especially those non-Medicare retirees with low years of service or participants in the retiree health care program who receive no premium subsidy from STRS Ohio — to consider coverage under a state exchange. However, under current law, individuals enrolled in Medicare are not eligible to participate in the exchanges.

This overview is for informational purposes only and does not constitute legal advice. It is not intended as a substitute for any federal law or state statute. If you require more information on the ACA, contact your professional advisor or visit www.healthcare.gov.