Health Insurance Marketplace Coverage Options and Your Health Coverage

PART A: General Information

Since key parts of the health care law took effect in 2014, there is an additional way to buy health insurance: the Health Insurance Marketplace. 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 periods for health insurance coverage through the federal Marketplace and state-run Marketplaces that use the federal enrollment website (HealthCare.gov) generally begin November 1 each year for coverage that will start on or after the first day of the new calendar year. Open enrollment dates may vary if you reside in a state with a state-run Marketplace that does not use HealthCare.gov for enrollment. Outside of the open enrollment periods, you can only enroll in or change coverage if you qualify for a Special Enrollment Period as a result of certain life events.

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 doesn't meet certain standards. The savings on your premium that you're 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) in 2025 is more than 9.02% of your household income, 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, you may lose the employer contribution (if any) to the employer-offered coverage. Also, this employer contribution - as well as your 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 your summary plan description or contact Human Resources.

The Marketplace can 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 About Health Coverage Offered by Your Employer

This section contains information about any health coverage offered by your employer. If you 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. This information is effective as of 1/1/2025 and is subject to change.

3. Employer name			4. Employer Identification Number (EIN)	
Nant Media Holdings LLC dba California Times			82-4402852	
5. Employer address (the Marketplace will send notices to this address)			6. Employer phone number	
2300 East Imperial Highway			213-237-2165	
7. City		8. S	State	9. ZIP code
El Segundo		CA		90245
10. Who can we contact about employee health coverage at this job? Human Resources				
11. Phone number (if different from above)	12. Email address			
213-237-2165	CATimesBenefits@caltimes.com			

Here is some basic information about health coverage offered by this employer:

- As your employer, employees that we offer a health plan to are: First of the Month following your date of hire or first of the month following the change to benefit eligible status
- With respect to dependents, health plan-eligible dependents are: legally married spouse or domestic partner, A natural child, stepchild, adopted child, legal guardianship, children of your spouse or domestic partner up to age 26; • A child over the age of 26 that has a severe physical or mental condition that makes them indefinitely dependent on you for primary support.
- 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's the employer information you'll enter when you visit HealthCare.gov to find out if you can get a tax credit to lower your monthly premiums.

The information below corresponds to the Marketplace Employer Coverage Tool.

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

Yes (Go to question 15)

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.

15a. How much would the employee have to pay in premiums for this plan? **\$37.05**

15b. How often? Weekly Every 2 weeks Twice a month 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 don't know, STOP.

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

- 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 discount for wellness programs. See question 15.)

16a. How much would the employee have to pay in premiums for this plan? \$

16b. How often? Weekly Every 2 weeks Twice a month Monthly Quarterly Yearly

^{*} 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.