

PART B: Information About Health Coverage Offered by Your Employer

3. Employer name USA HealthCare Management, LLC		4. Employer Identification Number (EIN) 38-3816255	
5. Employer address 307 North University Blvd		6. Employer phone number 251-460-6133	
7. City Mobile		8. State AL	9. ZIP code 36688
10. Who can we contact about employee health coverage at this job? Tina Stalmach, Senior Director, Human Resources, Benefits, ER/EEO			
11. Phone number (if different from above)		12. Email address hrmaincampus@southalabama.edu	

Employees of the USA HealthCare Management, LLC, who earn 20 hours of service per week or 87 hours of service per month on average

The employee's spouse as recognized by the state of Alabama.
The employee's child under the age of 26.
The employee's disabled child, provided certain conditions are satisfied (contact HR for details).

[HealthCare.gov](https://www.healthcare.gov)

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13.

(Continue)

13a. If the employee is not eligible today, including as a result of a waiting or probationary period, when is the employee eligible for coverage? _____ (mm/dd/yyyy) (Continue)
(STOP and return this form to employee)

14. Does the employer offer a health plan that meets the minimum value standard*?
Yes (Go to question 15) No (STOP and return form) (t.2 0 0 1 242a 1 2118-8.993 (l)67 rg/GS1.137 0.2 0 0 98 (tu)8.05 (e)3.993


