PART B: Information About Health Coverage Offered by Your Employer. This section contains information about any health coverage offered by your employer. If you decide to 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.

Employer name:	Employer Identification Number (EIN)
Saint Louis University	43-0654872
Employer address:	

The information below corresponds to the Marketplace Employer Coverage Tool. Completing this section is optional for employers, but will help ensure employees understand their coverage choices.