Continuing Education: 3 New ACSRs

×

Mallory Arsenault

Three members of the Allen Insurance and Financial staff recently achieved the designation of Accredited Customer Service Representative in Commercial Lines from the Independent Insurance Agents & Brokers of America.

They are: Stephanie Griffin, Special Business Unit Account Assistant; Mallory Arsenault, Business Insurance Account Manager Assistant and Kathi Jones, manager of accounting, HR and IT.

×

Stephanie Griffin

The ACSR designation program was developed to recognize the contribution made to each customer by the service they are provided through independent insurance agencies such as Allen Insurance and Financial.



Kathi Jones, ACSRIndependent Insurance Agents & Brokers of America is the nation's oldest and largest national association of independent insurance agents & brokers with more than 300,000 members. Find them online at independentagent.com.

Jo-Ann Neal Now Licensed for Medicare

Jo-Ann Neal of Allen Insurance and Financial has obtained her license to present Medicare insurance options to Allen clients.



Jo-Ann Neal

"Medicare coverage and insurance policies that help fill the gaps of Medicare can be complex and confusing," said Dan Wyman, manager of Allen's insured benefits division. "Jo-Ann and Anna Moorman of our office can help our clients pick the best plans as they approach Medicare eligibility."

Jo-Ann works with both individuals and groups on their insurance benefits policies, including health, dental, life, and disability. She joined the company in 2013, earning her license to sell health and life insurance in Maine through Allen's inhouse education program.

Forms 1095A, 1095B, 1095C - What They Mean for You

Beginning this tax filing year, there are several new documents

being issued from various sources to provide information to complete individual tax filings.

These notices are intended to provide the Internal Revenue Service with proof that individuals had health insurance coverage, the months during the year the health insurance coverage existed, and for full-time employees of companies with 50 or more employees, proof that affordable and minimum value coverage was offered.

The form 1095A is from the "Health Insurance Marketplace." This is provided to an individual who enrolled in coverage through the Marketplace (healthcare.gov), which family members were covered on the health insurance plan and what months the insurance coverage was in place. This form is intended to provide the IRS with proof that the individual and any family members had coverage that satisfies the individual shared responsibility provision of the Affordable Care Act.

The form 1095B is from the health insurance provider. This most often will be the health insurance company itself. They will provide this notice to individuals they cover, with information about who was covered and when. Again, this is intended to provide proof that the individual and any family members had coverage that satisfies the individual shared responsibility provision of the Affordable Care Act.

The form 1095C is from the employer with more than 50 full-time employees or equivalents. This provides information about the health plan that is offered (or not), and that it meets the minimum value as determined by the affordable care act. It also certifies that the health insurance coverage offered is "affordable." This affordability percentage will change each year, but for 2015, the rule was that the coverage could not cost more than 9.56% of a full-time individual's annual salary. This illustrates the individual's eligibility for a premium tax credit if they had purchased coverage through the Health Insurance Marketplace.

It is possible that an individual will receive these notices from several sources. If the individual had more than one job in 2015, or was covered by more than one insurance company, there will be multiples. If family members were enrolled on separate contracts, that will require multiple notices as well.

Please feel free to call us for assistance with understanding these forms or for a more in-depth, detailed explanation. Call 207-236-4311.

Community Health Options January Payment Deadline Extended

We have had a number of calls from Community Health Options members about their January invoices and when payments are due. The deadline for January payments has been extended to Thursday, Jan. 7 at 6 p.m.

Also, we've been told that the Community Health Options service center is experiencing high call volumes resulting in extended wait times for callers. If you would like to make a payment by phone, you may want to use their automated payment system by calling 877-254-3508.

For debit card payments, please have your member identification number and debit card account number, security code and expiration date ready. For payments by check, please have your member identification number, bank routing number and account number ready.

Health Insurance and Filing Your Taxes

By Jan. 31, 2016, the Health Insurance Marketplaces will be mailing Form 1095-A to all individuals who enrolled in Marketplace health insurance coverage. Form 1095-A acts as proof of insurance, and is sent to individuals who had Marketplace coverage to allow them to:

- Claim Premium Tax Credits
- Reconcile the Credit on their returns with Advanced Premium Tax Credit Payments
- File accurate tax returns in general, as this information can be used to help determine exemptions or penalties under the individual mandate

Purpose of Form

Form 1095-A is not a form that you have to complete; it is simply used to report certain information to the IRS about individuals who enroll in a qualified health plan through the Health Insurance Marketplace.

If you received a premium tax credit to help pay for your Marketplace coverage, you'll use the information on Form 1095-A to fill out your Premium Tax Credit Form 8962. This form will allow you to claim additional tax credits or to repay amounts if you got too much assistance based on your income. Most people who received tax credits will need to fill out Form 8962, since even a slight change in income will change the amount of any tax credit that they are owed.

Who Has to File the 1095-A Form?

The Health Insurance Marketplace (state, federal, regional or

subsidiary) must file Form 1095-A. Individuals don't have to file the form; they will use the form furnished to help them complete other forms, including Form 8962.

If you enrolled in health insurance through the Marketplace and received a premium tax credit, you'll use the information on Form 1095-A to fill out your Premium Tax Credit Form 8962.

Can I File Form 8962 Without a Form 1095-A?

If you received tax credits, then you'll want to wait until you have your Form 1095-A. It would be very difficult to correctly fill out the Premium Tax Credit form without the information from your 1095-A. If you are running up against the deadline, you can file for an extension on your taxes and request another form from the Marketplace. Don't forget: you can also view your form online after it has been filed.

What if I Had More than One Provider?

If you had more than one type of health insurance throughout the year, then follow this rule of thumb: for 2015, you'll get a Form 1095-A from every provider that you had a Health Insurance Marketplace plan with. If you don't have your Form 1095-B or Form 1095-C from your employer or coverage outside of the Marketplace, then use the honor system to report those types of coverage.

For 2016 and beyond, you'll get forms from anyone who provided you with coverage by early February.

Community Health Options:

Preferred Regional Pharmacy Pilot Ends With Mixed Results

Throughout 2015 Community Health Options (formerly Maine Community Health Options) has provided its Members with \$0 copayments on Tier 1 medications at Hannaford Pharmacies, Community Pharmacies, and The Pharmacy at Maine Medical Center. This pilot program will be ending Dec. 31, 2015, and will not continue into the 2016 plan year.

The pilot was designed to be of limited duration and to determine if \$0 copays and pharmacist involvement could move utilization from higher cost generics to lower cost generics.

The regionally-based pharmacies chosen for this pilot were those identified as best positioned to move Members to higher generic dispensing rates (GDR), having a local presence, and having the ability to help move Members from higher cost generics to lower cost generics.

While CHO has seen positive changes and improvements occur, the costs of foregone copayments are not made up by similar gains in the shift to lower cost generics. Given the results of the program as well as the cost constraints in 2016, CHO is moving to end this pilot at the close of the year.

CHO's Chronic Illness Support Program (CISP) continues to waive co-payments on certain plans for Tier 1 drugs specific to the proper management of five major chronic conditions on certain plans throughout our pharmacy network. Community Health Options Members do not need to apply for that program, but simply need to have their prescriptions filled. Adjustments to those claims occur at the point of sale and are automatic. The 2016 HDHP Preventive Drug list will still be available for some HSA-compatible group plans.

For more information, a PDF from Community Health Options.

Community Health Options Freezes Enrollment

Community Health Options (formerly Maine Community Health Options) will stop taking new enrollees for its individual plans on Dec. 26 through the federal marketplace and Dec. 15 for those enrolling directly with the insurer. Harvard Pilgrim and Anthem continue to offer policies through the end of open enrollment.

The deadline for open enrollment for 2016 is Jan. 31, 2016. Individuals who do not have health insurance or an exemption are subject to a penalty via their income tax filing. In 2016, the penalty is generally \$695 per adult or 2.5 percent of income, whichever is higher.

The CHO announcement does not affect current policyholders or new applicants for group coverage. CHO says it made this decision to contain costs.

If you have questions, please feel free to call our insured benefits division. 207-236-4311

6 Best Practices to Protect Your Confidential Information

Presented by Allen Insurance and Financial Although there is a vast amount of technology available that is designed to safeguard your devices and personal information,

that information is still vulnerable to cyber criminals and identity thieves. In fact, security breaches are not always due to a weakness in technology control. Sometimes, they are the result of the action or inaction of the user—you! Therefore, you are one of the best lines of defense against cyber crime.

October was National Cyber Security Awareness Month. It's still the perfect time to implement the following information security best practices to do your part in keeping your personal information safe and secure.

1) Build strong passwords

It's important to create strong passwords for all of your online accounts. But what exactly does this mean? A strong password:

- Contains both uppercase and lowercase characters, as well as digits and punctuation
- Is at least eight characters long
- Is not a word in any language, slang, dialect, or jargon
- Is not based on personal information, names of family members, and so on

A good rule of thumb is that passwords should be hard to guess but easy to remember.

2) Use multifactor authentication

A user ID and strong password alone are not sufficient protections for securing web accounts. Multifactor authentication—one of the simplest and most effective ways to secure your data—adds an extra layer of protection. With multifactor authentication, users must provide two forms of identification in order to log in to a site.

Here's how it works: After a user enters a user ID and password, the website will send a passcode to the user's mobile device. He or she must then enter this code on the site, ensuring that only that individual can sign into the account.

3) Be suspicious of unsolicited e-mail

Be wary of any e-mails that convey a sense of doom and gloom (e.g., threatening to close an account) or that claim immediate

action is required. Grammar mistakes, spelling errors, and generic salutations are also red flags. Perhaps most important, scrutinize those e-mails that contain links and attachments from sources you don't know (and, unfortunately, even from sources you do know). It's quite easy for cyber criminals to craft a legitimate-looking e-mail in the hopes that you'll be fooled into thinking it came from a company you do business with or from a friend. To protect yourself from this scenario, don't hesitate to verify: Call the source directly to authenticate from whom it was sent it; if it came from a company you know, go to the company website directly to log in.

4) Protect your mobile devices

Outdated software can leave your mobile devices open to security vulnerabilities. By keeping your apps and mobile operating system software up to date, you can mitigate the risk of a cyber criminal exploiting a hole in your system. Most devices simplify this process for you by offering automatic update options for apps, as well as notification systems that let you know as soon as an operating system update is available. It's your job to take care of these updates immediately!

Another mobile device necessity is to do your homework, making sure the apps you're downloading are from a reputable company (e.g., by checking their ratings and comments). Be sure you know what the app does and what information it's going to access on your mobile device.

5) Engage in safe web browsing

Keeping your browser up to date is critical in preventing malware. Just like apps and your operating system, an out-of-date browser can open up security gaps that cyber criminals will take advantage of. Be alert to pop-ups and advertisements: Both could be spyware used to plant tracking cookies on your machine, which can steal your information, direct you to bogus phishing sites, and pummel you with pop-ups.

When transmitting personally identifiable or payment

information, you can ensure that you are on a secure site by checking for the "https://" before the "www.whateversite.com." When on public Wi-Fi networks, consider connecting through a personal virtual private network (VPN) and disable auto-connect; this way, your device won't automatically connect to found public networks.

6) Stay vigilant

Although advanced technology today is certainly a safeguard and buffer to keep cyber criminals at bay, it's critical to remember that you are in the first line of defense to keeping your data safe and secure.

For more tips and tricks to stay safe online, visit the National Cyber Security Alliance at www.staysafeonline.org.

###

Allen Insurance and Financial offers securities and advisory services as Investment Adviser Representatives of Commonwealth Financial Network®, Member FINRA/SIPC, a Registered Investment Adviser.

A Glossary of Terms for Health Insurance Open Enrollment

Open enrollment is the time of year when consumers can make changes to their benefits selections. Unfamiliar terms can make this process confusing. We invite everyone to download this handy reference sheet to help in the navigation of benefits options.

For example:

Coinsurance:

The amount or percentage that you pay for certain covered health care services under your health plan. This is typically the amount paid after a deductible is met, and can vary based on the plan design.

Deductible:

A specific dollar amount you pay out of pocket before benefits are available through a health plan. Under some plans, the deductible is waived for certain services.

Click here for a PDF with many more definitions. (PDF to print
and save, new window)

[button name="Visit Our Affordable Care Act webpage" url="http://www.alleninsuranceandfinancial.com/insurance-service s/health-life/health-insurance/affordable-care-act/"]

Individual Health Insurance Open Enrollment Starts Nov. 1

Starting Nov. 1, consumers can fill out or update a Health Insurance Marketplace application to enroll, renew, or change plans.

The assistance of an independent insurance advisor, such as those at Allen Insurance and Financial, doesn't cost the consumer anything additional. And working with Allen Insurance and Financial means that when it comes to claims issues or questions during the plan year, an Allen advisor will be available to answer those questions.

According to Dan Wyman, manager of the insured benefits division at Allen Insurance and Financial, an independent advisor can

help explain basic health insurance terminology and can help a consumer calculate the impact of out-of-pocket costs, premiums and deductibles. Wyman notes that it is this kind of assistance that can make an important difference in helping to determine the level of health insurance plan a consumer can afford, with or without a subsidy from the government.

Said Wyman: "Our staff specializes in health insurance. We can explain the differences in plans, right down to the smallest of details. We work with businesses, families and individuals every day to help them pick the insurance plans that best serve their needs."

Call 855-710-5700 or start with information and an online form at AllenIF.com/healthcare.