

# **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.

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## **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.

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## **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 co-payments 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.](#)

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## **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

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## **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](http://www.staysafeonline.org).

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# 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-services/health-life/health-insurance/affordable-care-act/"]



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# 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](http://AllenIF.com/healthcare).

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# Krissy Campbell Earns CIC Designation



Krissy  
Campbell,  
CIC, ACSR

The designation of Certified Insurance Counselor has been conferred upon Krissy Campbell, director of the special business unit at Allen Insurance and Financial.

Campbell earned the designation through a series of rigorous written exams focusing on all major fields of insurance, agency operations and insurance management. The professional dedication and commitment represented by this achievement sets the standard within the insurance industry.

As director of the special business unit, Campbell works with a wide variety of small businesses which make up the heart of the Maine economy.

“Krissy’s emphasis on professional development continues to set a great example for her colleagues and shows her deep commitment to making sure they receive her best possible insurance counseling,” said Mike Pierce, agency president.

Campbell, of Warren, joined Allen Insurance and Financial in 2005. She is based in Allen Insurance and Financial’s Elm Street office in Camden. [adsense ban](#)

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# Maine Community Health Options Policy Holders to Receive Rebates

Community Health Options has announced that it will be issuing more than \$3.3 million in Member premium rebates to individuals and families who were policyholders in 2014. This rebate is a result of solid financial performance by Community Health Options, the increased support of the federal transitional reinsurance program and the medical loss ratio (MLR) requirement, which is part of the Affordable Care Act (ACA).

Rebate amounts vary according to total premium paid by Members in the individual market in 2014. On the whole, the rebates for the 2014 plan year amount to 2.1% of total premiums paid for the year (less taxes and fees) and the average rebate across all Members is approximately \$87. Rebates will be paid by Sept. 30, 2015.

"We are pleased to provide this return of premium back to Members," said Kevin Lewis, CEO of Community Health Options. "The rebate is a measure of our success that allows us to pass through this substantial portion of the federal reinsurance program payments to directly benefit Community Health Options Members. We initially set our rates to allow Members to benefit from the reinsurance program support in the form of lower premiums. The increased aid of the reinsurance program has allowed us to provide the additional rebate."

The federal reinsurance program is one of the mechanisms of the ACA designed to hold down premium pricing in the face of unknown risk due to the widespread entry into coverage of the previously

uninsured. In simplest terms, the reinsurance program helps reduce exposure for qualified health plans against large and difficult-to-predict Member claims.

While the initial terms of the temporary reinsurance program were set in time for 2014 rate setting, the program has been modified twice since then, each time making it more generous.

The most recent change was introduced in June 2015 and increased the amount of coverage for qualified health plans from 80% to 100% for claims exposure between \$45,000 and \$250,000.

This boost in reinsurance funds to all qualified health plan issuers altered the medical loss ratios (MLR) by effectively removing the amount allocated to medical claims costs from the equation. This resulted in the unexpected but positive outcome of returning funds back to Members.

The ACA created premium stabilization programs intended to protect consumers during the initial years of the health care reform law's implementation. The MLR is intended to ensure that 80% of premiums collected are used for medical claims and initiatives that improve the quality of care and no more than 20% of premiums collected are spent on administrative costs.

The MLR is influenced by three inter-related premium stabilization programs commonly referred to as the "3 R's" or Reinsurance, Risk Corridors, and Risk Adjustment.

For more information on the 3Rs, visit: [https://www.cms.gov/CCIIO/Resources/Fact-Sheets-and-FAQs/index.html#Premium Stabilization Programs](https://www.cms.gov/CCIIO/Resources/Fact-Sheets-and-FAQs/index.html#Premium%20Stabilization%20Programs).

About Community Health Options – Community Health Options (Health Options) is a non-profit, Member-led health plan providing comprehensive, Member-focused health insurance benefits for individuals, families, and businesses. Health Options is a Consumer Operated and Oriented Plan (CO-OP) licensed in Maine and New Hampshire that is dedicated to providing affordable, high-quality health benefits through productive partnerships with Members, businesses, and a broad

network of providers. For more information about Health Options, visit the website: [www.HealthOptions.org](http://www.HealthOptions.org)

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# September is National Preparedness Month

Floods are the most common and widespread of all natural disasters. Most communities in the United States can experience some degree of flooding after spring rains, heavy thunderstorms or winter snow thaws. Most floods develop slowly over a period of days. Flash floods, however, are like walls of water that develop in a matter of minutes. Flash floods can be caused by intense storms or a dam failure.

Your organization should have a written plan for responding to floods and flash floods. [Use this PDF](#) from our partners at The Hanover Insurance Group for guidance.