

# Health Matters

by Nancy Glicksman



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A NEWSLETTER CONCERNING COVERAGE AND BENEFITS

Second Quarter 2015

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## How do you feel about the Affordable Care Act (ACA)???

According to an April poll posted on The Henry J. Kaiser Foundation, views on the ACA are holding steady, 43% favorable and 42% unfavorable. Please check out this website <http://kff.org/health-reform> for a wealth of information on health care reform. There is information on the ACA tax credits, premium changes in the ACA marketplace as well as articles on understanding health insurance.

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## “When can I enroll in health insurance ?” (for individuals and families who are NOT MEDICARE eligible)

Open enrollment for 2016 is reportedly between November 1, 2015 until January 31, 2016. In order for the plan to be effective January 1st, you would need to enroll by December 15th. This is the time you can change your plan from last years' plans. You should be receiving information on any plan and rate changes by early October. For those of you who have an individual plan that was grandfathered or grandmothered (such as Keystone HMO, Complete Care, or UPMC Individual Advantage EPO plans) , this would be the time to compare your present plan with the ACA plans. If you want to make a change, please let me know so I can discuss the different options with you. Outside of open enrollment, the only time you can enroll in health insurance is when you qualify for a special enrollment period. The following information was taken from the Federal Healthcare website at [www.healthcare.gov](http://www.healthcare.gov)

## Life events that may qualify you for a Special Enrollment Period include the following:

- Getting married
- Having a baby
- Adopting a child or placing a child for adoption or foster care
- Losing other health coverage

### *Examples of losing coverage*

- Losing job-based coverage for any reason, including resigning, getting laid off, or getting fired
- Losing coverage through a divorce
- COBRA coverage ending (but not cancelling it yourself before it expires)
- Aging off a parent's plan when you turn 26
- Losing eligibility for Medicaid or the Children's Health Insurance Program (CHIP) Note: Losing coverage that doesn't qualify as minimum essential coverage doesn't qualify you for a Special Enrollment Period.

- Moving to a new residence
- Gaining citizenship or lawful presence in the U. S.
- Gaining or continuing status as a member of an Indian tribe or an Alaska Native shareholder. Members of federally recognized Indian tribes and Alaska native shareholders can sign up for or change plans once per month throughout the year.

- Leaving incarceration
- For people already enrolled in Marketplace coverage: Having a change in income or household status that affects eligibility for premium tax credits or cost-sharing reduction

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## **FORM 1095 -A**

### ***What is Form 1095-A***

If you or anyone in your household enrolled in a health plan through the Health Insurance Marketplace in 2014, you should've received Form 1095-A — Health Insurance Marketplace Statement. It came from the Marketplace, not the IRS. Keep Form 1095-A with other important tax information, like your W-2 forms and other tax records. You'll use information from the form to fill out your 2014 federal income tax return.

### ***What's on Form 1095-A?***

Information about anyone in your family who enrolled in a health plan through the Health Insurance Marketplace for 2014.

Information about the monthly premiums you paid to your health plan. The amount of any advance payments of the premium tax credit that were paid to your health plan in 2014. This is the financial assistance that lowered what you paid for your monthly premiums.

The premium for the second lowest cost Silver plan (SLCSP) that applied to you for 2014. This amount is used as a "benchmark" to set your premium tax credit.

Any questions regarding this form, please contact the Federal Marketplace at 800-318-2596.

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## **ATTENTION: MEDICARE CLIENTS**

Remember, if you are on Medicare, you are not eligible for the Affordable Care Act policies. The open enrollment for Medicare is from October 15th through December 7th of every

year. Around the end of September, you will receive information from your insurance carrier regarding plan changes and premium changes for the upcoming year. For those of you who have a Medicare Advantage plan or a stand-alone Prescription Drug Plan, you will receive an Annual Notice of Change (ANOC), which will show you a side to side comparison of 2015 and 2016 plan designs, in terms of premium, copays, etc. If you like the new plan design, please let me know, but the plan will automatically renew as is. If you want to make a change to a different carrier or plan design, you would need to do it between that period of time, and the new plan will go into effect on January 1, 2016.

For those of you with Medigap plans, your plan design will remain the same from year to year. The rates will increase on an annual basis.

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## **PLEASE GIVE ME YOUR FEEDBACK**

If there are any topics or areas of interest you would like addressed in upcoming newsletters, please let me know. Also, I would love to get your feelings about the Affordable Care Act. If you are willing to share that information, please email it to me at [www.bluepeakinsurance.com](http://www.bluepeakinsurance.com). Let me know if it is alright for me to share your thoughts on my website and/or in upcoming newsletters.

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with all of your *Health Matters***

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