



Agent Bulletin

Allied National - The Small Group Benefit Experts

February 2024

Self-Service Site

Employers Home Page

Member Resources

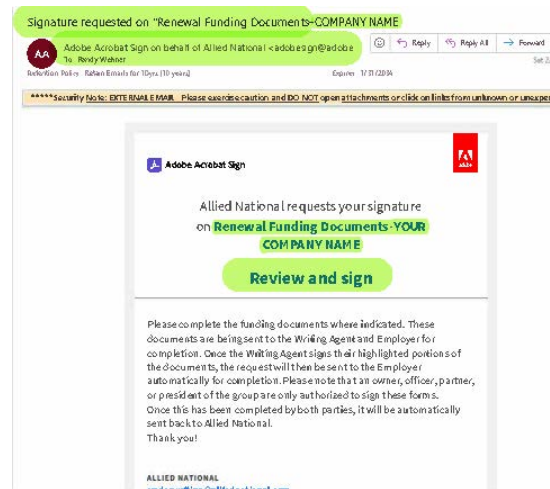


What to Know This Month

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How to Secure a Smooth a Renewal Process for Your Clients

The health plan renewal processes can seem overwhelming, especially for your groups not in the benefits industry. There is so much spam and harmful emails in the world today that it's hard for your groups to know who or what to trust. That's why it is imperative that you, as their agent, help them to navigate the renewal process and make sure all documents are signed. We believe the more you and your agents educate your groups about the process and what to expect, the easier the renewal will be. The following steps will help to make the renewal process go smoothly.



Group Health Plan Renewal Kit will be sent to agents first to review then a couple days later they will be emailed to your clients. This will contain all of the information and rates for your clients' upcoming renewal. To clarify, agents will need to complete

the “Employer Participation Statement” and need to be sure to complete and sign the page that says, “Benefit Plan Description.” Please make sure to follow up with your clients to make sure these documents were received, and they get signed and returned to you or emailed to Allied National Underwriting Department at underwriting@alliednational.com. Upon receiving the signed employer participation statement and benefit plan description the renewal funding documents package will be emailed to the agent first to sign using Adobe Acrobat Sign Email (a secure digital platform to sign secure documents).

Renewal Funding Documents Package will be emailed to agents first and once you have signed it will go to the employer as an email from Adobe Acrobat Sign Email. This package will come from Adobe Acrobat Sign on behalf of Allied National. The name of the renewing company will be in the subject line. **This step is being missed by a large amount of employers**, and that’s why we need your help in following up with your employer authorized signer to assure them this is an actual email and not spam and it needs to be signed immediately. The agent only has to sign one document while the employer has three places to sign. Agents and employers need to:

1. Click the “Review and sign” at the top of the email. Click example of email on the upper right.
2. Click to agree to the Adobe “Terms of Use” before you can continue.
3. Click the Start button on the lower left corner.
4. Your signature is required on the Application for Excess Loss. When you click to sign it will bring up a saved signature from your computer, if you have one, or you will be prompted to create one. Then be sure to click on the “Click to Sign” button to complete the signature.
5. Continue to follow the prompts until all the documents have been signed. You should have three required signatures in addition you will need to add the date and location, city, at the time of signing. Once all the documents have been successfully signed, a pop-up window will appear that says, “You’re all set.”

After our underwriting department receives all the required signatures, they will complete the renewal process. If you have questions while renewing or haven’t received all these packages, please contact our Client Services at 800-825-7531.

1095 Paper Filings No Longer Allowed for ALES

New Internal Revenue Service (IRS) rules have effectively eliminated the ability to file by paper in 2024, which means most level-funded employers should ensure they have the ability to file their 1095 and 1094 Forms electronically.



Employers who have fewer than 10 employees may still file by paper, but those with 10 or more employees, or Applicable Large Employers (ALEs – employers with 50 or more employees) must file electronically.

What your employer clients need to do

In January, Allied National sent employers with under 50 employees the 1095-B forms for each employee who has been covered under their health plan during the 2023 plan year. This information must be filed with the IRS and a copy of the 1095-B given to each employee by March 1. The forms must be sent to the IRS by Feb. 28 if filing by paper (small companies only) and April 1 if filing electronically.

In addition, ALEs must furnish the Forms 1095-C to employees no later than March 1. ALEs also must file Form 1094-C, as well as copies of Form 1095-C, with the IRS electronically no later than April 1.

The IRS uses the information from the forms to determine whether employees were offered insurance.

Questions About Your Employer Groups Health Plans?

When your employer clients have questions about their health plan, we know you want to help them and give them the answers as quickly as possible. Here's where they can go to get the answers they need:



General Plan Information – We have a wealth of information and tips available to help employers and employees better understand their benefits. They should visit [Member Resources](#) and click on the links for their plan.

Plan Reports – Employers should visit their Self-Service Site at www.alliednational.com to review reports and access information on their coverage and benefits. If they have not registered their company for the site, they should follow these steps:

1. Assign an administrator from their office to handle the administrative side of their health plan. Have their administrator complete the authorization form: www.alliednational.biz/573.pdf.
2. Email this completed authorization form to underwriting@alliednational.com.
3. Register for the first time or login at: <https://portal.alliednational.com/wssLogin/faces/login>

Addition and Termination of employees – The best way for an employer to add new employees and terminate employees is to send an email to underwriting@alliednational.com. Check out this short video on Group Plan Additions and Terminations: <https://youtu.be/R5gohf7zuLM>.

Monthly Billing – Billing notices are mailed around the 15th of the month prior to the month due. They are due on the 1st of each month (with a 31-day grace period in which to pay). When employers are paying their billing:

1. They should make checks payable to Allied National and include the stub from

- the billing notice in the envelope provided.
2. Payments MUST be made with their company/business check. Personal checks cannot be accepted.
 3. They also can set up monthly automatic drafts against their company checking account by using the authorization form at: www.alliednational.biz/015.pdf. For PAYMENT OF BILLINGS ONLY, the address is: Allied National P. O. BOX 29188 Shawnee Mission, KS 66201-9188.

When They Want to Talk to a Human –Allied Client Service representatives are available Monday-Friday 8 a.m.-4:30 p.m. CST and are always happy to assist employers and members at our toll-free number: 800-825-7531.

Check Out This Amped Up Pivot Bonus

The Amped Up bonus January 15, 2024 through March 31, 2024.

Eligible Plans	Duration Requirements	Bonus Payout
Short-Term Medical	3x364 Days	\$200
	2x364 Days ¹	\$200
	364 Days ¹	\$100
	180 Days	\$75
Brilliant Dental™ Brilliant Dental™ / Vision	90 Days +	\$50
Latitude Supplemental	90 Days +	\$50

There is a baseline of 7 short-term medical applications with a duration of 364 days or more.² Once this baseline is met, the Amped Up bonus pays out back to the first submitted application.

¹ For Epic plans - Maximum duration of 330 days in South Carolina earns \$100 payout; 2x330 day plans eligible for \$200 bonus.

² 180 days in states where 364 day plans are not an option - IL, ID, MI, MT, NV.

³ Total monthly premium rate on short-term medical plans must exceed \$100 to qualify.



Telehealth Video Updated



Want an easy way to share information about our health plan's telehealth benefits with your employer clients? Share the https://www.youtube.com/watch?v=__MGQeYHqRo link to our telehealth video or click on the video above.

We updated our telehealth video to reflect the new procedures Funding Advantage Freedom Plan, PPO, Cost Saver or Vault Plan members should follow to be reimbursed for the entire cost of their telehealth visit for all eligible charges.

Members can choose any provider. They just need to send the receipt or invoice and information about the person receiving services to our Claims Department at P.O. Box 29186, Shawnee Mission, KS, 66201-9186.

Listen to the video or click on the button below for the informational flyer to learn more details about the steps employers need to take to get reimbursed.

[Telehealth Flyer](#)



New Blog: Why Employers Choose MEC

Minimum Essential Coverage Plans (MEC) are gaining attention from many employers as a way to help group plan sponsors satisfy the ACA Part A requirement to provide Minimum Essential Coverage at a very low cost. This cost is well below the potential penalty exposure.

Allied National recently wrote and posted a blog about MEC plans. MEC plans provide coverage for federally mandated preventive services at 100% of eligible charges with no copays, deductibles or annual or lifetime limits. They are popular amongst large employers who can't afford standard coverage plans.



To learn more, visit our blog to read this and other articles.

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