



# Agent Bulletin

*Allied National - The Small Group Benefit Experts  
for groups of two or more*

January 2024

Self-Service Site

Employers Home Page

Member Resources



## What to Know This Month

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## More Telehealth Options: New Reimbursement Procedures

If Funding Advantage members are used to using Cura as their primary telehealth provider, please note that they may now use any telehealth provider and be reimbursed for eligible costs.

The change took effect beginning Jan. 1, 2024. Members can contact providers like Sesame Care, but they also can still use Cura as long as they submit their receipts to Allied National.



To get reimbursed for their telehealth visit, they should provide the following information to [clientservices@alliednational.com](mailto:clientservices@alliednational.com):

- Receipt or invoice showing the service rendered and dollar amount paid for telehealth services. Full name of the person who received services as shown on the visit receipt.
- Member ID of the person who received services.
- Date of service of the telehealth visit.

Reimbursement is subject to plan benefits. If a member has an HSA plan,

reimbursement may be subject to their deductible.

Click on the button for more information or call Sales Support at 888-767-7133.

Telehealth Flyer

## Great Sales Opportunity for 2024 With MEC Plus Two Buy-Up Options

Allied National has options you can feel good about offering to your employer groups in 2024 with our Minimum Essential Coverage Plan (MEC) plus two buy-up options — MEC Plus and MEC Advantage.

These affordable plans vary from basic preventive coverage to preventive coverage with additional benefits featuring small copays:

- MEC: Preventive services; prescription drug discount
- MEC Plus: Preventive services; prescription drug discount; 1 primary care visit with no copay
- MEC Advantage: Preventive services; \$10 copay on generic drugs; 3 primary care visits with \$20 copay; 5 lab and x-ray services with \$50 copay; 1 diagnostic testing with \$200 copay

Don't wait! Start quoting these great plan options now to begin 2024 on the right foot with guaranteed issue solutions that are easy to sell and easy to install! You can personalize our flyer with your contact information to share with employers. Just click on the image below left for your marketing flyer.

You also can learn more about these plans by clicking on the image of the brochure below on the right. This brochure also can be personalized.



**Balance Health Care Costs With Allied MEC Plans**

**ALLIED NATIONAL**  
A 90 Degree Benefits Company

Offering essential benefits for an affordable price can be a challenge, but with the Allied MEC Plans (Minimum Essential Coverage) for small groups, maintaining the balance between benefits and costs is easy.

Allied MEC Plans are limited benefit plans designed to help small-group plan sponsors **satisfy the ACA employer mandate** by offering 100% coverage for preventive services with no copays, deductibles or annual or lifetime limits.

**Key Plan Benefits**

MEC \$43*	MEC Plus \$53*	MEC Advantage \$98*
<ul style="list-style-type: none"> <li>Preventive services covered at 100% with no copay</li> <li>Prescription drug discount</li> </ul>	<ul style="list-style-type: none"> <li>Preventive services covered at 100% with no copay</li> <li>Prescription drug discount</li> <li>1 primary care visit with no copay</li> </ul>	<ul style="list-style-type: none"> <li>Preventive services covered at 100% with no copay</li> <li>\$10 copay for generic drugs</li> <li>3 primary care visits with \$20 copay</li> <li>3 specialist and urgent care visits with \$50 copay</li> <li>5 lab and X-Ray services with \$50 copay</li> <li>1 diagnostic testing (CT, PET, MRI, scans) with \$200 copay</li> </ul>

Agent Name  
Agent Company  
Phone  
Email  
Address  
Website

*\*These rates are effective through March 2024.*

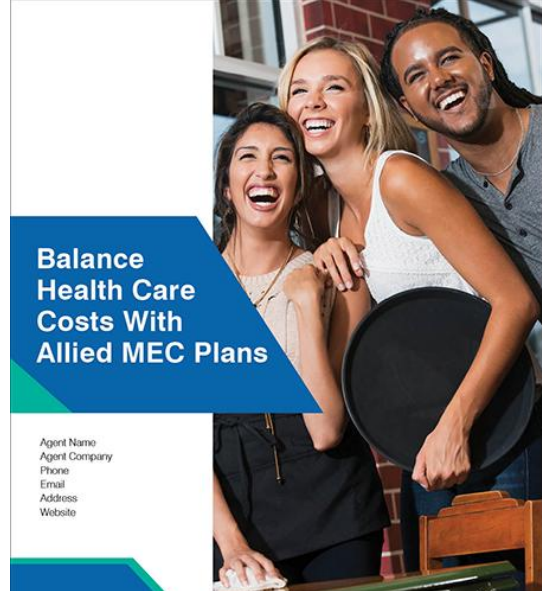
*An affordable plan doesn't mean employers have to sacrifice quality benefits.*

Find the balance with Allied MEC Plans and contact Allied Sales Support at [sales@alliednational.com](mailto:sales@alliednational.com) to learn more.

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This is an invitation to inquire about Allied plans. This is a limited description of the plans. See plan brochure and certificate of coverage for complete details.

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# Deadlines For 1095 Filings

All employers who self-fund major medical plans or who are Applicable Large Employers (ALE) must fill out and send 1095 forms to employees and the Internal Revenue Service (IRS). The IRS uses the information from the forms to determine whether employees were offered insurance. Under the Affordable Care Act, all applicable large employers (ALE: 50 or more employees) must offer coverage to all of their full-time employees.



For your employer groups with 2-49 employees, Allied National makes it easy. We send the employers 1095-B forms for each employee that was covered under the company's health plan during the 2023 plan year so that employers can share the information with each employee by March 1, 2024. Employers can also find this information on their Self-Service Site at [www.alliednational.com](http://www.alliednational.com).

For ALE (50 or more employees) employers, they will need to fill out 1095-C forms for their employees and the IRS. If they need additional information from Allied for completion of the forms, please contact Allied Client Services at 800-825-7531 and we can provide them with a spreadsheet of all their covered employees and dependents along with premiums paid for the 2023 calendar year.

Here are the deadlines for filing 1095 forms in 2024:

- Feb. 28, 2024 – Form 1095-B and 1095-C paper filings with the IRS
- March 1, 2024 – Form 1095-B and 1095-C to employees
- April 1, 2024 – Electronic filing with the IRS





## A New Hustle: The Exploding Gig Economy

In the second decade of the 2000s and post-COVID-19 pandemic, more and more individuals have increasingly turned to self-employment, freelance jobs, and contract employment opportunities,



contributing to a gig economy that experts say is now growing at a faster pace than the traditional employment market. According to Statista, a global data and business intelligence platform, gig economy to date boasts an estimated 73.3 million workers, and 44% of those workers make more at their gig jobs compared to employer work. Prevalent among millennials, Gen Z, and young boomers, gig employment offers workers the freedom to pursue their passions and interests, the flexibility to create their own schedules, and the ability to earn extra income as needed.

But for all of the perks of being a gig worker, there also can be some challenges. The rewards typically associated with traditional full-time employment, such as a steady paycheck and health insurance, often aren't readily available to gig workers. Instead, these individuals find it necessary to keep their fixed costs lower, save more, and creatively build safety nets for emergency savings.

Because gig workers don't receive or qualify for employer-sponsored health insurance, many individuals consider purchasing Affordable Care Act (ACA) coverage through the Health Insurance Marketplace – only to find that they earn too much to qualify for a financial subsidy, and premium costs are much higher than they can comfortably afford. But without health insurance coverage, even healthy individuals can run the risk of a financial catastrophe should a medical illness or injury occur.

That's why it's important for insurance brokers to keep cost-effective insurance alternatives top of mind for this expanding sector, such as short-term medical, which provides fast, flexible coverage for individuals who may need to adjust their insurance needs frequently, depending on their employment situation.

Pivot Health offers multiple short-term medical solutions for any type of gig worker. There are high-deductible, budget-friendly premium plans, lower deductible plans, plans with doctor office copays, and some plans with prescription drug coverage. No matter what the immediate need, Pivot Health's short-term medical plans can cover a gig worker for a minimum of 30 days, up to nearly three years, all in one 5-minute application, no matter the duration.

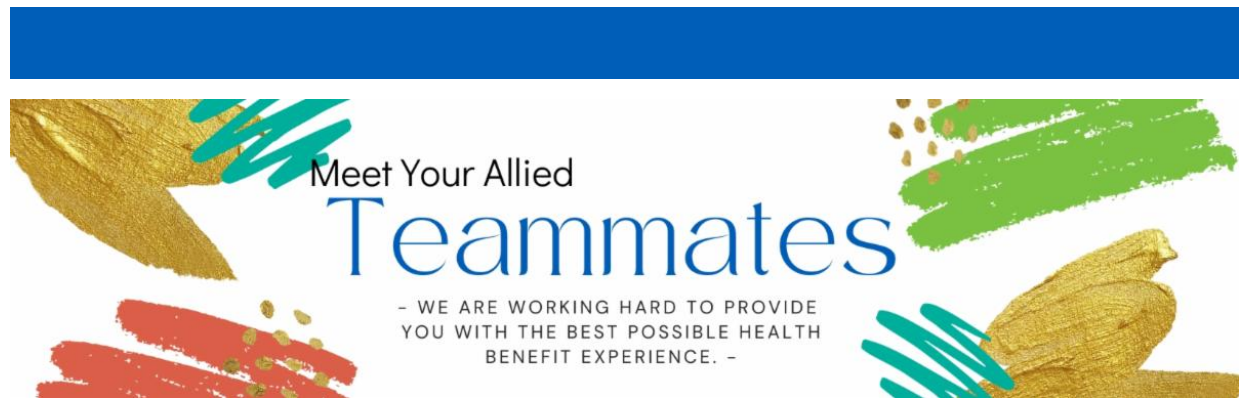
Consider your clients who might need a cost-effective insurance solution based on



their employment:

- They don't qualify for employer-sponsored insurance
- They make too much money to qualify for an ACA subsidy through the Health Insurance Marketplace
- They recently missed the annual open enrollment period and don't qualify for a special enrollment
- They are turning 26 and aging off their parents' insurance coverage

If your clients consist of young, independent contractors and freelancers, sharing-economy workers and older, established consultants, short-term medical could be the perfect fit for any individual who is ever-changing their professional status but needs stability on the healthcare front. **Contact your account executive for more information on which Pivot Health short-term medical products might be the best for your client base.**



## Get to Know Allied's Sheila Soffiotto

Sheila Soffiotto is our Health Care Management Supervisor and oversees our Allied HealthCare Assistant and Health Choices programs. Prior to joining Allied in June 2016, she worked as the Director of Case Management and Social Services for Overland Park Regional Medical Center.



### **Q. What does the Health Care Management Department do?**

A. Pre-notification and determination of standard of care for both inpatient and outpatient services for our members. We help providers with the initiation of Prior Authorization (PA) for high-cost drugs.

### **Q. What is Allied HealthCare Assistant?**

A. A program to help our members connect with enhanced benefits and specialized practice partners -- such as no out-of-pocket imaging (CT, MRI and PET scans) when scheduled by Allied and no out-of-pocket elective surgeries when scheduled by Allied through a preferred provider.

### **Q. What is the biggest misconception about Allied HealthCare Assistant?**

A. That it is an additional cost to the members – it's not.

### **Q. What is HealthChoices?**

A. A benefit option that is chosen by the employer that can save both the employee and the employer money if the member uses preferred providers and services. There are lower out-of-pocket costs for participation and there may be higher copays if the member does not participate.

**Q. What do you want people to know about HealthChoices?**

A. Participation really will save the member with out-of-pocket costs.

**Q. What is the best part of your job?**

A. Helping members access the care they need and helping them resolve issues to live their healthiest life.

**Q. What do you do for fun when you're not at work?**

Hiking, working in the yard and spending time with my family and friends.

HealthCare Assistant

HealthChoices

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Allied National | 4551 W 107th St, Suite 100, Overland Park, KS 66207

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