



NEWS

MARKETPLACE APPLICATION DEADLINE APPROACHING

Your clients risk losing their 2016 Advanced Premium Tax Credit (APTC) if they do not update their financial information on HealthCare.gov. Even if their financials remain unchanged, they must log on to review and update their Marketplace application by **December 15, 2015**.

CMS prepared a list that tells us who hasn't logged on to HealthCare.gov to update their financial information for 2016. We are notifying each of the members on the list and we strongly urge you to remind your clients when possible.



COMPLIANCE HOTLINE

HealthOne Alliance maintains an effective compliance program that not only meets legal standards, but also supports its operations. Should you have concerns, questions or simply wish to report an incident; please contact our Compliance Officer, Sabrina LeBeau at 706-624-4129.



PHARMACY VENDOR TRANSITIONING TO LUMICERA ON 12/1/15

Members currently obtaining certain specialty pharmacy medications through Diplomat Specialty Pharmacy were recently notified that effective December 1, 2015, our vendor will change to **Lumicera Health Services** (Navitus' special pharmacy partner). There are 122 members who will be affected by this change.

Lumicera offers personalized support, refill reminders and delivery service free of charge to members. Lumicera staff can also give advice on dealing with potential side-effects and more.



METAL PLANS RENEWAL DEADLINE QUICKLY APPROACHING

Members recently received 2016 renewal letters for both on- and off-Marketplace plans. The letters listed the new 2016 premium; the estimated 2016 APTC amount based on their 2015 APTC; and summarized any changes to their coverage. Members who were crosswalked from a 2015 plan to a new, similar 2016 plan also received a renewal letter indicating the new plan and specific changes to their benefits.

We anticipate the materials provided will help members decide if they would like to keep the same plan or enroll in a different one. To choose a new plan and have coverage begin on January 1, 2016, all members must re-enroll by **December 15, 2015**. Members who have Marketplace plans must visit HealthCare.gov or call 1-800-318-2596 should they

decide to change or cancel coverage. Members should also log in to their HealthCare.gov accounts to verify their financial information (even if their hasn't been a change) to keep their APTC for 2016. Unless members take action by December 15, 2015, they will be automatically enrolled to continue their coverage in 2016.

In an attempt to update our records, we also included an [Authorization to Share Protected Health Information \(PHI\) form](#). If a member would like to appoint you or anyone else as a person to whom PHI can be released, they must provide a PHI form to Alliant Health Plans before we can discuss claims, benefits, billing, etc. This is optional but highly recommended.

FAQs FOR MEMBERS ENROLLING THROUGH THE MARKETPLACE

To make it easier for members to enroll in plans through the Marketplace, we provided a [Frequently Asked Questions \(FAQs\)](#) document to members who received On-Marketplace renewal letters. This document should answer many questions for member's renewing on January 1, 2016. Feel free to forward to any of your on Marketplace clients as needed.

NEW SOLOCARE SALES BROCHURE NOW AVAILABLE

A SoloCare sales brochure for 2016 Individual & Family Plans is now available for download. As a selling tool for your prospective clients, you can use the brochure to promote and explain the plan designs and benefits for both on- and off-Marketplace plans offered by Alliant. The back cover of the brochure also includes a checklist to help you guide shoppers through the enrollment process. Download the brochure [here](#).

ALLIANT ID CARD MOBILE APP

Your clients can stay informed on-the-go. Remind them to download the 'Alliant ID Card Mobile' app on their mobile device to gain access to their insurance information, such as a digital insurance card, provider directory and much more. The mobile app is available for Apple and Android operating systems.





NOVEMBER 2015

IMPORTANT REMINDERS

- Open Enrollment for individual plans is November 1, 2015 through January 31, 2016.
- If a member purchases a plan through HealthCare.gov, it takes 5-7 business days to process enrollments. Healthcare.gov handles all eligibility.
- Deadline for members to submit initial payment is the day before coverage is set to begin.
- Your On-Marketplace clients must update their financial information on HealthCare.gov by December 15th.



COVERAGE FOR NEWBORNS

At Alliant, claims for newborn babies are automatically covered and processed under the parent policy for the first 31 days.

For newborns who purchase a child only policy, Alliant can enroll the newborn with their birth date as the effective date of coverage up to the first of the next month, depending on when the application is submitted within the 60-day SEP window. Members should contact us as soon as possible to ensure their child has the desired health coverage. *Applies to all members.*

IMPORTANT CHANGES TAKING PLACE IN JANUARY 2016

Alliant will communicate to respective members what changes will occur upon a renewal with the same plan. For your reference, please take note of the following benefit changes taking place effective January 1, 2016:

- The Mail Order prescription option will still exist for Commercial Formulary plans; however, each 30-day prescription will require a corresponding cost-share (co-pay or co-insurance). That means a 90-day supply will require 3 co-pays or 3-times the cost share. Although there is no longer a cost-share savings, members still have the convenience of saving time by having up to a 3-month supply of medicine mailed to their residence. *Applies to all members with the Commercial Formulary.*
- We have made available a 90-day retail benefit to allows members to secure up to a 90-day supply of medication at their local retail pharmacy. *Applies to all members with the Commercial Formulary.*
- As you know, effective January 1, 2016, there will no longer be a per script maximum. Since most plans have co-pays, this may only affect a few members. However, if co-insurance or deductibles are applied to a member's prescriptions, they may be impacted by this change. A limited number of drugs may exceed the historical \$200 maximum. *Applies to group members and SoloCare non-marketplace members.*
- Group members are allowed to retain the cost-savings and per script maximum until their renewal in 2016. Members should call Customer Service at (800) 811-4793 to verify that these overrides are properly reflected in their record. *Applies to all group members.*
- Renewals occurring now through October 2016 will be the last time groups are allowed to renew a legacy or grandfathered plan. *Applies to all group employers.*
- Plans ending November 2016 and beyond will no longer be available. Metal plans through the Affordable Care Act (ACA) will be the only Small Group plans to choose amongst. *Applies to small group employers on legacy plans.*

PHRAnywhereSM

In today's fast-moving society, fingertip information is the key to quality health care. Alliant provides all members a Personal Health Record, PHRAnywhereSM. This unique service stores medical information in a secure online vault, and provides quick, secure information about your medical history, family history, emergency contacts, immunizations, allergies and important documents. They'll have access to securely gather, store, manage and share their health information as needed. *Applies to all members.*



WE ARE HERE FOR YOU

As you know, we have brought billing, eligibility and customer service in-house. We appreciate your patience during this time as we work to improve our processes. Please review the customer service information below:

Hours of Operation: Monday-Friday, 8am-5pm

Phone Number: (800) 811-4793

Email: CustomerService@AlliantPlans.com

Fax: (866) 634-8917

Additional Frequently-Used Contacts:

Submit EFT forms

EFT@AlliantPlans.com or Fax: (706) 229-6287

Request information on Individual or Family Plans:

SoloCare@AlliantPlans.com

Submit Personal Health Information forms:

PHI@AlliantPlans.com

Submit appeals to claims:

Appeals@AlliantPlans.com

Submit Group Administration eligibility form requests and changes:

Eligibility@AlliantPlans.com