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Hamilton Insurance Agency

IRS Provides Information about the Affordable Care Act in Spanish

WASHINGTON - The Internal Revenue Service is announcing several options for Spanish speakers to get information about the tax provisions of the Affordable Care Act. Two recently issued YouTube videos feature IRS Commissioner John Koskinen: Disposición de La Responsabilidad Compartida (Individual Shared Responsibility Provision) and Crédito Tributario de Prima - Cambios en las Circunstancias (Premium Tax Credit - Changes in Circumstances).

Pay Close Attention To The Enrollment Calendar To Avoid Penalties

Mind the gap. When the 2015 open enrollment period begins on Nov.15 for plans sold on the individual market, consumers should act promptly to avoid a gap in coverage.

Failing to do so could not only leave you exposed to unexpected medical bills-hello, appendicitis!-but you could also be hit with the penalty for not having health insurance that kicks in if you're without coverage for three months or more during the year. The coverage requirement applies to most people in group and individual plans unless they qualify for a hardship or other type of exemption.

In 2015, the penalty will be the greater of \$325 or 2 percent of household income. The open enrollment period runs through Feb.15, 2015. But if you bought a plan last year and need to renew your coverage, you must do so by Dec.15 if you want it to start Jan.1.

In general, you must buy a plan by the 15th of the month in order to have coverage that starts the first of the next month. So if you buy a plan on Dec.16, for example, your coverage won't start until Feb.1.

If you don't have insurance and you buy a plan by Feb.15, your coverage will begin by March 1 and

The IRS.gov has information about the Affordable Care Act tax provisions in both English and Spanish to inform and educate the public on how the health care law may affect them.

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Kidney Dialysis Company Expands Into The Hospital Business

Critics of America's health care system say it's really a "sick care" system. Doctors and hospitals only get paid for treating people when they're sick.

But that's starting to change. Health insurance companies and big government payers like Medicare are starting to reward doctors and hospitals for keeping people healthy.

So, many health care companies are trying to position themselves as organizations that help people stay well.

One of the latest is DaVita HealthCare Partners, a provider of kidney dialysis services. The company operates 2,152 dialysis centers in the U.S. and 87 in its fast-growing international business.

DaVita is making a move into primary care, and it just announced a joint venture with a hospital company in Colorado and Kansas.

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you'll avoid owing the penalty since your coverage gap will be less than three months.

Last year, the marketplaces got off to a bumpy start and many people weren't able to sign up for coverage before open enrollment ended on March 15. The federal government allowed anyone who got their application started before the deadline to avoid the penalty.

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IRS Closes ACA Minimum Value Health Plan Loophole

The Internal Revenue Service, in a surprise move Tuesday, said it will not qualify employer-sponsored health plans that fail to cover inpatient hospitalization as meeting the minimum value health plan standard under the Affordable Care Act.

In a notice issued under the public radar on Election Day, the IRS says it, the Treasury Department and the Department of Health and Human Services believe that plans that fail to provide substantial coverage for inpatient hospitalization services or for physician services (or for both) do not provide minimum value intended by the ACA's minimum value requirement. The departments will shortly propose regulations to this effect, with the intention of finalizing them in 2015, the notice adds.

The Obama administration has become aware that certain group health plan benefit designs that do not provide coverage for inpatient hospitalization services are being promoted to employers, the notice says, adding that "a plan that fails to provide substantial coverage for these services would fail to offer fundamental benefits that are nearly universally covered, and historically have been considered integral to coverage, under typical employer-sponsored group health plans."

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