



INSURANCE SERVICES, INC.
PROTECTING YOUR HEALTH & WEALTH

Quarter 3, 2012

Volume 3, Issue 3

The Pinellas Protector eNewsletter



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Greetings to Our Clients and Friends

As we wind down the third quarter, with a presidential election looming, I'm resolved to stop making predictions about the outcome of events over which I have no control. Readers of this eNewsletter may recall I predicted that the Obamacare "individual mandate" would be found to be unconstitutional this year by the U.S. Supreme Court. In fact, I went way out on a limb and predicted that the ruling would be by a 7-2 vote. Well, folks, I was wrong... mistaken, erroneous, out of kilter, or choose your own favorite adjective. Still, I remain among the majority of Americans who believe that the mandate truly is unconstitutional; and I shudder at the prospect of a future in which the government dictates which products or services Americans must buy.

Within the Obamacare legislation, probably the most popular element is the bill's stipulation that beginning on 1/1/2014 health insurers will no longer be allowed to deny or restrict coverage due to an applicant's pre-existing conditions. But why wouldn't the legislators include enrollment period rules and timelines similar to the Annual Election Period that governs Medicare Part C (Medicare Advantage) and Medicare Part D Drug plans? As it stands, the Obamacare guaranteed issue requirement isn't fiscally responsible since people could simply wait until they become ill or disabled to purchase coverage. Sure, there's a penalty (a "tax" in the words of the Supreme Court Justices) but it's small compared to the insurance premium.

Absent new measures taken to get to the root of the problem -- namely the spiraling costs of U.S. health care services and pharmaceuticals -- the guaranteed issue provision of Obamacare seems likely to drive health insurance premium levels even higher. Contentions from experts that the health care bill simplifies administrative burdens simply don't ring true, and the often-heard argument that cost savings will be achieved by streamlining claims seems

hollow since actual claims adjudication costs typically amount to just 5% or less of total health insurance plan costs.

To any of my readers who are in favor of the new health care legislation and applaud this year's Supreme Court decision, I encourage you to send me a note at info@ahinsuranceservices.com and share your feelings/position. I will post your thoughts (anonymously) in the fourth quarter eNewsletter.

IN THIS ISSUE

- Jessica Goodman is back to break down the Supreme Court ruling and give her perspective on how people are reacting. As noted in last quarter's newsletter, Jessica is a local Tampa Bay resident and currently is attending the University of South Florida.

- Following Jessica's article, please read on for an introduction to AH Insurance Services' new Office Manager, John Eifert. Many of you already know John, who has helped me in the past with the busy Annual Election Period for Medicare Health & Drug plans.

- And don't forget, the always-interesting Annual Election Period is on the imminent horizon once again. See the short article below for more details on the AEP, which runs from October 15th to December 7th.

- Finally, in this issue I am pleased to introduce a new business partner for property & casualty insurance sales. While at times I've considered getting licensed to transact auto, homeowners and liability insurance, I believe my clients will be served better by a professional who specializes in those lines. Our new partner is Carine Gourjon; and I'm confident you'll have a great experience when you work with Carine.

Until next quarter,

Andrew Herman, President
AH Insurance Services, Inc.

Quarterly Quote

"Our lives begin to end the day we become silent about things that matter."

- Dr. Martin Luther King. Jr. (1929 - 1968)

Guest Article - By Jessica Goodman

National Federation of Independent Business vs. Sebelius

There were initially a large number of issues regarding the Patient Protection and Affordable Care Act (PPACA) that were predicted to be brought up before the Supreme Court.

The most controversial of these issues were the following:

- The mandate that all citizens will, by 2014, be required to have health insurance or pay a penalty.
- The requirement that health care providers will not be allowed to discriminate coverage based on pre-existing conditions.
- The concept that people within the same age group will have the same premiums, regardless of health conditions.
- The expansion of Medicaid to people even over the Federal poverty level.

The most controversial aspects of these issues lies in their ease of implementation, especially without any precedents. Many of the other provisions of the PPACA have already been implemented. Others, such as extending coverage to dependents up to the age of 26, have support from mainstream health insurance carriers such as United Healthcare and Aetna; even if the PPACA were to be entirely overthrown, these companies plan on continuing to follow a large number of its provisions.

The United States of America was constructed on the concept of freedom with boundaries... Free enterprise has always been one of the greatest defining characteristics of this nation. Undeniably the biggest issue with the PPACA for many people is the idea that it violates our freedom regarding our money. By the Commerce Clause, found in Article I of the United States Constitution, the United States Congress can only regulate commerce between the United States and other nations, or between various states or groups of peoples- NOT on an individual basis. Many called for the PPACA to be deemed unconstitutional because it requires commerce individually when it comes to healthcare.

However, the Supreme Court deemed the PPACA to be constitutional. Its reasoning was that the Congress, via the PPACA, does not regulate commerce at an individual level, but merely imposes a tax on those who can afford health care but choose to go without. As the Congress is certainly permitted to impose taxes, the PPACA is, under this light, constitutional.

Another Important Issue

The other issue brought up on June 28, 2012 to the Supreme Court was that of mandatory state involvement in Medicaid expansion under provision of the PPACA. According to the PPACA, Medicaid will be expanded to cover people who are even at 133% of the Federal poverty level and adults without dependents. Many states, specifically those that do not currently provide such a high level of Medicaid coverage, have contested this. The Supreme Court has ruled that the Medicaid expansion is constitutional and shall not be retracted; however, states that choose not to implement it shall not lose current Medicaid funding, but will only forego increased funding.

To read the entire Supreme Court decision, please read [this link](#).

So How Do People Feel about PPACA?

Some believe that the PPACA marks a much-needed change in the American healthcare system. In fact, Jeremy Lazarus, President of the American Medical Association, stated that "The health reform law upheld by the Supreme Court simplifies administrative burdens, including streamlining insurance claims, so physicians and their staff can spend more time with patients," and that it does so while maintaining the American system of both public and private insurance providers.

On the other hand, the healthcare industry has faced both improvements and setbacks due to the implementation of the PPACA. Although many companies like the concept of extending coverage and streamlining claims processes, other provisions, such as the medical-loss ratio laws and the requirement to provide coverage regardless of pre-existing conditions, may indeed cost the insurance industry money.

Common citizens of the United States of America all have different views with the Supreme Court's decision on the constitutionality of the PPACA. The legislation definitely benefits some people more than others, so individual outlooks on it are often tainted by what may be gained or lost. If you would like to share your opinion, [please email us](#).

AH Insurance Services, Inc. Adds to Staff

Meet John Eifert, Our New Office Manager

At AH Insurance services, we don't turn the page once your policy is in place. We know that your insurance needs, like life, can change from year to year. We are always rethinking the goal of, "how can we service our clients' needs better?"

Like most businesses, AH Insurance Services, Inc. has busy and slow times during the year. When times are busy the firm has made efforts to hire additional staff to help handle your questions and address your specific needs. In the fourth quarter of 2011, some of you may have had contact with John Eifert, as he assisted in the firm's day to day operations during the busy Annual Election Period for Medicare Health & Drug Plans. This year, I'm happy to report that John has come on board with the firm and will help me serve our clients' needs on an ongoing basis.

John's functions include post enrollment assistance, resolving any problems with billing or claims, and providing information to help you get the most value from your insurance plan. He also handles back-office accounting duties, so that I can devote more time to stay current with products and the marketplace.

At AH Insurance Services, Inc. we are passionate about serving your needs, health and well being and invite you to contact us at any time for more information on our services.

Annual Election Period (AEP) for Medicare 2013 Plan Year

AEP Runs from 10/15 - 12/7

It's that time of year again for the Annual Election Period (AEP) for Medicare Health and Drug plans. The AEP runs from 10/15 - 12/7 and is the period when you can change your Medicare Health/Drug plan or return to the original Medicare program. Any changes made become effective on January 1st, 2013.

There's no doubt your mail box is filling up with advertisements from every insurance company with a Medicare Health and Drug Plan. But please remember that along with those advertisements will also come the Annual Notice of Change and Evidence of Coverage documents from your current Medicare Plan. As you know change is inevitable; and this year is no exception. Though we don't have all of the details as of this publishing date, we are anticipating a variety of plan changes. Some carriers may discontinue certain plan offerings, which will result in current members being shifted to another plan.

It is important that you review your 2013 plan documentation to see what has changed and how the changes may affect you. As in past years, we will be contacting all of our Medicare clients between October 1st and October 15th to discuss changes and help you determine if the same plan, or a different plan will best meet your needs. Since this email is scheduled for distribution late on September 30th, by the time you read this it will be permissible to discuss benefits for the 2013 plan year. According to CMS rules, agents can

discuss plan benefits beginning on October 1st; and enrollment applications/changes can be processed beginning on October 15th.

AH Insurance Services, Inc. Teams Up With Carine Gourjon

AH Insurance Services takes pride in finding solutions for your insurance needs, even when your needs sometimes require referring you to another agent who has a plan better suited for you. Our philosophy has always been to treat our customers like Family members. With that thought in mind, we would like to introduce you to another sales agent who shares our philosophy. That agent is Carine Gourjon. Carine offers a full range of Property & Casualty Insurance for Home, Flood, Automobile, Umbrella and General Liability.

If you feel you may benefit by having an attentive, knowledgeable, hard-working and honest Property & Casualty broker, then we recommend you contact Carine. She recently helped John with his auto insurance coverage, as he made his move from Washington, D.C. to Florida to come work for AH Insurance. John shares the following story:

"As I no longer had use of a subway system to get around, I needed a car and insurance, fast. I contacted Carine to share my budgetary and deductible needs; and that I was currently in the process of establishing residency in Florida. Getting covered in advance of obtaining my Florida Drivers License and buying a car seemed a little out of the ordinary, but Carine was able to find me several options in my price range with a low deductible. Once I got the "new" car home, I discovered that it had an onboard trip computer that allowed me to enter a lock-out code that would prevent a would-be thief from starting the car. Even more amazing than finding that feature on my 26 year old fixer-upper was when I told Carine about the theft device. She immediately relayed that information to the insurance company and secured an additional policy discount. What a bonus!"

Contact Carine as follows:

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Email: Carinegourjon@live.com

Please add info@ahinsuranceservices.com to your contact list to prevent our eNewsletter from being filtered out by your spam blocker. If you are receiving this Newsletter via U.S. mail, please provide us with your email address so we can send it to you electronically. Using email for transmission saves paper and mailing costs.

If you have questions/comments, call us on 727-397-6932; or visit us online at www.ahinsuranceservices.com.



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