

**We've Updated
the Look of our
Newsletter!**

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Benefits Insight



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FDA For more information
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We look forward to hearing
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www.OhioHealthBenefits.net

Smartphones: The Future of Medicine

The digital revolution will create better health care while radically empowering patients and consumers.

Dr. Eric Topol, distinguished cardiologist and author of "The Creative Destruction of Medicine," lays out his vision for how people will start running common medical tests, skipping office visits and sharing their data with people other than their physicians.

Dr. Topol, a cardiologist at the Scripps Medical Institute in La Jolla, Calif., is already seeing signs of this as companies find ways to hook medical devices to the computing power of smartphones. Devices to measure blood pressure, monitor blood sugar, hear heartbeats and chart heart activity are already in the hands of patients. More are coming.

He acknowledges that some doctors are skeptical of these devices. "Of course, the medical profession doesn't like D.I.Y. anything," he said. "There are some really progressive digital doctors who are recognizing the opportunities here for better care and prevention, but most are resistant to change."

Dr. Topol may be right about the caution in the industry, but he is far from the only person with this vision. Apple was promoting the iPhone as a platform for medical devices in 2009. An entire marketplace is evolving that marries the can-do attitude of hacking devices with the fervor of the wellness movement. Smartphones make taking care of yourself more of a game, Dr. Topol said. "I recommend these devices because it makes it more fun and I get more readings than if I ask them to do it manually."

The enthusiasm for this vision of do-it-yourself medicine with a smartphone, though, must be balanced with the cold reality that all of the experimenters should consult with their physicians.

The most prevalent diseases and the biggest markets are getting the tools first. Devices to monitor

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Apple iPhone 4 with Medical App showing the Thinklabs Electronic Stethoscope application screen.

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heart disease are already available.

A French start-up, Withings, has created a blood pressure cuff for \$129 that connects to an iPad or an iPhone. The cuff will automatically inflate, deflate and then record the pulse rate and the blood pressure. The app will graph the pressure over time, making trends easier to see.

The growing incidence of diabetes is by many estimates the biggest public health challenge today, so companies are developing tools to help people with the disease manage their blood sugar.

Tom Xu, the founder of SkyHealth in El Cerrito, Calif., created the website glucosebuddy.com to help people keep track of the sugar in their blood. The

numbers must be entered manually. The site works with an app for the iPhone to gather the blood glucose level and some information about when it was taken. "Our main goal of glucosebuddy is not to just record numbers. That's the boring part," he said. "Once you know how your diet affects your blood sugar, you take your health more seriously."

Other companies are beginning to integrate the hardware and software. AgaMatrix, a company that makes a blood glucose monitor, iBGStar, that attaches to the iPhone, worked with Sanofi, the pharmaceutical giant, to develop the tool. In December, the Food and Drug Administration approved the device for sale in the United States.

"When patients are dealing with chronic

conditions, you might see a doctor every six weeks or two months," said Joseph Flaherty, the senior vice president for marketing at AgaMatrix. "For people to have real command over these diseases, we need to close the feedback loop and give people the information they need to make smarter decisions in real time."

Its tool, like many other pocket meters, measures the amount of glucose in the blood, but it also transfers the data to the smartphone, which helps patients to track their glucose levels over time. It is not much different from a piece of paper and a pen, but it is faster and cleaner, and it is easy to share these values with doctors and friends.

Wayner, Peter. "Monitoring Your Health with Mobile Devices." *Focus News* 29 Feb. 2012: 1-2.

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Are you really insured?

Stingy Health Insurance plans may be worse than none at all!

The Affordable Care Act was supposed to usher in a new era of consumer-friendly health care. For instance, insurers are no longer allowed to put outrageously low limits on the amount they pay out for medical care in a year or lifetime.

While millions of Americans have benefited from that and other reforms, many are still prey to the kind of skimpy "junk" plans the new law was designed to eliminate. Some plans, known as mini-med, are operated by employers and brand-name insurance companies with special dispensation from the federal government. Others, such as health discount cards and fixed benefit indemnity plans, from companies you've probably never heard of, are so meager that regulators don't consider them to be health insurance at all—though that's frequently not clear to consumers. And, some of these companies operate one step ahead of the law.



Most of these insurance products are aimed at workers in industries such as retail, food service, and temporary staffing agencies. As of January 2012, the government had given waivers to 1,231 plans cov-

ering 3.9 million people because so many companies were complaining that they would have to hastily seek out "the best affordable available options" that would not measure up to the ones it currently offered.

Are you really insured? continued from page 2

The consumers that are targeted by these junk plans by definition often feel they have few or no alternatives – or are led to believe they don't. Always consult a licensed independent broker like Ohio

Health Benefits who know which products are real and which ones are scams or junk. We can walk you through plan options and pricing, and may be able to find you cover-

age even if you have certain pre-existing conditions.

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"Junk health insurance." *Consumer Reports* Mar. 2012: 30-33.



Health Savings Accounts (HSA) Contribution Rules Raise Questions

Contribution Deadlines – Each year, HSA contributions must be made on or before the due date for filing that year's tax returns (without extensions). That means most years' contributions must be made on or before April 15 of the following calendar year.

Minimum Contributions – When you establish an HSA, you must deposit the minimum contribution required by your trustee or custodian. You aren't required to make any additional contributions unless you decide to do so.

Maximum Contributions – In 2012, the maximum amount you can contribute to an HSA is \$3,100 for individuals with self-only coverage and \$6,250 for individuals with family coverage.

Remember to make contributions up until April 15th for the prior tax year. The maximum amount you can contribute to an HSA for 2011 is \$3,050 for individuals with self-only coverage and \$6,150 for individuals with family coverage.

Catch-Up Contributions – HSA holders age 55 and older may make additional annual contributions of \$1,000. If both spouses are 55 or older and both are eligible to contrib-

ute to an HSA, then both spouses may make a catch-up contribution annually but must open separate HSA accounts (one in each spouse's name). Each spouse can contribute up to \$1,000 to his or her respective account.

Contributions for Partial Year Coverage – If you drop or lose your HSA-qualified health coverage before the end of the year, you cannot make the full contribution to your HSA. You must pro-rate your contribution for that year, counting only the months you had HSA-qualified coverage on the first day of the month. For example, if you lose

or drop your HSA-qualified coverage at the end of June, you can only contribute 50 percent of your allowed contribution for the year.

Employer Contributions – An employer can contribute to its employees' HSAs. These contributions are deductible as a company business expense and are not taxable to the employee. Employers can contribute a set amount or make matching contributions, though matching contributions can only be made if the employer offers a Section 125 cafeteria plan.

Excess HSA Contributions – You cannot contribute more than the annual limit to your HSA. Contributions in excess of the annual limit may be withdrawn by the tax filing deadline without penalty. A pro-rata share of earnings on the excess amount must also be withdrawn. Excess contributions remaining in the account after the tax filing deadline must be withdrawn and are subject to a 6 percent excise tax. Employer contributions that exceed the annual HSA limits are taxable as income to the employee.

For more information visit IRS.gov.

"Bellefontaine Radiology Associates, Inc. Goes Non-Contracting." *Broker Update* Mar. 2012: 1-2.

OHB represents major carriers like AARP, Advantra, Aetna, Anthem Blue Cross Blue Shield, Coventry, Humana, Kaiser, Medical Mutual of Ohio, Secure Horizons, SummaCare, United Healthcare, and more. Visit us online at www.OhioHealthBenefits.net for a complete list.

For more information on any of the topics discussed in this newsletter, contact either Dave or Steve. They can also help you select a health plan that is just right for you or your business!

If you do not wish to receive this newsletter, or prefer to receive it electronically, please email: service@OhioHealthBenefits.net, or call us toll free at: 1(866)235-8378.

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Q: I was told that our insurance plan required us to become members in an association. Does this sound right to you?

A: Most reputable associations, such as business or professional groups, arrange for major medical insurance for their members. But the "association" you're asked to join as a condition of buying what's called a junk plan may exist mainly to sell you insurance, not for any other reason, and a significant portion of your monthly payment may be going to the association, not toward your actual policy benefits.

Want to know more?

If you have specific questions about your healthcare coverage, we want to answer them. Please email your questions to service@OhioHealthBenefits.net, and include "Ask the Expert" in the subject line. We'll do our best to answer your questions in an upcoming newsletter.



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**WE LOVE
REFERRALS!**



Medicare Beneficiaries: Protect Your Identity!

The Centers for Medicare and Medicaid Services (CMS), which administers the Medicare program, is lagging behind private health insurers and other public agencies in protecting Medicare recipients from identity theft. The CMS's continued use of Social Security numbers on Medicare cards needlessly places people at risk.

Until the Social Security Number Protection Act is passed, which would end the practice of placing social security numbers on Medicare cards, we recommend ALL Medicare beneficiaries carry a *copy* of their Medicare card with the first 5 digits blacked out.