

Health Insurance for Real Americans and IRS Reporting Information

Attention Real Americans! Among the new issues on your 2014 federal tax return are several considerations about your individual or shared responsibility to comply with mandatory health insurance. You must either:

1. Indicate (by checking a box) on your 2014 federal income tax return that you, your spouse (if filing jointly), and your dependents had (minimum essential) health care coverage throughout 2014 as defined in the instructions for Form 8965;

2. Claim an exemption from the health care coverage requirement for some or all of 2014 (only available at the federal or your state Marketplace, also known as the Exchange) and attach Form 8965 Health Coverage Exemptions to your return; or

3. Make a shared responsibility payment if, for any month in 2014, you, your spouse (if filing jointly), or your dependents did not have coverage and do not qualify for a coverage exemption. Shared responsibility requires filing Form 8962 Premium Tax Credit (PTC).

4. AND - You may be eligible to claim the Premium Tax Credit (PTC) on Form 8962 if you, your spouse, or a dependent enrolled in health insurance through either the federal or your state Health Insurance Marketplace also known as the Exchange.

You WILL NOT RECEIVE any form from your insurance company to confirm anything about your health insurance in 2014. Logically, it would be impossible for the insurance companies to issue a form for each insurance policy because it would require giving a form to each person listed on the policy. Both Form 8965 and Form 8962 will require that you know amounts and/or months you had insurance if you did not have FULL YEAR COVERAGE.

IRS from inception, has placed the burden of proof for all income and deductions on the taxpayer. You must prove any amount you claim for any line number on the tax return you file. Secondly, it would be impossible to place the responsibility to report your insurance payments on the insurance companies because the payments during the year may include children that file separate returns, taxpayers that were married or divorced during the year, or taxpayers that purchased various insurances throughout the year based on employment, non-employment, Medicare, Medicaid, Veterans benefits, or qualification for a subsidy. At this time, insurance companies do not have a database for all individuals listed on an insurance policy.

According to IRS, ONLY one form will be sent out to taxpayers about the mandatory health care compliance. Form 1095-A Health Insurance Marketplace Statement will be mailed out if you enrolled or purchased insurance at a federal or state Health Insurance Marketplace also known as the Exchange. Form 1095-A is issued to reconcile the shared responsibility for your health insurance costs on Form 8962 – it's where the reconciliation of the subsidy you received and/or tax credit that you may qualify for gets calculated.

Go to www.irs.gov to download Publication 5187 – Health Care Law: What's New for Individuals & Families for a comprehensive explanation of the Affordable Care Act and your responsibility. All 2014 forms and instructions are now available for download the IRS website. For an easy-to-read tax guide from IRS download Publication 17 – Your Federal Income Tax - For Individuals. You can create an account on the IRS

website to get transcripts, check on your refund, and download other easy-to-read tax guides.

The rest of this article is a conversation about the mandatory health care issues. The gist of Obamacare is that ALL insurance companies will provide only four (4) types of insurance coverage to ALL people and basically it is about how much premium vs deductible you want to pay. The insurance plans are labeled Platinum/high cost/no copay, Gold, Silver, down to Bronze/low cost/high copay. There are many protections now afforded to you including insurance companies are now required to pay for things that used to be optional like prescription drugs, having a baby, mental health care, and they cannot charge extra for routine checkups, immunizations, counseling, cancer screening, and they can never kick you out if you get sick. You can also provide insurance for your child up to age 26 through an employer. (In 2015, workplaces with more than 50 people must provide insurance to full-time - currently 30 hrs per week – and your paycheck must show what your employer pays for your health coverage. The program continues to roll out until 2022)

It's suggested that everyone go to the federal or state exchange even if you have employer sponsored or pay for private insurance to see if you qualify for any assistance and find out the real facts about mandated health insurance. You can ONLY get assistance and an exemption from health insurance by enrolling on the federal or your state website.

It has really been a shame that such a large number of negative publicity has surrounded such an important issue as health care. Most people mistakenly assume that national health care was created by President Obama and for all Republicans, especially Tea Party members, to fight against it because it is bad for you. Read and listen to facts, CNN lets people tell their own story.

The reality is that national health care first became a major political issue when President Harry S. Truman made a special address to Congress on November 19, 1945 endorsing nation health care. That means that health care has been a national issue for a baby boomer's entire life. Presidents continued to advocate for national health care, with the last being President Bill Clinton and in 2006 Governor Mitt Romney piloted this program for the State of Massachusetts which continues to this day.

About half of all Americans, or about 160 million people, already have private health insurance, mostly bought by employers. If this is you, Obamacare matters only if your plan is stingy. Employers and insurance companies were given a couple years grace period so until then employers are not required to ask if you qualify for assistance and insurance companies can take advantage of you if you are not well informed about the only 4 policies that they can offer.

It's suggested that all employers providing insurance inquire if their employee qualifies for assistance because it would cost less if the employee is getting assistance from the exchange. Be very cautious of private insurance company offers; insurance brokers and agents are making money from your choices. That goes for employers buying policies for their employees too. Be informed, know mandated insurance policy outlines, no cost options and limits for yearly out-of-pocket fees like co-pays for going to the hospital.

About one-third of Americans are on Medicare (seniors) and Medicaid (poor and disabled). Last year states like California and New York with large numbers on welfare,

who have been bailing out hospitals or have seen hospital closures due to the indigent using the Emergency Room As Their Primary Care Physician spent the whole year informing these folks WHAT IS AND WHAT IS NOT AN EMERGENCY, the use of Urgent Care or physicians office and sending letters that they can no longer receive treatment at the ER for a non-emergency. As a Real American, it just seems like logical, but today there isn't anyone teaching solid religious family upbringing. The other end of the spectrum are the previously discarded by insurance companies with pre-existing conditions that have no choice but to be herded along and eventually have to file bankruptcy due to overwhelming medical bills. Remember, one way or another the Real Americans pay for the health care of these people so it can only be a good that eventually we will save billions of dollars in credit cards fees or taxes we pay.

Obamacare is Health Insurance for Real Americans. Don't listen to the negative hype by radical news stations with all the misstatement of facts. It's all a political theater that seems to have erupted since President Obama was elected for some reason or another. Groups are continuously trying to extinguish Obamacare. Yet, logically, we don't have socialized medicine where the government pays all medical bills and we have preserved our free-market economy. The Patient Protection and Affordable Care Act was created by the House, passed by Congress, signed by President Obama on March 23, 2010 and upheld by the Supreme Court on June 28, 2012. It does not replace Private Insurance, Medicare, or Medicaid. The act offers a number of new benefits, rights, and protections like minimum benefits.

Half of the 40 million remaining people will usually qualify for Medicaid (free insurance) or assistance for their premium. Real Americans who don't have private insurance and don't qualify for Medicaid must enroll on the exchange. If you are self-employed your income for insurance purposes starts with your net income after expenses and taxes. The Adjusted Gross Income line is used to determine eligibility. The nature of this leftover group of 20 million is that they will qualify for assistance, so spread the good news.

Paradoxically, there are Real Americans that don't want to be forced into buying insurance and yet they really hate to exclude people who are already sick from buying insurance. If all Americans are mandated, then it will spread cost/risk more widely and eliminate discrimination based on pre-existing conditions. Among industrialized nations, the US is the only one having no basic guarantee of health care. We have blindly paid for an unlimited access to emergency rooms, allowed suppliers to flood the patient with unwanted/unused supplies and allowed others to lose their homes, their jobs, to file bankruptcy on medical debt that in the end we all pay for in the end.

We all need to take responsibility for your own health and make sure that we eliminate our family's footprint for costly health issues. Please have a conversation with all of your family and friends. The federal website at www.healthcare.gov will transfer you to a your state site or call **1-800-318-2596** for assistance. The IRS website at www.irs.gov has a table of state exchange websites and telephone numbers. Let's turn this around and get Real Americans their deserved health insurance.

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Marketplace Contact Information for 2014 Health Coverage

State	Marketplace Name and Web Site	Telephone number	TTY Number
All States not listed below	HealthCare.gov	1-800-318-2596	TTY: 1-855-889-4325
California	Covered California	1-800-300-1506	TTY: 1-888-889-4500
Colorado	Connect for Health Colorado	1-855-752-6749	TTY: 1-855-346-3432
Connecticut	Access Health CT	1-855-805-4325	TTY: 1-855-789-2428
District of Columbia	DC Health Link	1-855-532-5465	TTY: 711-1-532-5465
Hawaii	Hawai'i Health Connector	1-877-628-5076	TTY: 1-855-585-8604
Kentucky	KYnect	1-855-459-6328	TTY: 1-855-326-4654
Maryland	Maryland Health Connection	1-855-642-8572	TTY: 1-855-642-8573
Massachusetts	Massachusetts Health Connector	1-877-623-6765	TTY: 1-877-623-7773
Minnesota	MNsure	1-855-366-7873	TTY: 1-800-627-3529
Nevada	Nevada Health Link	1-855-768-5465	TTY: 1-855-853-8100
New York	NY State of Health	1-855-355-5777	TTY: 1-800-662-1220
Oregon	Cover Oregon	1-855-268-3767	TTY: 1-800-735-2900
Rhode Island	Health Source RI	1-855-840-4774	TTY: 1-888-657-3173
Vermont	Vermont Health Connect	1-855-899-9600	TTY: 1-888-834-7898
Washington	Washington Health Benefit Exchange	1-855-923-4633	TTY: 1-855-627-9604

Table is found at:

<http://www.irs.gov/Affordable-Care-Act/Individuals-and-Families/The-Health-Insurance-Marketplace>