OPEN ENROLLMENT PREP

PAY ATTENTION TO HEALTH PLAN NOTIFICATION DEADLINES

AS YEAR-END annual open enrollment approaches for many group health plans, plan sponsors also have to be mindful of their obligations under the law to distribute health plan notifications.

The Affordable Care Act and other laws require that employers furnish certain forms and documents to employees annually. To help your organization remain compliant, we've compiled this list of health and wellness plan notices that employers need to provide annually, in addition to a few that we recommend you include in your benefits communications.

Most of the documents must be distributed during open enrollment. Here's the list.

Summary of Benefits and Coverage

The SBC gives employees a standardized, easy-to-compare summary of a health plan's benefits, deductibles, copayments, coinsurance, exclusions and coverage limitations. It is required for most group health plans, including self-insured plans.

When it must be distributed: With open enrollment materials when employees have an opportunity to elect or change coverage.

Medicare Part D Creditable Coverage Notice

Employers offering prescription drug coverage must notify Medicare-eligible individuals whether their coverage is "creditable" under Medicare rules. Creditable coverage is expected to pay at least as much as the standard Medicare Part D coverage.

While there is no direct penalty to employers for failing to send the notice, a delay can lead to higher costs for staff who later enroll in Medicare Part D without having maintained creditable coverage. Because employers typically do not know which workers are eligible for Medicare, sending this notice to all employees is considered best practice. You can find model notices here.

When it must be distributed: By Oct. 15 each year.

Grandfathered Plan Notice

This document outlines ACA protections for non-grandfathered plans, ensuring participants understand their coverage rights.

When it must be distributed: This notice must be distributed whenever a summary of benefits, description of coverage or enrollment material is provided to participants and beneficiaries.

Children's Health Insurance Program Notice

This document alerts employees to the availability of premium assistance programs through their state of residence. This notice should be sent to all employees, regardless of location, to avoid the burden of tracking residency status. Failure to provide the CHIP notice can result in fines of up to $137 per employee per day.

When it must be distributed: Although it doesn't have a fixed deadline, many employers include it in their annual open enrollment materials to ensure consistent delivery.

The Women's Health and Cancer Rights Act Notice

This federally mandated disclosure informs group health plan participants and beneficiaries of their rights to post-mastectomy breast reconstruction benefits. It must be sent to all employee participants and covered beneficiaries in your health plan.

When it must be distributed: Annually, typically included with open enrollment materials.

ICHRA Notice

Employers offering an Individual Coverage Health Reimbursement Arrangement must give eligible employees a written notice explaining the arrangement and important consequences of accepting it. Among other things, the notice helps employees understand how the ICHRA interacts with individual health insurance coverage and eligibility for premium tax credits through the ACA Marketplace.

When it must be distributed: Generally, at least 90 calendar days before the beginning of each plan year. Employees who become eligible later, such as certain new hires, generally must receive the notice no later than the date the ICHRA can first take effect for them.