Benefits Notices: Employers With 1-19 Employees

For companies with **1-19 employees**, this chart provides an overview of key required benefits notices and filings for employers and plan administrators under federal law. Please note that your company may be exempt from certain requirements and/or subject to additional obligations under your state's laws. Employers are encouraged to contact the <u>U.S. Department of Labor</u> or a knowledgeable employment law attorney for further guidance.

Notice	Provide To	When Due
<u>Summary Plan</u> <u>Description (SPD)</u> (Model notice unavailable)	Group health plan participants	Within 90 days after the employee becomes a participant in the plan An updated SPD must be furnished every 5 years if changes are made to SPD information or the plan is amended (otherwise, it must be furnished every 10 years)
Summary of Material Modifications (SMM) and Summary of Material Reduction in Covered Services or Benefits (Click on the SMM link above for model notices)	Group health plan participants	No later than 210 days after the end of the plan year in which the change is adopted, for material changes to the plan that do not result in a material reduction in covered services or benefits Within 60 days of adoption of a material reduction in covered services or benefits (alternatively, notice may be provided with plan information that is furnished at regular intervals of not more than 90 days, if <u>certain conditions</u> are met) <u>Note</u> : Timely distribution of a "Notice of Modification" (below) may satisfy these requirements.
Plan Documents (e.g., SPD, any SMMs, and other documents under which the plan is established or operated) (Model notice unavailable-plan	Group health plan participants & beneficiaries	Copies must be furnished within 30 days of a written request, and the plan administrator must make copies <u>available for examination</u> at its principal office (the DOL can also request any documents relating to the plan)

Employee Retirement Income Security Act (ERISA) Notices

documents are	
specific to each plan)	

Health Care Reform Notices

Notice	Provide To	When Due
Forms 1094-B (Transmittal) and 1095-B (Health Coverage) (Click on the links above for the forms) Note: For self- insured employers only.	Responsible individuals enrolled in self-insured coverage (may be the primary insured, employee, former employee, or other related person named on the application)	Form 1095-B must be furnished to covered individuals by March 2, 2020 Forms 1094-B <u>and</u> 1095-B must generally be filed with the IRS by February 28 (or March 31, if filing electronically)
Health Insurance Exchange Notice (There is one model notice for employers who offer a health plan to some or all employees, and another model notice for employers who do not offer a plan- click on the link above to access)	All new employees	Within 14 days of an employee's start date
Summary of Benefits and Coverage (SBC) & Uniform Glossary (Click on the link above for a list of all available templates and related documents)	Group health plan participants & beneficiaries	 Must be provided at specified times during the enrollment process and upon a participant or beneficiary's request, generally as follows: Prior to initial enrollment in the plan; Upon renewal of plan coverage; Within 90 days of special enrollment; and Within 7 business days following receipt of a request (The SBC may be provided together with other summary materials such as an SPD, if the SBC information is intact, prominently displayed at the beginning of the materials, and in accordance with the timing requirements for providing an SBC.)

Notice of Modification (Model notice unavailable)	Group health plan participants & beneficiaries	No later than 60 days prior to the effective date of a material plan or coverage change that would affect the content of the SBC and that occurs other than in connection with a renewal or reissuance of coverage <u>Note</u> : A complete & timely notice may also satisfy the requirement to provide an SMM.
Disclosure of Grandfathered Status (Click on the link above for model notice)	Group health plan participants & beneficiaries	In any plan materials for a grandfathered group health plan provided to a participant or beneficiary describing the benefits provided under the plan
Notice of Patient Protections (Click on the link above for model notice)	Group health plan participants	Whenever a participant in a non- grandfathered group health plan requiring or providing for the designation of a participating primary care provider is furnished an SPD or other similar description of plan benefits
<u>Patient-Centered</u> <u>Outcomes Research</u> <u>Institute (PCORI)</u> <u>Fees</u>	Filed with the Internal Revenue Service	IRS Form 720 must be filed annually by plan sponsors of certain <u>self-insured</u> <u>health plans</u> , no later than July 31st of the calendar year immediately following the last day of the plan year to which a fee applies

Health Insurance Portability and Accountability Act (HIPAA) Notices

Notice	Provide To	When Due
Notice of Special Enrollment Rights (Click on the link above for model notice)	Employees eligible to enroll in the employer's group health plan	At or before the time an employee is initially offered the opportunity to enroll in the plan
Wellness Program Disclosure (Click on the link above for model notice)	Group health plan participants & beneficiaries eligible to participate in a <u>health-contingent</u> wellness program	In all plan materials that describe the terms of a health-contingent wellness program (both activity-only and outcome-based wellness programs). For outcome-based wellness programs, this notice must also be included in any disclosure of an individual's failure to satisfy an initial outcome-based standard.

		If the plan materials merely mention that a program is available, without describing its terms, this disclosure is not required.
Notice of Privacy Practices (Click on the link above to download model notices in 4 different formats) Note: Fully insured group health plans that do not create or receive protected health information (PHI)- other than summary health and enrollment information-are not required to develop this notice.	Individuals enrolled in the plan	 Fully insured group plans that create or receive PHI in addition to summary health information and enrollment information must maintain a notice and provide it to any person upon request. Other health plans must provide the notice as follows: To new enrollees: At the time of enrollment To individuals covered by the plan: Within 60 days of a material revision to the policy (special rules apply for website notice postings) A health plan also must notify individuals covered by the plan of the availability of, and how to obtain, the notice at least once every 3 years, and make it available to any person who asks for it.

Special Health Care Notices

Notice	Provide To	When Due
Women's Health & Cancer Rights Act (WHCRA) Notices (Click on the link above for model notices)	Group health plan participants & beneficiaries	Upon enrollment in a plan that provides coverage for medical and surgical benefits related to a mastectomy, and annually thereafter
Mental Health Parity & Addiction Equity Act (MHPAEA) Disclosure (Model notice unavailable)	Any current or potential group health plan participant, beneficiary, or contract provider	Upon request for a plan offering medical/surgical benefits and mental health or substance use disorder benefits <u>Note</u> : Certain plans that are <u>exempt from</u> <u>the MHPAEA requirements</u> based on increased cost may be subject to <u>alternative disclosure rules</u> .
Employer Children's Health Insurance Program (CHIP) Notice (Click on the link above for model	All employees in states with group health plan premium assistance	Annually before the start of each plan year (may be provided with enrollment packets, open season materials, or the SPD)

notice)		
Michelle's Law Notice (No model notice provided by the federal government. Sample notice available by clicking on the link above for general reference purposes only.)	Group health plan participants	With any notice regarding a student status certification requirement under a plan that bases coverage eligibility on student status (and that provides dependent coverage <u>beyond age 26</u>)
Newborns' and Mothers' Health Protection Act Notice (Click on the link above for model notice)	Group health plan participants	Must be included in the SPD for a plan providing maternity or newborn infant coverage
Medicare Part D <u>Creditable</u> <u>Coverage</u> <u>Disclosure Notice</u> or <u>Non-Creditable</u> <u>Coverage</u> <u>Disclosure Notice</u> (Click on the links above for model notices. Word versions unavailable.)	Medicare-eligible individuals (including certain dependents) who are offered prescription drug coverage under the employer's group health plan	Annually prior to October 15th, upon request, and at various <u>other times</u> as required under the law An <u>online disclosure</u> to the Centers for Medicare & Medicaid Services (CMS) is also required annually, no later than 60 days from the beginning of a plan year, and at certain <u>other times</u>
Genetic Information Nondiscrimination Act (GINA) Disclosures (The link above contains model "warning" language from the federal government as well as a sample general disclosure, which may be used for general reference purposes only.)	Entities from whom requests for health- related information are made-only applicable to requests by employers with 15 or more employees	Whenever an applicant or employee is sent for a medical examination by an employer with 15 or more employees An additional "warning" is required when requests for health-related information are made by employers with 15 or more employees (e.g., to support an employee's request for reasonable accommodation or a request for sick leave), but only if the request for medical documentation is made in a way that is likely to result in receipt of genetic information
ADA Notice Regarding Wellness	All employees offered	Must be provided before the employee provides any health information, with

<u>Program</u> (Click on the lin above for samp notice)	that collec	rogram w ts health on-only to s with 15	nough time for the employee to decide /hether to participate in the program
ACA Section 1 Nondiscrimina Notice & Taglin (Click on the lin above for samp notices and tag in a variety of languages)	k k k k k k k k k k k k k k	ies, and people of the control of th	lotices of nondiscrimination and aglines that alert individuals with mited English proficiency to the vailability of language assistance ervices are generally required to be osted in: (1) significant publications and ommunications targeted to eneficiaries, enrollees, applicants, and nembers of the public; (2) conspicuous hysical locations where an entity neteracts with the public; and (3) a onspicuous location on the entity's vebsite, accessible from the homepage f the site.
Uniformed Ser Employment a Reemployment Rights Act (USERRA) Not (Click on the line above for mode notice)	nd t ice All employ k	/ees	1ay be posted where employers ustomarily place notices for employees
Qualified Small Employer HRA (QSEHRA) Not (No model notice provided by the federal governe Sample notice available by cli on the link abo general referen purposes only.)	Eligible en cice of employe had fewer full-time e in the prece nent. calendar y do not offe cking health plan ve for that fund a ce QSEHRA	ers that than 50 mployees ceding trear, that er a group n, and a	Generally no later than 90 days before ne beginning of the year in which the QSEHRA is funded
Individual Cov HRA Notice (fe			Generally no later than 90 days before ne beginning of the Individual Coverage

ears	traditional group	HRA plan year
ing in 2020)	health plan	
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