



Compliance Corner

August 8, 2017

Health Care Reform

Senate Rejects Proposals to Repeal and Replace the ACA

Early in the morning on Friday, July 28, 2017, the Senate, by a vote of 51-49, rejected the Health Care Freedom Act (HCFA), or “skinny repeal” of the ACA, which was the last-ditch effort of Senate Republicans to repeal and replace the ACA. In dramatic fashion, three Senate Republicans voted no on the measure, including Lisa Murkowski (AK), Susan Collins (ME) and John McCain (AZ), who cast his vote with an emphatic thumbs down. Sen. McCain appeared to be the difference-maker as he returned from his home state to the Senate floor just days after having announced his diagnosis with brain cancer. His “no” vote spelled defeat for the HCFA, as all Democrats and Independents voted no as well.

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IRS Releases 2017 Draft Versions of 6055 and 6056 Informational Reporting Forms

On July 28, 2017, the IRS released draft versions of the 2017 informational reporting forms that insurers and self-insured employers will use to satisfy their obligations under IRC Section 6055 and that large employer plan sponsors and health plans will use to satisfy their obligations under IRC Section 6056. These forms, once finalized, will be filed in early 2018 relating to 2017 information. The IRS is currently accepting comments on the draft forms. Instructions for the forms have not yet been released.

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Announcements

Podcast Episode 13: Senate Rejects Health Care Freedom Act

Listen in as NFP Compliance veteran Jill Brooking makes her Benefits Compliance Podcast debut! Jill and podcast regular Suzanne Spradley discuss the week leading up to the Senate’s dramatic vote on its proposals to repeal and replace the ACA. The Senate’s final proposal, the Health Care Freedom Act (HCFA), which was also called a “skinny repeal” of the ACA, was rejected as three Republican senators (along with all Senate Democrats and Independents) voted against the bill. Jill and Suzanne also dive into the details within the proposals and look ahead at what might happen down the road.

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August Webinar Series – Register Now

NFP’s Benefits Compliance team is hosting its next series of webinars this month. Training dates are Aug. 9,

Federal Updates

Sixth Circuit Recognizes Business Records as Sufficient Proof of Notification of COBRA Rights

On June 30, 2017, the U.S. Court of Appeals for the Sixth Circuit, in *Perkins v. Rock-Tenn Servs., Inc.*, 2017 WL 2829100 (6th Cir. 2017), affirmed a ruling from the U. S. District Court for the Western District of Michigan, holding that a COBRA Election Notice had been properly sent to a former employee. The case was an employment discrimination lawsuit. In the district court case, the employee (Perkins) also claimed that the employer (Rock-Tenn) failed to send her an election notice allowing her to continue her health insurance benefits, as is required under COBRA. Rock-Tenn moved for summary judgment, which the district court granted as to all claims. Perkins appealed the decision to the U.S. Court of Appeals for the Sixth Circuit.

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IRS Issues Form 14581-A (Fringe Benefits Compliance Self-Assessment for Public Employers)

On July 5, 2017, the IRS issued Form 14581-A, which is a tool for public employers (federal, state and local governments) to conduct self-assessments of their fringe benefits. Form 14581-A includes a total of 11 questions and has fillable check box and text fields so that the form can be completed electronically or printed and completed manually. This self-assessment tool is a general guide to the most common tax issues that public employers may encounter based on IRS audits, and it directs those entities to additional information as necessary.

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Retirement Updates

U.S. Treasury Announces Plans to Wind Down myRA Program

On July 28, 2017, the U.S. Department of the Treasury (“the Department”) announced that it will begin to phase out the

Aug. 16 and Aug. 23, 2017, at 3:00 p.m. ET. The respective topics are “Medicare and Your Plan: Benefit Issues to Consider,” “Health Care Reform: The Saga Continues” and “HIPAA, HIPAA, HIPAA.”

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It’s MLR Rebate Time Again!

PPACA requires insurers to submit an annual report to HHS that accounts for plan costs. If the insurer doesn’t meet the medical loss ratio standards, they must provide rebates to policyholders. Rebates must be distributed to employer plan sponsors between Aug. 1, 2017, and Sept. 30, 2017.

Employers should keep in mind that if they receive a rebate, there are strict guidelines as to how the rebate may be used or distributed.

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State Updates

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myRA program over the coming months after a thorough review found it not to be cost effective. This review was undertaken as part of the Trump administration's effort to assess existing programs and promote a more effective government. According to the Department, demand for and investment in the *myRA* program have been extremely low.

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FAQ

Is leaving incarceration or being incarcerated a qualifying event under a Section 125 Cafeteria Plan?

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Reference

Commonly Used Acronyms

[Glossary »](#)

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