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Compliance Corner

August 26, 2014

HEALTH CARE REFORM

IRS Confirms Premium Tax Credits Remain Available in Federally Facilitated Exchanges

On Aug. 1, 2014, the IRS provided a statement confirming that premium tax credits remain available for the federally run and state-run health insurance exchanges. This statement was issued after two federal appeals court rulings regarding premium tax credits were issued July 22, 2014.

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Agencies Issue Interim Final Rule, Model Notice and Proposed Rule Addressing Religious Exemptions from Contraceptive Mandate

On Aug. 22, 2014, HHS, the DOL and EBSA jointly released much-anticipated key guidance incorporating the U.S. Supreme Court's decision in *Burwell v. Hobby Lobby Stores*, Inc. 134 S. Ct. 2751 (2014) into existing regulations. The guidance includes an interim final rule, a new proposed rule applicable to closely held for-profit entities and a new model notice.

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ANNOUNCEMENTS

Recordings of August Client Training Series Now Available

Recordings of the August series of client training webinars presented by NFP Benefits Compliance are now available on the Client Learning Portal. Webinar topics include "The Well-designed Wellness Program," "COBRA Compliance" and "Legislative Update."

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REMINDER

Business Associate Agreements That Previously Qualified for Transition Relief Must Be Amended by Sept. 23, 2014

As part of a final rule issued

CMS Announces Two Additional Special Enrollment Periods for the Marketplace

Enrollment in the marketplace is currently closed unless an individual is eligible for a special enrollment period (SEP). On Aug. 4, 2014, CMS announced two SEPs related to Medicaid.

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CMS Presentation Provides Clarification on Reinsurance Contribution Questions

On Aug.18, 2014, CMS continued its educational efforts related to the reinsurance contribution submission process. During the webinar, representatives reminded contributing entities that the enrollment counts are based on January through September of the calendar year, not a group's specific plan year. The only exception to this rule is a self-insured group health plan that chooses to use the Form 5500 counting method to calculate its enrollment.

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REGTAP Updates Keep Coming on Reinsurance Contributions and FF-SHOP

The Registration for Technical Assistance Portal (REGTAP), operated by CMS, has issued additional FAQs and guidance clarifying information for both reinsurance contributions and federally facilitated SHOP (FF-SHOP) information. The selected FAQs and information below are a brief summary of highlights that may be of interest to employers.

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FEDERAL UPDATES

Fiduciary Duties and Missing Participants in Terminated Defined Contribution Plans

became effective March 26, 2013, business associates were required to amend their existing business associate agreements (BAAs) to incorporate certain new requirements by Sept. 23, 2013. As background, the final rule made a number of changes to the required terms and conditions of a BAA, requiring covered entities, business associates and subcontractors of business associates to update existing BAAs. In addition to the changes, the final rule contained a transition period, which, in certain cases, delayed the deadline for business associates to amend their existing BAAs.

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FAQ

What types of plans are subject to HIPAA's health plan identifier (HPID) and standard transaction rules, and therefore must obtain an HPID by Nov. 5, 2014?

Read the answer »

STATE UPDATES

California
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On Aug. 14, 2014, the DOL published Field Assistance Bulletin (FAB) No. 2014-01, which replaces FAB 2004-02. As background, under the IRC, a plan administrator must distribute all plan assets as soon as administratively possible following plan termination. Before making distributions, the fiduciary is obligated to contact the plan's participants to request direction on how to distribute the participants' account balances. This becomes problematic when plan fiduciaries can't locate certain plan participants.

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REFERENCE

Commonly Used Acronyms
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