

PROFESSIONAL GROUP PLANS Specializing in Employee Benefit

## OPEN ENROLLMENT NOTICES FOR GROUP HEALTH PLANS

Practical tips on open enrollment notices along with convenient links to sample notices and model language.



**Contact Us With Any Questions** 

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## OPEN ENROLLMENT NOTICES FOR GROUP HEALTH PLANS

Employers sponsoring group health plans must provide certain notices and disclosures to persons eligible for enrollment. Federal law requires providing various notices at different times, such as when the employee first becomes eligible, at each enrollment opportunity, and/or annually. For convenience and to reduce administrative costs, many employers choose to distribute various required notices with their annual open enrollment materials.

The chart below summarizes the health plan notices commonly distributed during open enrollment season. For sample notices and model language, click on the links.

**Insured Health Plans:** Plans provided through group insurance policies are subject to state insurance laws which may apply in addition to, or in place of, one or more of the federal notice requirements summarized below. In that case, the insurance carrier may prepare and distribute certain notices. Employers are advised to coordinate with the carrier to ensure that all requirements are met.

NOTICE	PURPOSE	MODEL LANGUAGE
Disclosure of Grandfathered Plan	Discloses that the plan is grandfathered	For model language, see <u>Grandfathered</u>
Status	and may not include certain consumer	<u>Plan Notice</u> .
For grandfathered health plans only.	protections that apply to other plans;	
	provides contact information.	
Disclosure of HIPAA Opt-Out	Discloses that the self-funded non-	For model language, see NFGP HIPAA
For certain self-funded non-federal	federal governmental plan has opted	Opt-Out Notice.
government plans only. (This is	out of certain federal mandates, such as	
uncommon.).	mental health parity.	
Employer CHIP Notice	Provides information about possible	The current notice is available at <u>CHIP</u>
	premium assistance for low-income	Notice.
	families under a state's Medicaid or	
	Children's Health Insurance Program	
	(CHIP).	
HIPAA Privacy Notice	Describes ways that the plan may use	For model language, see Model Privacy
For self-funded plans, or insured	and disclose individual protected health	Notices.
plans if the employer has access to	information, participant's rights, and the	
protected health information.	plan's duties to protect the information.	Note: Notice is required at initial
		enrollment only. Thereafter, a reminder
		of notice's availability is required every
		three years.
Medicare Part D - Notice of	Informs Medicare-eligible persons as	For model notices and instructions,
Creditable (or Non-Creditable)	to whether the group health plan's	see Creditable Coverage Model Notice
Coverage	prescription drug coverage is at least	Letters and Creditable Coverage.
	as good as (i.e., creditable) as Medicare	
	Part D coverage.	Note: Distribute each year before
		October 15 (regardless of group health
		plan's open enrollment dates).



NOTICE	PURPOSE	MODEL LANGUAGE
Newborns' and Mothers' Health Protection Act Notice	Describes required plan benefits for maternity and newborn coverage.	For model language, see page 140 in the DOL Compliance Assistance Manual. Note: Separate distribution is not required if notice appears in plan's summary plan description (SPD).
<b>Notice of Patient Protections</b> <i>For non-grandfathered plans only.</i>	Describes the plan's patient protections, e.g., designation of primary care provider, OB/GYN care without prior authorization or referral.	For model language, see page 150 in the DOL Compliance Assistance Manual. Note: Separate distribution is not required if notice appears in plan's summary plan description (SPD).
Special Enrollment Rights Notice	Describes the plan's special enrollment rules for persons who become newly eligible (due to marriage, birth of child) or who lose coverage under another plan before the next annual enrollment period.	For model language, see page 138 in the DOL Compliance Assistance Manual.
Summary of Benefits and Coverage (SBC) and Uniform Glossary	Provides a short, easy-to-understand summary of the plan's benefits and coverage and a glossary of standard terms.	For templates and instructions for preparing the SBC, see the "for use on or after 04/01/17" section at <u>Guidance on SBCs</u> .
Wellness Program Disclosures For certain wellness programs only.	<ul> <li>One or two notices may be required depending on the wellness program's features:</li> <li>HIPAA notice is required for a healthcontingent wellness program that is subject to the alternative standard rule.</li> <li>EEOC notice is required if the wellness program collects participant health information, e.g., health risk assessments, biometric screenings.</li> </ul>	For model language under HIPAA, see page 139 of the <u>DOL Compliance</u> <u>Assistance Manual</u> . For a sample EEOC notice, see <u>EEOC</u> <u>Wellness Notice</u> .
Women's Health and Cancer Rights Act Notice	Describes required plan benefits for mastectomy-related services.	For model language, see page 141 (enrollment notice) and page 142 (annual notice) in the <u>DOL Compliance</u> <u>Assistance Manual</u> . <b>Note:</b> The enrollment notice is required at initial enrollment only. In following years, either the enrollment notice or the annual notice can be used.

Legal Disclaimer: Information in this document is general in nature and not intended to replace legal advice in any particular manner.

