

Summaries, Notices & Disclosures

Note: This list is not all-inclusive of your legal obligations when sponsoring a group health plan, and the samples and model language provided in this section are for illustrative purposes only. These provisions are not legal advice. It is strongly recommended that you seek the advice of legal counsel prior to adopting any document for purposes of satisfying a statutory or regulatory reporting or disclosure requirement.

TYPE	DESCRIPTION
Benefit Summary Distribute: At enrollment and annually thereafter	Summary of Benefits and Coverage (SBC) Plans Covered: All group health plans, but does not apply to “excepted benefits” as defined under HIPAA. Distribution Requirement: Provide with open enrollment materials, but no later than the first date the employee is eligible to enroll. Provide with enrollment materials annually thereafter, but no later than 30 days prior to the first day of the new plan year.
Benefit Summary Distribute: At enrollment and every 5 years thereafter if changed, or every 10 years if not changed	Summary Plan Description (SPD) Plans Covered: All group health plans subject to ERISA. Distribution Requirement: Provide with open enrollment materials or within 90 days of coverage; or upon request. An updated SPD must be furnished every 5 years if the plan is amended, or every 10 years if there are no changes.
Notice Distribute: Annually	Children’s Health Insurance Program (CHIP) Notice Plans Covered: Group health plans with participants or beneficiaries residing in one or more states that provide medical assistance under either a state Medicaid plan or child health assistance under a state child health insurance program in the form of premium assistance for the purchase of coverage under a group health plan. Distribution Requirement: The notice required by Children’s Health Insurance Program Reauthorization Act must be sent on an annual basis, free of charge, to all employees of an employer, regardless of whether the employee participates in the plan. The notice must be provided as a separate document but can be furnished along with other plan materials, such as in an open enrollment packet or Summary Plan Description (SPD), provided that the materials are provided to all employees entitled to receive the Employer CHIP Notice.

TYPE	DESCRIPTION
<p>Notice</p> <p>Distribute: Within a reasonable time after receiving reimbursement</p>	<p>Early Retiree Reinsurance Program</p> <p>Plans Covered: Plan Sponsors participating in the Early Retiree Reinsurance Program.</p> <p>Distribution Requirement: The written notice must be delivered to all individuals who are plan participants, including enrolled spouses, surviving spouses, and dependents (not just early retirees) within a reasonable time after the sponsor receives its first ERRP reimbursement. Sponsors may include the notice with other plan materials delivered to plan participants or distribute the notice electronically to plan participants who are actively working (following ERISA delivery methods). The sponsor generally may deliver one notice per family, as long as the notice is addressed to all plan participants who are family members.</p>
<p>Notice</p> <p>Distribute: The availability of the privacy notice at least once every three years or sooner upon material revision.</p>	<p>HIPAA: Notice of Privacy Practices</p> <p>Plans Covered: All group health plans that are HIPAA Covered Entities. Does not apply to insured plans that do not receive PHI (other than summary health and eligibility information).</p> <p>Distribution Requirement: A health plan must provide the notice to individuals then covered under the plan by April 13, 2003 (April 14, 2004 for small plans) and to new enrollees at time of enrollment. The plan must notify individuals then covered by the plan of the availability of and how to obtain the notice at least once every three years after the initial distribution. The covered entity may include the privacy notice with other written materials that are mailed to the individuals (except that the notice may not be combined in a single document with an authorization). A plan sponsor may elect to include the notice with an SPD or with enrollment materials. The notice of privacy practices can be provided by email, if the recipient has agreed to receive an electronic notice and that agreement has not been withdrawn. A health plan must also make its notice available to any person who asks for it. Web Site: In addition to distributing the notice, a health plan must prominently post and make available its notice on any web site it maintains that provides information about its customer services or benefits. Revisions: A health plan that posts its notice on its web site must prominently post the change or its revised notice on its web site by the effective date of the material change to the notice, and provide the revised notice, or information about the material change and how to obtain the revised notice, in its next annual mailing to individuals then covered by the plan. A health plan that does not post its notice on its web site must provide the revised notice, or information about the material change and how to obtain the revised notice, to individuals then covered by the plan within 60 days of the material revision to the notice.</p>

TYPE	DESCRIPTION
<p>Notice</p> <p>Distribute: Before October 15 and upon certain other events</p>	<p>Medicare Part D Creditable Coverage Notice</p> <p>Plans Covered: All plans offering prescription drug coverage to Part D eligible individuals.</p> <p>Distribution Requirement: The notices must be provided to Part D eligible individuals (although many employers take the cautious approach and distribute to all plan participants). The notices may be provided separately or with other plan participant materials if (1) they are provided prominently with other plan participant information materials that the sponsor is required to provide; (2) they are conspicuous; and (3) they include the content information prescribed by CMS. A separate disclosure notice must be provided if the employer knows that any spouse or dependent who is Part D eligible resides at a different address than where the participant/policy holder materials were mailed.</p>
<p>Notice</p> <p>Distribute: By October 1, 2013 and at time of hire (within 14 days) after this date.</p>	<p>Notice About the Health Benefit Exchange</p> <p>Plans Covered: All group health plans, but does not apply to “excepted benefits” as defined under HIPAA.</p> <p>Distribution Requirement: Provide to new employees within 14 days of hire date (or with respect to current employees, not later than October 1, 2013).</p>
<p>Notice</p> <p>Distribute: As Needed</p>	<p>Notice of Plan Modifications (for changes to the SBC)</p> <p>Plans Covered: All group health plans, but does not apply to “excepted benefits” as defined under HIPAA.</p> <p>Distribution Requirement: Provide 60 days prior to the effective date of the change described in the notice.</p>
<p>Notice</p> <p>Distribute: Whenever plan materials are provided</p>	<p>Patient Protections Disclosure Notice - PPACA</p> <p>Plans Covered: Non-Grandfathered plans otherwise subject to the PPACA that require the designation of primary care providers, but not those considered “excepted benefits” under HIPAA, such as retiree-only medical plans, health flexible spending accounts and limited-scope dental or vision plans that require the designation of primary care providers.</p> <p>Distribution Requirement: The notice must be included whenever a summary plan description or other similar description of benefits is provided to a participant.</p>
<p>Notice</p> <p>Distribute: As Needed</p>	<p>Summary Annual Report</p> <p>Plans Covered: All insured group health plans that are required to file a Form 5500 and all self-insured group health plans unless they are unfunded (generally, plans that pay benefits out of general assets are unfunded).</p> <p>Distribution Requirement: Provide to participants within 9 months of the close of the plan year, or 2 months after the due date for filing Form 5500.</p>

TYPE	DESCRIPTION
Notice Distribute: As Needed	Summary of Material Modifications (for changes to benefits described in the SPD) Plans Covered: All group health plans subject to ERISA. Distribution Requirement: Provide to participants no later than 210 days after the end of the plan year in which the change was adopted. If the change was a material reduction in benefits, see Summary of Material Reduction in Covered Services or Benefits. Note, however, that if the change also affects the content of the SBC, the rule for SBCs applies.
Notice Distribute: As Needed	Summary of Material Reduction in Covered Services or Benefits (for material reduction in benefits described in the SPD) Plans Covered: All group health plans subject to ERISA. Distribution Requirement: Provide to participants within 60 days of adoption of the material reduction of group health plan services. Note, however, that if the change also affects the content of the SBC, the rule for SBCs applies.
Notice Distribute: Annually	Women's Health and Cancer Rights Act Notice Plans Covered: All group health plans subject to HIPAA (except for governmental plans electing to opt-out). Distribution Requirement: The notice must be distributed to participants and may be furnished by itself or provided in an SPD, if the plan distributes SPDs annually. A separate notice must be distributed to a beneficiary (e.g., a spouse) whose last-known address is different from the last-known address of the participant.
Disclosure	Grandfathered Status Disclosure - PPACA Plans Covered: All group health plans claiming "grandfathered status" under the Patient Protection and Affordable Care Act (PPACA). Disclosure Requirement: Include disclosure statement in all plan materials distributed to participants describing benefits provided under the plan (including the SPD, insurance certificate, and any other written materials describing plan benefits).
Disclosure	HIPAA: Preexisting Condition Exclusion General Notice Plans Covered: All group health plans subject to HIPAA's Portability requirements. Note: Effective for plan years beginning on or after September 23, 2010, Preexisting Condition Exclusions for enrollees under age 19 are prohibited and Preexisting Condition Exclusions will be generally prohibited for all enrollees beginning January 1, 2014. Disclosure Requirement: Include in SPD. If SPD not provided at enrollment, include in enrollment materials.

TYPE	DESCRIPTION
Disclosure	<p>HIPAA: Special Enrollment Rights Notice</p> <p>Plans Covered: All group health plans subject to HIPAA's portability requirements.</p> <p>Disclosure Requirement: Include in SPD. If SPD not provided at enrollment, include in enrollment materials</p>
Disclosure	<p>Newborn's and Mother's Health Protection Act Disclosure Notice</p> <p>Plans Covered: All group health plans subject to HIPAA (except for governmental plans electing to opt-out).</p> <p>Disclosure Requirement: Include in SPD. If SPD not provided at enrollment, include in enrollment materials.</p>
Disclosure	<p>Qualified Medical Child Support Order Notice</p> <p>Plans Covered: All group health plans subject to ERISA and church plans (under parallel provisions included in the Child Support Performance and Incentive Act of 1998).</p> <p>Disclosure Requirement: Include in SPD or include a statement that participants and beneficiaries may obtain a copy of a group health plan's QMCSO procedures from the plan administrator, free of charge.</p>
Disclosure (Poster)	<p>USERRA Rights Notice (Poster)</p> <p>Plans Covered: All public and private employers, regardless of size.</p> <p>Disclosure Requirement: Disclose to employees in a way that ensures the full text of the notice is provided: Hand deliver, mail, send via electronic delivery or include in Summary Plan Description (SPD). Employers may also satisfy the USERRA notice requirement by using a poster.</p>
Disclosure	<p>Wellness Incentive Disclosure</p> <p>Plans Covered: All group health plans subject to HIPAA's nondiscrimination provisions offering a standard-based wellness program requiring an individual to satisfy a standard related to a health factor in order to obtain a reward (or avoid a penalty).</p> <p>Disclosure Requirement: A notice of the availability of a waiver or alternative standard must be included in all plan materials that describe the standard-based wellness program.</p>
Disclosure	<p>Women's Health and Cancer Rights Act Disclosure</p> <p>Plans Covered: All group health plans subject to HIPAA (except for governmental plans electing to opt-out).</p> <p>Disclosure Requirement: Include in SPD. If SPD not provided at enrollment, include in enrollment materials.</p>