

WHEN
ELIGIBLE

UPON INITIAL
ENROLLMENT

ANNUAL

UPON CERTAIN
EVENTS

SUMMARY OF NOTICES & DISCLOSURES



Unless otherwise specified below, these notices and disclosures should generally be provided to employees when they become eligible to participate in a group health plan. They are often included in enrollment materials.

Placing them in the plan’s Summary Plan Description (SPD) will satisfy the distribution requirement only if the SPD is provided to all eligible employees on or before enrollment or as otherwise specified in the notice’s distribution requirements.

PLAN TYPE	NOTICE/DISCLOSURE	DISTRIBUTE ELECTRONICALLY
ALL PLANS	<p>SPECIAL ENROLLMENT RIGHTS</p> <p>The Special Enrollment Rights disclosure must explain how and when participants and beneficiaries may enroll in the group health plan outside of the plan's annual open enrollment period.</p>	FOLLOW DOL SAFE HARBOR
ALL PLANS	<p>MEDICARE PART D CREDITABLE COVERAGE NOTICE</p> <p>Plans must notify Medicare Part D eligible participants whether the current employer sponsored prescription drug benefit provides creditable coverage. Notification must be given prior to the effective date of coverage under the employer’s plan. Because an employer may not always be aware of which employee participants and their beneficiaries are (or will be) eligible for Medicare Part D, many employers take the cautious approach and provide the notice to all employees.</p> <p>Other Disclosure Requirements: The notice must also be provided annually on or before October 15th of each year; following changes in creditable coverage status; and upon request by a Part D eligible individual.</p>	SEE FOOTNOTE ¹
GRANDFATHERED PLANS	<p>GRANDFATHERED STATUS</p> <p>All group health plans claiming “grandfathered status” under the ACA must disclose this status to participants. The disclosure must be included with any material, including enrollment material, that describes benefits under the plan. Non-Grandfathered plans do not have to disclose their status.</p> <p>Other Disclosure Requirements: Grandfathered status may be disclosed in the SBC but it is not required. You can add or omit a statement to that effect at your discretion.</p>	FOLLOW GUIDELINES FOR SBC ²
PLANS THAT REQUIRE DESIGNATION OF A PCP	<p>PATIENT PROTECTIONS</p> <p>Plans that require the designation of a primary care provider (PCP) must provide information relative to a participant’s rights under the ACA when choosing a PCP. The information must be included with any material, including enrollment material, that describes benefits under the plan.</p> <p>Other Disclosure Requirements: A participant’s rights under the ACA relative to selection of a PCP should also be disclosed in the SPD. In addition, it should be included in any materials that describe benefits under the plan.</p>	FOLLOW GUIDELINES FOR SBC ²