

Health Plan Notice Updates for 2023, 2024, & Beyond

Employers should be aware of updates to several model notices that can be used to comply with certain disclosure requirements that apply to their group health plans under federal laws. Federal agencies provide these model notices to aid compliance and periodically update them to reflect changes to the law or changes to the information contained in the notices.

This Compliance Bulletin provides details on key updates to federal model notices that were made in 2023 and 2024, and describes future updates that the agencies intend to make.

Expiration Dates

Many of the federal model notices include OMB control numbers and expiration dates. **The passage of an expiration date does not necessarily mean that the information in the model notices is out of date.** Rather, it refers to a federal process where agencies receive approval from the federal Office of Management and Budget (OMB) for certain information collections. Approved information collections must display an OMB control number and an expiration date, which is usually three years from when the OMB grants approval.

This means that federal agencies must periodically ask for an extension of OMB approval. Often, OMB will renew its approval, and federal agencies will re-issue their model notices with extended expiration dates without announcement and without substantive changes to the models.

Action Items

While **the use of the federal model notices is optional for employers**—they can choose to prepare their own notices or modify the models to provide more comprehensive information—they should **be sure to include at least the minimum information contained in the models.**

Updates for 2023 & 2024

The following model notices were updated by federal agencies in 2023 and 2024:

Health Insurance Exchange Notices

The Affordable Care Act (ACA) **requires employers to provide all new hires with a written notice about the health insurance Exchanges, or Marketplaces.** This notice is also referred to as the "Notice of Coverage Options." [Model notices](#) are available for employers who offer a health plan to some or all employees, and employers who do not offer a health plan. Both English and Spanish language versions are available.

Both model notices were recently updated to include the affordability threshold for purposes of the ACA's employer shared responsibility rules, information on Exchange special enrollment periods, how the COVID-19 public health emergency affected eligibility for Medicaid and Children's Health Insurance Program (CHIP) coverage, and optional information corresponding to the Marketplace Employer Coverage Tool.

CHIP Notice

The Children's Health Insurance Program Reauthorization Act of 2009 imposes an annual notice requirement on employers that maintain group health plans in states that provide premium assistance subsidies under a Medicaid plan or a Children's Health Insurance Plan (CHIP). **An employer is subject to this annual notice requirement if its group health plan covers participants who reside in a state that provides a premium assistance subsidy, regardless of the employer's location.**

The federal [model notice](#), which employers may use for this disclosure, is updated periodically to reflect changes in the states that offer premium assistance subsidies. The latest model Employer CHIP Notice includes information current as of **Jan. 31, 2024**. It is available in both English and Spanish.

No Surprise Billing Notice

Effective for plan years beginning on or after Jan. 1, 2022, **health plans and issuers are required to make publicly available, post on a public website of the plan or issuer, and include on each applicable explanation of benefits a description of the restrictions against balance billing.**

Federal agencies initially released a model notice that could be used to satisfy these disclosure requirements ("Version 1"). After receiving public comments, a [revised model notice](#) ("Version 2") was issued that includes more specific federal agency contact information, along with other minor clarifications. **Federal agencies will consider the use of only Version 2 of the model notice to be good faith compliance** with respect to plan or policy years beginning **after Jan. 1, 2023**.

- Insurers can contractually agree to fulfill the disclosure requirement for fully insured plans.
- Self-insured plans may agree with insurers, TPAs, or PBMs to assist in fulfilling these requirements, but **the plan must monitor the other party to ensure compliance.**

Summary Annual Report (SAR) Forms

The SAR is a narrative summary of the information in Form 5500 and **must be provided annually by administrators of plans subject to the Form 5500 annual reporting requirements**, within nine months of the close of the plan year. Federal agencies released model forms for plan years **beginning in 2023 and later**.

- [Form for SAR relating to welfare plans for plan years beginning in 2023 and later](#)
- [Form for SAR relating to pension plans for plan years beginning in 2023 and later](#)

Future Updates

According to [Department FAQs](#) issued on Nov. 28, 2023, federal agencies intend to update the following documents in the future:

- **Summary of Benefits and Coverage (SBC)** template and **sample completed SBCs** in English (with updated taglines in applicable non-English languages);
- Additional translated versions of the **SBC and Uniform Glossary**; and
- Model notices for **internal claims and appeals and external review** (with updated taglines in applicable non-English languages).

These updates are intended to reflect updated guidance pertaining to 2023 [Culturally and Linguistically Appropriate Services County Data](#).

Provided to you by Patriot Growth Insurance Services, LLC

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