

Presented by: Jeff Smith Fisher & Phillips LLP

and

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Today's Agenda—

- Supreme Court Decision
- "Big Ticket" Items for Employers
- 3. Immediate Compliance Issues for Employers
- Keeping up with the "Moving Target"

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Supreme Court Decision

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Supreme Court Decision

- Individual mandate is constitutional under the power of Congress to "lay and collect" taxes
- Some limits on the power of Congress to withhold Medicaid funding
- Provisions that affect employers remain intact

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"Big Ticket" Items for Employers

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The "Big Ticket" Items—

Employer "Play or Pay" Mandate

Nondiscrimination Requirements

Automatic Enrollment

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Employer "Play or Pay" Mandate—

- Effective January 1, 2014
- Applies to "large employers"
 - 50 or more "full-time" employees (including full-time equivalents)
 - "Full-time" means 30 or more hours per week
- In order to "play" and avoid the possibility of "paying," an employer must offer adequate and "affordable" group health plan coverage to all full-time employees and their dependents
 - Plan covers at least 60% of the cost of benefits
 - Employee premium cost does not exceed 9.5% of "household income"

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Recent Guidance on Employer "Play or Pay" Mandate—

- Lookback and stability periods for determination of full-time status
- Employers may use W-2 income in lieu of household income for affordability test
- Application of 9.5% affordability requirement

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Employer "Play or Pay" Mandate—

- If an employer fails to "play" by not offering coverage to ALL full-time employees and their dependents AND at least one full-time employee receives Federal premium assistance for purchasing coverage through an insurance exchange, then the employer will "pay" an annual penalty tax of \$2,000 per full-time employee, excluding the first 30 full-time employees.
 - An employee may qualify for Federal premium assistance if his or her income is less than 400% of the Federal poverty level (approximately \$88,000 for a family of four)

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Employer "Play or Pay" Mandate—

- If an employer fails to "play" by offering inadequate or unaffordable coverage AND at least one full-time employee receives Federal premium assistance for purchasing coverage through an insurance exchange, then the employer will "pay" an annual penalty tax equal to the lesser of (i) \$3,000 per full-time employee receiving assistance OR (ii) \$2,000 per full-time employee, excluding the first 30 full-time employees.
 - An employee may qualify for Federal premium assistance if his or her income is less than 400% of the Federal poverty level (approximately \$88,000 for a family of 4)

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Common questions and considerations on the Employer "Play or Pay" Mandate—

- What about small employers?
- Impact of related employers
- What about seasonal employees?
- Any special rules for temps?
- Any obligations for part-time employees?
- Considerations for a "play or pay" comparison

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Other "Big Ticket" Items—

Nondiscrimination Requirements

- Relates to "highly paid employees" (similar to retirement plan nondiscrimination requirements)
- Implementation delayed thus far

Automatic Enrollment

- Applies to "large employers" of more than 200 full-time employees
- Guidance indicates that requirement will not be implemented until sometime after 2014

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Immediate Compliance Issues for Employers

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Reporting Cost of Coverage on W-2s

- Applies to 2012 W-2s to be distributed in January of 2013
 - Exempt if employer filed less than 250 W-2s in 2011
- Includes major medical and generally any other nontaxable "group health plan" coverage for which COBRA coverage is offered, other than stand-alone dental and vision coverage
- Reported cost is total cost, including employer and employee portions

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Medical Loss Ratio (MLR) Rebates

- Checks generally issued to employer, as the policyholder
- Disposition of rebate is a fiduciary act
- Impact of plan documents and premium structure on—
 - Whether rebate is a plan asset
 - Whether rebate must benefit employer and/or plan participants
- Allocations to plan participants

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New Summary of Benefits and Coverage (SBC)

- A four-page disclosure, which is in addition to SPD.
- Deadline is first open enrollment or plan year on or after September 23, 2012
- Final guidance and templates just issued
- Very detailed requirements
- Need to coordinate with carriers and/or TPAs and counsel

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Healthcare Flexible Spending Account Limit

- Reduced to \$2500 effective January 1, 2013
- Applies to FSA plan year beginning 2013
 - Plan year change?
- Must adopt plan amendment by end of 2014

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Keeping up with the "Moving Target"

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Healthcare Reform is still a "moving target"...

- Possibility of legislative changes
- Ongoing regulatory efforts—
 - Federal level—
 - IRS
 - DOL
 - HHS
 - State level

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Be sure to keep up with the "moving target"

- Monitor developments in the law
- Address immediate compliance issues
- Evaluate impact of "big ticket" items—
 - Employer "play or pay" requirement
 - Nondiscrimination requirements
 - Automatic enrollment

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