







Agenda

- Recent Developments
- ACA Reporting Requirements





Recent Developments: The Legal Landscape

- Administration fell to 2-1 in SCOTUS decisions in 2014
 - June 2012: Court upholds Individual Mandate
 - June 2012: Court strikes down Medicaid Expansion
 - June 2014: Court held that Administration violated the Religious Freedom Restoration Act (RFRA) in Hobby Lobby
 - SCOTUS: HHS could have used less restrictive measures when dealing with for-profit employers who have religious objections to offering certain forms of emergency contraception
- 2015 may bring challenges re: whether the "opt-out" accommodation is the least restrictive alternative
 - Little Sisters of the Poor (10th Cir.)/Priests for Life (D.C. Cir.)







Recent Developments: The Legal Landscape

- SCOTUS will hear King v. Burwell in 2015
- Issue: Does ACA provide for subsidies in states with a federal Exchange?
- On its face, the ACA only provides subsidies for insurance purchased in state Exchanges
 - Majority of states have federal Exchanges
- This case can go either way
 - Does the Administration want to chance going down 3-1?
 - Will the Administration and Congress work together to fashion a legislative fix?







Recent Developments: EEOC & Health Risk Assessments

- Wellness is an important component of ACA
- Someone neglected to tell the EEOC
- DOL has blessed conditioning eligibility and amount of premium on completion of Health Risk Assessment (HRA), as long as not results-oriented
- EEOC sees involuntary HRA requirement as violation of ADA
- Three High Profile Cases Filed in 2014
- Will 2015 See More?
- Will Seff v. Broward County help?







Recent Developments: Employer "Opt-Out Credit"

- On 11/6/14 the Federal Regulators released FAQ XXII: Reiterates position on "premium reimbursement" and states that arrangements where employers pay an employee more to drop or not take coverage violates ERISA
- Focus was on high claims targeting strategy
- Impact is greater:
 - Service Contract Act employers who offer cash in lieu of benefits (based on rates in SCA contract)
 - Employment contracts in which employees opt out for higher pay





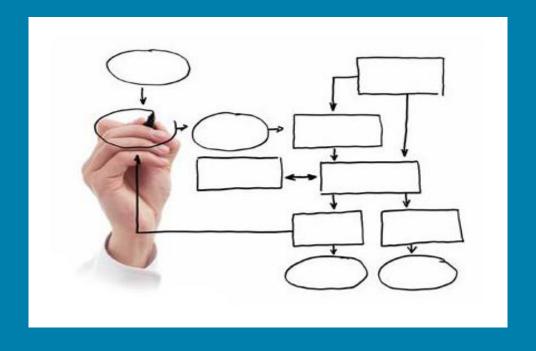


Recent Developments: SBC's

- On 12/22/14 the Federal Regulators released a joint notice of proposed rulemaking to amend the Summary of Benefits and Coverage and Uniform Glossary rule (fact sheet);
- Also released a proposed updated Uniform Glossary and proposed updated summary of benefits and coverage (SBC) templates, SBC language, instructions, and coverage example narratives and calculators.
- Proposed changes effective as of the first open enrollment period or plan year beginning on or after September 1, 2015.







ACA Employer and Provider Reporting



- Code Sections 6055 (insurers and self-insured plans) & 6056 (applicable large employers – ALEs)
 - ALE: at least 50 full-time equivalent employees during prior year
- Effective Dates Both reporting rules are effective in 2014; however, compliance is voluntary until 2015
 - First mandatory reporting in January/February 2016 for 2015
- Complex reporting requirements
 - Relief offered to employers who are offering affordable coverage to employees and to spouses and children
 - Reporting includes employers with 50-99 FTEs who are exempt from the pay-or-play mandate in 2015
 - Must certify on their Code § 6056 reporting filed in 2016 that they qualify for the transition relief in the pay-or-play regulations







- Code Sections 6055 (insurers and self-insured plans) & 6056 (applicable large employers)
- Reminder: Applicable large employers are employers with at least 50 full-time employees (employees having an average of at least 30 hours of service per week), including full-time equivalent employees
- Employers are only required to report full-time employees under Code Section 6056; however, employers with selfinsured plans must report on all covered employees to comply with Code Section 6055







- Code § 6055 Reporting All health insurance providers
 - Reporting used by government to track individual mandate compliance
 - Includes self-insured plans, <u>but employers subject to §6056</u> reporting will report using Forms 1094-C and 1095-C instead
 - Reporting not required for HSAs, on-site medical clinics, wellness programs or dental/vision
 - Draft forms and instructions released
 - Form 1094-B (transmittal to IRS)
 - http://www.irs.gov/pub/irs-dft/f1094b--dft.pdf
 - Form 1095-B: (an employee statement)
 - http://www.irs.gov/pub/irs-dft/f1095b--dft.pdf
 - Instructions: http://www.irs.gov/pub/irs-dft/i109495b--dft.pdf
 - From an employer standpoint, only self-insured employers with less than 50 FTEs will use these forms – ALEs use 1094-C and 1095-C







- Code § 6056 Reporting Applicable Large Employers
 - Reporting used by government to track employer mandate compliance and determine eligibility for premium tax credits
 - Draft forms and instructions released
 - Form 1094-C (transmittal to IRS)
 - http://www.irs.gov/pub/irs-dft/f1094c--dft.pdf
 - Filed with IRS by February 28 (March 31 if electronic)
 - Form 1095-C (an employee statement)
 - http://www.irs.gov/pub/irs-dft/f1095c--dft.pdf
 - Provided to full-time employees by January 31
 - Fully-insured: Employer completes top half of the form
 - Self-insured: Employer completes both sections
 - Instructions: http://www.irs.gov/pub/irs-dft/i109495c--dft.pdf
 - Electronic delivery is permissible with employee's consent





Form 1094-C

Department of the Treasury

Internal Revenue Service

Transmittal of Employer-Provided Health Insurance Offer and Coverage Information Returns

CORRECTED

120115 OMB No. XXXX-XXXX

2014

▶ Information about Form 1094-C and its separate instructions is at www.irs.gov/f1094c.

Part I Applicable Large Employer Member (ALE Member			·
1 Name of ALE Member (Employer)	74	2 Employer identification number (EIN)	
3 Street address (including room or suite no.)			
4 City or town	5 State or province	6 Country and ZIP or foreign postal code	
7 Name of person to contact		8 Contact telephone number	
9 Name of Designated Government Entity (only if applicable)	10 Employer identification number (EIN)		
11 Street address (including room or suite no.)		For Official Use Only	
12 City or town	13 State or province	14 Country and ZIP or foreign postal code	n
15 Name of person to contact	16 Contact telephone number		
17 Reserved			
18 Total number of Forms 1095-C submitted with this transmittal .			•
Part ALE Member Information			
19 Is this the authoritative transmittal for this ALE Member? If "Yes,"	check the box and continue. If *	'No," see instructions	<u> </u>
20 Total number of Forms 1095-C filed by and/or on behalf of ALE M	lember		
21 Is ALE Member a member of an Aggregated ALE Group? If "No," do not complete Part IV.			· · · · · · · · · · Yes No
22 Certifications of Eligibility (select all that apply):			
A. Qualifying Offer Method B. Qualifying Offer Method	thod Transition Relief	C. Section 4980H Transition Re	elief D. 98% Offer Method
Under penalties of perjury, I declare that I have examined this return and accom-	npanying documents, and to the bes	at of my knowledge and belief, they are	true, correct, and complete.
	_ \	_	
Signature	Title	/	Dato
Enr Danarwork Dartiiction Act Notice see senarate instructions	C-4	N- serveA	F 4004 C (*****





Partill ALE Member Information - Monthly (a) Minimum Essential Coverage (b) Full-Time Employee Count for ALE Member (c) Total Employee Count for ALE Member (d) Aggregated Group Indicator (e) Section 4980H Offer Indicator Transition Relief Indicator Yes No 23 All 12 Months 24 Jan 25 Feb 26 Mar 27 Apr 28 May 29 June 30 July Aug 31 Sept 32 33 Oct 34 Nov Dec 35

Proskauer»

1095-C Department of the Treasury Internal Revenue Service

Employer-Provided Health Insurance Offer and Coverage

VOID

6015

► Information about Form 1005-C and its separate instructions is at www.irs.gov/f1005c.

OMB No. XXXXX-XXXXX 2014 CORRECTED

Part I Employee							Applicable Large Employer Member (Employer)													
1 Name of employee 2 Social security number (SSN)							(SSN)	7 Name of employer							8 Employer identification number (EIN)					
3 Street address (including spartment no.)						9 Street address (including from or suite no.) 40 Contact telephone num								number						
4 City or town 5 State or province			100	6 Country and ZIP or foreign postal code			n poetal code 1	e 44 City or town			12 State or province				13	43 Country and ZIP or foreign postal code				
Part II Emp	ployee Offe	er and Cove	erage		J	-1					П									
	All 12 Months	Jan	Feb	M	ar	"Apr	May	June		July	7	lug -	Sep	ot	Oct	\perp	Nov		90	
14 Offer of Coverage (enter required code)																				
15 Employee Share of Lowest Cost Monthly Premium, for Self-Only																				
Minimum Value Coverage	\$	\$	\$	\$		\$	\$	\$	\$		\$		\$	\$		\$		\$		
16 Applicable Section 4980H Safe Harbor (enter code, if																				
applicable)	ered Indiv	Iduals											_							
		ided self-insu	red coverag	ge, chec	k the l	box and ente	er the informa	ation for e	each co	wered in	dividu									
(a) Name of covered individual(s)		(b)				(d) Covered all 12 months		F-b	14	A		Months		_	Sept Opt New Dog					
				-			Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec		
17								+=												
18									ш				ш			Щ			Щ	
19																				
20																				
21																				
22																				
For Panorwork F	Induction Act	Notice sees	onarate inst	nuctions				Cat No 6	Memo								Form	1095-	C (2014)	





Employer ACA Reporting

- General Reporting Method
 - Full Reporting for all full-time employees
 - Reporting on a month-by-month basis
 - Lowest cost monthly premium for self-only coverage
 - To whom was coverage offered (employee, spouse, dependents?)
 - Did the coverage provide minimum value?
 - Indicator codes will be used to report certain other information





Employer ACA Reporting

- Code § 6056 "General Reporting"
- Applicable large employers must report with respect to each full-time employee
- Each return must show—
- 1. Employer name, address, and Tax ID
- 2. Name and phone number of employer's contact person
- 3. Calendar year for which the information is reported
- 4. Whether employer provided MEC to full-time EEs and their dependents
- 5. Months minimum essential coverage was available

- 6. Each FT EE's monthly cost for EE-only, minimum value plan
- 7. # of FT EEs for each month
- 8. Name, address, and tax ID of each FT EE during the year and the months EE was covered
- 9. Any other information specified in forms, instructions, or published guidance







Employer ACA Reporting – Simplified Method

- Code § 6056 Simplified Method #1 "Qualifying Offers"
- Qualifying offer is an offer of minimum value coverage to the employee that costs the employee no more than 9.5% of the FPL (~\$1,100 in 2014) for single coverage
 - Offer must include offer of MEC to spouse and children
- Employers making a qualifying offer will only need to report names, addresses, and tax IDs for employees who receive qualifying offers





Employer ACA Reporting – Simplified Method

- Employer reporting for employees who receive a qualifying offer for the entire calendar year is "simplified"
 - Form 1094-C employer level data
 - Form 1095-C indicator code to show qualifying offer was made
 - Employees receive Form 1095-C or a statement informing the employee that the family is ineligible for a premium credit that ye
 - Note: <u>Full reporting</u> is required for employees not covered by a qualifying offer for entire calendar year
 - For 2015, employers making a qualifying offer to 95% of their FT employees (including spouses and children) may use the simplified reporting method for all employees, even those that did not receive a qualifying offer for the entire year
 - Forms will have a code indicating that an employee who did not receive a qualifying offer (or received no offer) may be entitled to the premium tax credit







Employer ACA Reporting – 98% Method

- Code § 6056 Simplified Method #2 "Option to Report without Separate Certification of FT Employees"
- Employers that offer affordable, minimum value coverage to at least 98% of employees (and dependents) included on the report may certify the offering without identifying which employees are full time
- Useful if the employer does not want to determine and report on who their full time employees are each month



Employer ACA Reporting – Multiemployer

- Multiemployer plans may facilitate filing and furnishing returns for applicable large employers
- Liability for section 6056 reporting or information reporting penalties is not transferred to the multiemployer plan
- Liability for the section 4980H provisions remains with the employer





Employer ACA Reporting – Penalty Relief

- Penalty Relief for 2015
- Employers that show a good faith effort in complying with the information reporting requirements under section 6056 will not be liable for any accuracy related penalties
- The reasonable cause standards do apply under normal rules for those that fail to meet the timely reporting requirements



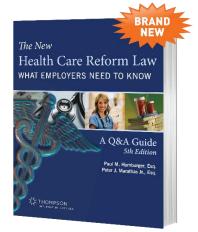


Questions?

 Join Proskauer's ERISA blog at: http://www.erisapracticecenter.com/

Order the 5th Edition of Proskauer's Health Care Reform

Book: www.thompson.com/hcrln05



The information provided in this slide presentation is not, is not intended to be, and shall not be construed to be, either the provision of legal advice or an offer to provide legal services, nor does it necessarily reflect the opinions of the firm, our lawyers or our clients. No client-lawyer relationship between you and the firm is or may be created by your access to or use of this presentation or any information contained on them. Rather, the content is intended as a general overview of the subject matter covered. Proskauer Rose LLP (Proskauer) is not obligated to provide updates on the information presented herein. Those viewing this presentation are encouraged to seek direct counsel on legal questions. © Proskauer Rose LLP. All Rights Reserved.



