



Upcoming Benefit Plan Deadlines

Insights

8.31.16

As the end of the calendar year approaches, so does the fiscal year or “plan year” for many employee benefit plans. Between complying with continuing annual deadlines while integrating new rules and regulations, employers will have a lot of work to do in the months ahead. Below are some upcoming deadlines and effective dates to get started on now to help avoid ruining the year-end holiday season. (Note: most of the dates below assume a calendar year plan year.)

Retirement Plans

September 30, 2016 – The Summary Annual Report (SAR) for the previous plan year should be provided to participants and beneficiaries by the Plan Administrator.

Between October 3, 2016 and December 1, 2016 – As applicable, Plan Administrators must provide safe harbor notices to participants and beneficiaries if the plan is expected to use safe harbor ADP/ACP testing for the 2017 plan year. The following notices are also due:

- notice of Qualified Automatic Contribution Arrangement;
- notice of Eligible Automatic Contribution Arrangement;
- notice of Automatic Contribution Arrangement; and
- notice of Qualified Default Investment Alternative.

October 17, 2016 – If your plan is on a calendar year and you filed an extension request on or before July 31, 2016, you must file the 2015 Form 5500 for a calendar year plan by this date.

November 14, 2016 – The 4th Quarter individual benefit statements must be provided to participants in participant-directed plans, and the quarterly fee disclosure is also due under the participant fee disclosure rule. Both disclosures may be included on the same statement.

December 31, 2016 – There are a number of deadlines before the end of the calendar year, but two of the most notable ones are: (1) any discretionary amendments implemented during the plan year generally must be adopted by December 31; and (2) the required Minimum Distributions are due to participants.

January 2017 – During the first month of the year, you must provide non-discrimination testing census data to the record keeper or Third Party Administrator (TPA).

Health And Welfare Plans And Programs

September 30, 2016 – The Plan Administrator should provide the SAR for the previous plan year to participants and beneficiaries by this date.

October 12, 2016 – If you are an Applicable Large Employer (ALE) and are missing any participant Taxpayer Identification Numbers (*i.e.*, Social Security Numbers) because you did not provide the SSNs on the 2015 ACA ALE reporting, you must conduct the first annual solicitation of employees on or before this date.

October 15, 2016 – You must provide Medicare Notice of Creditable Coverage to individuals who are receiving coverage and are Medicare eligible.

October 17, 2016 – Just as with retirement plans, if your plan is on a calendar year and you filed an extension request on or before July 31, 2016, you must file the 2015 Form 5500 for a calendar year plan by this date.

November 1, 2016 – The Marketplace/Exchange open enrollment begins. Additionally, if the plan's open enrollment is approaching, the Plan Administrator should fix the starting and ending dates for open enrollment, and then prepare and distribute enrollment materials such as the Summary of Benefits and Coverage.

November 15, 2016 – You must submit the Transitional Reinsurance Program Form and select a payment schedule by November 15. If you elected to pay the Transitional Reinsurance Fee in two installments, then the second payment is also due.

December 15, 2016 – Individuals must be enrolled in Marketplace or Exchange coverage by this date in order for it to be effective on January 1, 2017. Marketplace or Exchange coverage for 2016 will end on December 31, 2016.

December 31, 2016 – By the last day of the year, Plan Administrators should provide the Children's Health Insurance Program (CHIP) Notice and the Women's Health and Cancer Rights Act (WHCRA) Notice. Model notices for the [CHIP](#) and the [WHCRA](#) Notices are available on the Department of Labor website. These notices are often provided with annual open enrollment materials.

January 1, 2017 – If compliance with Section 1557 of the ACA requires changes to benefit designs, employers who sponsor health plans or wellness programs and receive federal financial assistance to fund their employee health benefit programs will have until January 1, 2017 to ensure compliance. This includes any necessary changes to ensure there is no discrimination on the basis of race, color, national origin, sex, age, or disability, with special attention to discrimination on the basis of sex stereotyping, pregnancy, and gender identity.

Section 1557 also requires covered entities to provide language assistance services free of charge to individuals with limited English proficiency. This includes posting taglines in at least the top 15 non-

English languages spoken in the state in which a covered entity is located or does business.

January 1, 2017 is also the applicability date for the wellness program final rules. These rules include limitations on the financial incentives offered, and also require that the program be voluntary and be reasonably designed to promote health or prevent disease. In other words, health coverage to employees generally cannot be denied based on non-participation. These rules also provide specific requirements for tobacco cessation programs.

If a wellness program has not been reviewed for compliance with the final rules, it is recommended that a review be completed well in advance of the January 1, 2017 applicability date.

January 31, 2017 – ALEs will have to provide their full-time employees with an IRS Form 1095-C regarding offers of group health plan coverage. Although this will only be the second time that ALEs have to report pursuant to the ACA, employers should not rely on the IRS allowing extensions to all filers as it did last year.

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Service Focus

Employee Benefits and Tax