



2010

Grandfathering - Plans in existence on or before March 23, 2010 are considered grandfathered.

Retiree-plan Assistance - A temporary government reinsurance program for employer-provided retiree (age 55-64) benefits. May reimburse up to 80% of the cost of claims between \$15,000 and \$90,000.

Small Business Tax Credits - Tax credits for small business (no more than 25 employees and average annual wage of no more than \$50,000). Up to a 35% tax credit when the employer contributes at least 50% of the premium costs.

Lifetime & Annual Maximums - Prohibition on lifetime and unreasonable annual limitations on essential benefits (including grandfathered plans).

Adult Children - Requires coverage for adult-aged children to age 26 if no other employer-sponsored coverage is available (including grandfathered plans).

Preventive Care - Requires coverage for most preventive care services (does not apply to grandfathered plans).

Children & Pre-existing Conditions - Prohibits pre-existing condition exclusions on children under age 19 enrolled in the group health plan (including grandfathered plans).

Temporary High Risk Pool - Under the law, people who cannot obtain traditional coverage on account of a pre-existing medical condition are eligible for insurance under a new national high-risk pool.

No Prior Authorization for Emergency Services - The law requires emergency care services be provided without prior authorization and with the same cost-sharing both in and out of network.

Revised Appeals Process - Requires new health plans to implement an effective process for allowing consumers to appeal health plan decisions and requires new plans to establish an external review process.

Rescission of Coverage - Prohibits retroactive coverage terminations except in cases of fraud and material misrepresentation.

Reasonable Break Time for Nursing Mothers - Requires employers to provide nursing mothers a reasonable break time each time the employee needs to express milk.



2011

Minimum Medical Loss Ratio for Insurers - Plans are required to spend 85% of premium on claims for large plans and 80% for small plans. Rebates are available to enrollees if these thresholds are not satisfied.

Flexible Spending Accounts - Over the counter (OTC) products can no longer be reimbursed through the health FSA, HRA, HSA unless prescribed by a doctor.

HSA Tax Penalty - 20% penalty tax on distributions from the HSA that are not for qualified medical expenses.

Simple Cafeteria Plans - These plans will be available to small businesses with no more than 100 employees.

Small Employer Workplace Wellness Grants - Grants become available to certain eligible employers that establish Comprehensive Workplace Wellness Programs beginning fiscal year 2011.

2012

W-2 Reporting - Employers are required to include the value of health coverage on an employee's W-2.

Benefit Summary - Insurers and plan sponsors to follow uniform standards when providing group and individual plan applicants, enrollees and policy/certificate holders with a summary of benefits and coverage.

Pre-enrollment Document - As part of the Summary of Benefits and Coverage provision, pre-enrollment materials must be provided to Individual applicants shopping for coverage on the benefits and exclusions of various plan offerings.

60-Day Notice of Material Modifications - If not provided in Uniform Explanation of Coverage, by no later than 60 days prior to the effective date of any mid-year change, group health plans also must provide notice of any material changes to the plan coverage. The Secretary of Health and Human Services will establish the format for this summary description, which must begin to be issued no later than March 23, 2012.



2013

Employee Notification of Exchanges- Beginning on March 1, 2013, employers must provide employees written notice of Exchanges, Premium Subsidies and Free Choice Vouchers.

Flexible Spending Accounts - \$2,500 cap on the health FSA.

Medicare Tax - Affects individuals earning more than \$200,000 and joint filers earning more than \$250,000.

Fee on Health Plans - Health plans will be assessed a fee to fund a Patient-Centered Outcome Research program.

Retiree Prescriptions - Reduce employer deduction for retiree prescription drug expenses.

2014

Employer Requirement to Offer Minimum Essential Coverage (50 Employees) - The new healthcare reform law does not require employers to offer health coverage to their employees. However, large employers will be subject to a penalty beginning in 2014 if they do not.

Individual Mandate - Individuals will be fined, beginning in 2014 for not having approved health care coverage.

State-based Exchanges for Individuals and Small Groups - Exchanges established for individual and small group (1-100 employees or 1-50 employees, depending on state law).

Small Employer Tax Credits Available Only in Exchange - For eligible small businesses that purchase coverage through the exchange, there will be a tax credit of up to 50% of the employer's contribution toward the employee's health insurance premium if the employer contributes at least 50% of the total premium cost.

Employer Reporting Requirements - Employers must annually report to the Secretary of the Treasury whether they offer health coverage to their full-time employees and dependents.

Mandated Coverage - Non-grandfathered group health plans and Exchange plans meet certain mandated levels of coverage including out-of-pocket cost sharing (tied to HSA qualified plan limits).



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Pre-Existing Conditions - Prohibit all pre-existing condition exclusions (including grandfathered plans).

Benefit Waiting Periods - Prohibit waiting periods in excess of 90 days (including grandfathered plans).

Rating - Modified community rating for individual and family coverage in the small group market.

Wellness Program - Wellness program incentives may increase to 30% of the cost of coverage for a reward based program.

Health Insurance Carriers - New fees imposed in health insurance carriers.

SmallGroup Redefined as 1-100 - Small Group will be redefined as 1- 100 employees, however, for the employer responsibility requirements it is 50 employees or less.



High Cost Health Plans - 40% excise tax imposed on high-cost health plans (above \$10,200 for single coverage and \$27,500 for family coverage).