

Benefits

BUZZ

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Sullivan Benefits

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DOL Delays New Rules for Disability Benefit Claims

On Dec. 16, 2016, the Department of Labor (DOL) released a [final rule](#) to strengthen the claims and appeals requirements for plans that provide disability benefits and are subject to the Employee Retirement Income Security Act (ERISA). That rule has been [delayed](#) until **April 1, 2018**.

According to the DOL, concerns were raised that the final rule will impair workers' access to disability benefits by driving up costs and increasing litigation. During the delay, the DOL will review the final rule to determine whether it is unnecessary, ineffective or imposes costs that exceed its benefits.

Sponsors of ERISA plans that include disability benefits should continue to monitor the status of the final rule.

Protections for Disability Claimants

The final rule requires that plans, plan fiduciaries and insurance providers comply with additional procedural protections when dealing with disability benefit claimants. The final rule includes the following requirements for the processing of claims and appeals for disability benefits:

- Improvement to basic disclosure requirements
- Right to claim file and internal protocols
- Right to review and respond to new information before final decision
- Avoiding conflicts of interest
- Deemed exhaustion of claims and appeal processes
- Certain coverage rescissions are adverse benefit determinations subject to the claims procedure protections
- Notices written in a culturally and linguistically appropriate manner

Please contact Sullivan Benefits with any questions.

DID YOU KNOW?

The Senate tax bill would repeal the individual mandate—a hallmark of the Affordable Care Act (ACA)—beginning in 2019.

However, the Senate and House of Representatives must agree on tax reform legislation before a bill is signed by the president and becomes law.

For now, continue complying with any ACA requirements. We will keep you apprised of new developments as they arise.

Plan Ahead with ACA Reporting

Under the ACA, every applicable large employer (ALE) and every entity that provides minimum essential coverage, such as a health insurance issuer or sponsor of a self-funded plan, must comply with certain reporting requirements.

The ACA reporting rules require filing of an annual return with the IRS and furnishing of individual statements to certain employees.

Returns are due in early 2018 for health plan coverage offered or provided in 2017. Returns for 2017 must be filed with the IRS by **Feb. 28** (or April 2 if filed electronically, since March 31 is a Saturday). For the 2017 calendar year, written statements must be provided to employees no later than **Jan. 31**.

Speak with us if you need any guidance on your 2017 filing requirements.