



2020 HEALTH PLAN COMPLIANCE CALENDAR

Employers must comply with certain filing and disclosure requirements each year in connection with their group health plans. This chart summarizes some of the key requirements and is designed to be used as a tool to help facilitate annual compliance.

	DEADLINE	REQUIREMENT	DESCRIPTION
JANUARY	1/31	Form W-2	Employers that filed 250 or more W-2s in the prior year must report the cost of employer sponsored group health coverage in Box 12, using Code DD.
FEBRUARY	2/28 or 3/31	Form 1094-C and 1095-Cs to IRS	Applicable Large Employers (ALEs) (generally those with 50 or more full-time and full-time equivalent employees) must file with the IRS all of the 1095-Cs provided to employees along with a 1094-C transmittal form. If the employer is filing fewer than 250 1095-Cs, the employer may mail the forms to the IRS by February 28. Otherwise, the forms must be filed electronically by March 31.
MARCH	3/1 (Calendar Year plans)	Medicare Part D Reporting to CMS	Within 60 days after the beginning of each plan year, employers must report to CMS whether the plan's prescription drug coverage is creditable (has the same or higher actuarial value than Medicare Part D). The filing is electronic (Google "creditable coverage disclosure to CMS").
	3/2	Forms 1095-C to Employees	ALEs (generally those with 50 or more full-time and full-time equivalent employees) must provide Form 1095-C annually. If the plan is self-funded, Part III must be completed, which includes dependent enrollment information. If the plan is fully insured, Part III can be skipped because the insurer, if following relief requirements set forth in Notice 2019-63, will provide the employee with a Form 1095-B with enrollment information upon request.

	DEADLINE	REQUIREMENT	DESCRIPTION
JULY	7/31	PCORI Fee	Insurers of fully insured group health plans will file Form 720 and pay the fee. Employer sponsors of self-funded group health plans must file Form 720 with the IRS and pay the fee.*
	7/31 (Calendar Year plans)	Form 5500	Generally applies to employer group health plans with at least 100 employee-participants at the beginning of the plan year. The Form 5500 must be filed with the DOL by the last day of the 7th month after the plan year ends. A 2½-month extension can be obtained by filing Form 5558 before the return is otherwise due.
SEPTEMBER	9/30 (Calendar Year plans)	Summary Annual Report (SAR)	The SAR is a short statement concerning the financial condition of the plan. It must be furnished to participants within 9 months after the plan year ends or 2 months after the due date for the Form 5500 filing if an extension is obtained. A SAR is generally only applicable to fully insured plans that are also subject to the Form 5500 filing requirement. If a 2½ month extension was filed for the Form 5500, the SAR due date is December 15.
OCTOBER	10/14 (Calendar Year plans)	Medicare Part D Notice of Creditable	The notice is required to be furnished to all participants who are Medicare Part D eligible individuals who participate in the employer’s group health plan. The notice is to be furnished annually before Medicare’s open enrollment period which begins on October 15. The notice discloses whether the employer’s prescription drug coverage is creditable to assist individuals in deciding whether they need to enroll in Medicare Part D. If the coverage is not creditable and they do not enroll, they will pay a permanently higher premium for Medicare Part D coverage upon later enrollment.

*H.R. 1865, the “Further Consolidated Appropriation Act, 2020” extended the PCORI fee for 10 years. Insurers and employers must continue to pay the PCORI fee until 2029 or 2030 (depending on plan year).

This Benefits Brief is not intended to be exhaustive nor should any discussion or opinions be construed as legal advice. Readers should contact legal counsel for legal advice.