



# Benefits WEEKLY DIGEST

October 15, 2019

## IRS Issues Guidelines to Clarify Health Reimbursement Arrangement Rules

“An ICHRA is an HRA integrated with individual health insurance coverage or Medicare. Beginning on January 1, 2020, employers can provide ICHRAs that employees can use to purchase individual health insurance coverage. The proposed regulations clarify that an offer made by an ALE to a full-time employee to participate in an ICHRA will be treated as an offer of minimum essential coverage (MEC).” [Full Article](#)

*The Wagner Law Group*



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## When Must a Non-Grandfather Group Health Plan Comply with Changes to Preventative Health Services Requirement?

“Since compliance is generally required for plan years beginning one year or later after the recommendation or guideline is issued, there will be an interval of at least a year between the date on which a recommendation or guideline is issued and the date on which your plan must cover the services listed in that recommendation or guideline without cost-sharing.” [Full Article](#)

*Thomson Reuters EBIA*

*This Weekly Digest 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.*

## California Law Regarding FSA Notices Poses ERISA and Plan Designation Issues

“A new California law requires employers who sponsor Flexible Spending Accounts (FSAs) to notify employees of any deadline that requires them to withdraw FSA funds before the end of the plan year. Although the law is only three sentences long, it raises significant questions about how to comply, not to mention questions concerning ERISA preemption.” [Full Article](#)

*Davis Wright Tremaine LLP*

## Trump Executive Order Bolsters Medicare, Medicare Advantage

“The EO directs the secretary of HHS to propose regulation that allows Medicare to provide 'more diverse and affordable plan choices.' Some of the actions included in the EO were to reduce barriers to obtaining Medicare Medical Savings Accounts, promote innovations in supplemental benefits and telehealth services.” [Full Article](#)

*American Journal of Managed Care*

## HHS Proposes New Wellness Demonstration Projects

“To date, wellness programs have been limited to employers, but the [ACA] included a demonstration project to allow HHS and states to experiment with extending wellness programs to the individual market. States that are approved for a demonstration project could allow issuers in their individual market to vary the cost of coverage by as much as 30 percent because of, say, high blood pressure or high cholesterol.”

[Full Article](#)

*Katie Keith Health Affairs*



## Updates in Telemedicine and Mental Health Parity

“The mental health parity rules allow for differences in benefits between different tiers of network providers. Thus, it may be reasonable to treat the medical plan's network as one tier of provider and the telemedicine network as a separate tier with a different copay structure. But even then, the copay amounts within the telemedicine program for medical services and for mental health services will probably have to be the same.” [Full Article](#)

*Warner Norcross & Judd*

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