



ACA OVERVIEW

Provided by The Benefits Group

ACA Implementation FAQs

Enacted in March 2010, the Affordable Care Act (ACA) has made many changes related to health care coverage and raised a number of questions for employers. The Departments of Labor (DOL), Health and Human Services (HHS) and the Treasury (Departments) have jointly provided guidance in the form of **Frequently Asked Questions (FAQs)** to assist in implementing the ACA's changes.

As the various ACA provisions become effective, the Departments have periodically issued new sets of FAQs to address new questions that have arisen. The existing FAQs are not updated by the Departments, but rather, are replaced or superseded, as necessary. As a result, some of the information in the Departments' FAQ guidance is out-of-date.

Employers should consult the most recently issued set of FAQs on each topic for the most up-to-date information. Contact The Benefits Group if you need more information on a particular ACA provision.

LINKS AND RESOURCES

The Departments' ACA Implementation FAQs are available on the following federal agencies' web pages:

- [The DOL's Employee Benefits Security Administration \(EBSA\) website](#); and
- [HHS' Centers for Medicare & Medicaid Services \(CMS\) website](#).

This ACA Overview 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.

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HIGHLIGHTS

ACA EFFECTIVE DATES

- The ACA's changes have been phased in over several years.
- Some provisions took effect immediately in 2010, many key provisions became effective in 2014 and 2015 and others will take effect in the future.

APPROACH TO IMPLEMENTATION

- The Departments' approach to implementation emphasizes assisting (rather than imposing penalties on) plans, issuers and others that are working in good faith to comply with the ACA.
- This approach includes transition rules, grace periods, safe harbors and other policies.

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