

BENEFITS

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Open Enrollment: What's Changing in 2020?

To prepare for open enrollment, group health plan sponsors should be aware of the legal changes affecting the design and administration of their plans for plan years beginning on or after Jan. 1, 2020. Employers should review their plan documents to confirm that they include these required changes.

In addition, any changes to a health plan's benefits for the 2020 plan year should be communicated to plan participants through an updated summary plan description (SPD) or a summary of material modifications (SMM).

Health plan sponsors should also confirm that their open enrollment materials contain certain required participant notices, when applicable—for example, the summary of benefits and

coverage (SBC). There are also some participant notices that must be provided annually or upon initial enrollment.

Important Notices

- Annual CHIP notice
- Medicare Part D creditable coverage notice
- Notice of grandfathered status (if applicable)
- Annual notice regarding coverage requirements for mastectomy-related benefits (WHCRA notice)

Don't wait any longer to review your plans. Contact The Benefits Group for a full list of 2020 plan changes and requirements.

Hospitals to Publish Retail Prices Under a New Proposed Rule

In July, the Centers for Medicare and Medicaid (CMS) [proposed rules](#) that would require all Medicare-participating hospitals to post their negotiated prices for standard health care services.

The proposed rule is intended to increase pricing transparency and help consumers understand the charges they may incur before receiving care.

These are just proposed rules at the moment, which means no changes will be made effective until the rules are finalized. The agency is currently asking for comments on the proposed rule. The deadline for [submitting comments](#) is Sept. 27, 2019.

We will continue to monitor and keep you updated on these developments.

