



November 12, 2013

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As Reform Takes Form

A special news series from Independence Administrators

Welcome to the e-edition of *As Reform Takes Form* — a bi-monthly, online news series to help you understand the changes resulting from health care reform and how it may affect your plan and your plan members. We are committed to providing you with the most current information as the law is implemented to help you make informed decisions. We hope you find this news series a useful reference and welcome your feedback.

Updated U.S. Preventive Services Task Force list

Under the Affordable Care Act (ACA), non-grandfathered group health plans (self-funded and fully insured) are required to cover certain designated preventive care with no cost sharing when the services are delivered by an in-network provider. The U.S. Preventive Services Task Force (USPSTF), an independent panel of non-Federal experts in prevention and evidence-based medicine, has posted an updated list of the A and B preventive services recommendations for implementing the ACA.

The USPSTF has added new topics to the A and B recommendations list and updated the definitions of several current topics. For additional details, please refer to our ACA alert.

New guidance on employer health reimbursement arrangements

The IRS has issued new guidance on certain provisions of the Affordable Care Act (ACA) pertaining to stand-alone health reimbursement arrangements (HRAs), integrated HRAs, health flexible spending arrangements (FSAs), and other employer health care reimbursement arrangements. Beginning in 2014, employers may not offer a stand-alone HRA for the purpose of reimbursing employees for health care coverage purchased in the individual market. HRAs must be integrated with an underlying group health insurance plan. Retirees may be able to use HRA funds to purchase coverage in the Health Insurance Marketplace, but would not be eligible for a subsidy.

The guidance contains a total of twelve questions and answers that address how HRAs and FSAs are affected by ACA market reforms as it relates to:

- no annual dollar limits on essential health benefits;
- no cost sharing on certain preventive services.

For more information on this topic, please read the <u>IRS Guidance</u>.

For more information

To learn more about how Independence Administrators can support you in complying with the requirements of the Affordable Care Act, or to request an analysis, **please contact your Independence Administrators account representative**.

Independence Administrators — helping you prepare as reform takes form.

Independence Administrators does not provide legal or tax advice. The final determination of whether the Plan Sponsor meets the requirements of the Affordable Care Act must be made by the Plan Sponsor in consultation with the employer's own legal counsel or tax advisor.

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