

Health Care Reform Update

Small Businesses May Be Able to Keep Existing Health Coverage Through Calendar Year 2018

IMPORTANT LINKS

- [Affordable Care Act](#) (HHS)
- [COBRA](#) (DOL)
- [Department of Labor](#)
- [Federal Marketplace](#) (HHS)
- [Medicare & Medicaid](#) (CMS)
- [Tax Credits & Deductions](#) (IRS)

FIND A PROVIDER

- [Aetna](#)
- [Amerihealth New Jersey](#)
- [Horizon Blue Cross Blue Shield](#)
- [Independence Blue Cross](#)
- [Oxford Health Plans](#)
- [United Healthcare](#)

FIND A DENTIST

- [Aetna](#)
- [Delta Dental](#)
- [Guardian](#)
- [Metlife](#)
- [United Concordia](#)
- [United Healthcare](#)

Brought to you by:

Brown & Brown Consulting
The Curtis Center
601 Walnut Street, Suite 275W
Philadelphia, PA 19106
Phone: 888.880.2212
Fax: 215.561.0395
www.consultbb.com/brokers

A previously extended transitional policy which allows health insurance issuers, *at their option*, to continue group coverage that would otherwise be terminated or cancelled **has been extended further—to policy years beginning on or before October 1, 2018, provided that all policies end by December 31, 2018.** Health insurance issuers that renew coverage under the extended policy are required to provide standard notices to affected small businesses for each policy year.

Extended Transitional Policy

At the **option of the states**, issuers that have renewed policies under the transitional policy continually since 2014 may be permitted to renew such coverage for a policy year **starting on or before October 1, 2018, so long as any policies renewed do not extend past December 31, 2018.** The Center for Consumer Information and Insurance Oversight (CCIO) intends to work with issuers and states to implement this extended transitional policy, including options such as allowing policy years that are shorter than 12 months or early renewals with a January 1, 2018 start date.

Policies subject to the transitional relief **will not be considered to be out of compliance with some of the Affordable Care Act's key provisions** that were originally scheduled to take effect in 2014, including:

- The requirement to cover a core package of items and services known as essential health benefits;
- The requirement that any variations in premiums be limited with regard to a particular plan or coverage to age and tobacco use, family size, and geography;
- The requirements regarding guaranteed availability and renewability of coverage for employers; and
- The requirements relating to coverage for individuals participating in approved clinical trials.

[Click here](#) to review the extended transitional policy. Questions regarding this guidance should be e-mailed to the CCIO, at marketreform@cms.hhs.gov.

For information on this subject, please log into your [HR Library account](#) which includes information on the above subject, as well as other State and Federal updates, laws and regulations concerning Employee Benefits, HR, and Reform.

Be sure to check out our [Legislation/Compliance](#) section on our website to stay on top of the latest news in Health Care Reform. If you have any questions, please feel free to reach out to your dedicated Brown & Brown broker consultant.

