



## 2026 Employer Compliance Overview

Employers offering group health and welfare benefits are required to distribute certain federal notices to employees on a recurring basis. Below is an overview of common annual compliance requirements. This information is intended as general guidance and may vary based on plan design, employer size, and funding type.

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## Required Annual Federal Notices

### **Marketplace Notice**

Provided annually during Open Enrollment for employers subject to the Employer Shared Responsibility rules under the Affordable Care Act.

### **Women's Health and Cancer Rights Act (WHCRA)**

Provided at initial enrollment and annually during Open Enrollment.

### **CHIP Model Notice**

Provided at the time of hire and annually during Open Enrollment to inform employees of potential premium assistance through Medicaid or CHIP.

### **Summary of Benefits and Coverage (SBC)**

Provided at initial enrollment, during Open Enrollment, and upon request. SBCs summarize key plan features and costs.

### **Medicare Part D Creditable Coverage Notice**

Provided annually prior to October 15 to all Medicare-eligible individuals. Updated notices should be issued if creditable status changes.

### **HIPAA Privacy Notice**

Provided at enrollment and annually during Open Enrollment.

### **HIPAA Special Enrollment Notice**

Provided prior to or at enrollment, outlining enrollment rights after qualifying life events.

### **Grandfathered Plan Notice**

Provided annually during Open Enrollment if the plan maintains grandfathered status.



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## Wellness Program Notices

### **HIPAA Wellness Program Notice**

Required if rewards are tied to health-related standards. Provided annually and upon enrollment.

### **ADA Wellness Program Notice**

Required if the program involves medical exams or health information collection. Provided before data is collected.

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## Federal COBRA Notices

Employers with at least 20 employees for 50 percent of the prior calendar year are subject to federal COBRA rules. (Part-time employees are to be treated as fractions of full-time employees)

### **COBRA Initial Rights Notice**

Provided upon enrollment in eligible benefits.

### **COBRA Qualifying Event Notice**

Provided after a qualifying event resulting in loss of coverage. Issued within required timeframes.

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## ERISA Compliance

A group health plan in the private sector is usually subject to ERISA compliance. Failure to comply could result in severe financial penalties. Some common compliance items that fall under ERISA are Wrap documents/ Summary Plan Docs (SPD's), annual 5500 reporting for groups with 100 or more employees enrolled in a benefit, compliance with Federally mandated benefits like COBRA, HIPAA, Mental Health Parity as well as

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## Medicare Part D Disclosure to CMS

Employers must disclose creditable coverage status to CMS within 60 days of the plan's renewal date or any status change.

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## 6055 and 6056 Annual Reporting

Small employers that are level funded or self-insured are subject to IRS Section 6055 rules and must file 1094/1095 B forms with the IRS to show Minimum Essential Coverage was offered to employees. Forms must be filed electronically by March 31, 2026.

All Applicable Large Employers (ALE's), 51 or more Full Time Equivalent (part-timers are treated as a fraction), are required to provide affordable coverage to employees or pay a penalty on employees that receive a subsidy in the Individual Marketplace. ALE's are subject to IRS Section 6056 and must annually file 1094/1095 C forms with the IRS to provide affordability information. Forms must be filed electronically by March 31, 2026.

CA, the District of Columbia, MA, NJ, RI and VT all have individual coverage mandates and may require additional forms reporting with that state. Please check with your state for details on possible reporting requirements.