



Employee: \_\_\_\_\_

Date of Hire: \_\_\_\_\_

**NEW HIRE CHECKLIST FOR HEALTH PLANS**

**I. Provide these notices to ALL new hires (whether or not they are eligible for the health plan)**

<p><input type="checkbox"/> Exchange Notice: Provide this Model Department of Labor notice* to all new hires within 14 days after beginning employment:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Click here for Model Department of Labor Notice (for employers offering a health plan)*: <a href="#">Exchange Notice (English)</a></li> <li><input type="checkbox"/> Click here for Model Department of Labor Notice (for employers offering a health plan)* (Spanish): <a href="#">Exchange Notice (Spanish)</a></li> </ul> <p>These notices may be available in Word format at the following link:  <a href="https://www.dol.gov/agencies/ebsa/laws-and-regulations/laws/affordable-care-act/for-employers-and-advisers/coverage-options-notice">https://www.dol.gov/agencies/ebsa/laws-and-regulations/laws/affordable-care-act/for-employers-and-advisers/coverage-options-notice</a></p>	<p>Date Provided</p>
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<p><input type="checkbox"/> Children’s Health insurance Program (CHIP) Notice. Provide this notice to all new hires with health plan enrollment materials.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> If the employee is not eligible for the health plan, provide within 14 days of date of hire.</li> <li><input type="checkbox"/> If the employee is eligible for the health plan, provide this notice with the enrollment packet (below)</li> </ul> <p>To access the current model notice, use the following link and click on the section titled Children’s Health Insurance Program/Children’s Health Insurance Program Reauthorization Act (CHIPRA):  <a href="https://www.dol.gov/agencies/ebsa/employers-and-advisers/plan-administration-and-compliance/health-plans">https://www.dol.gov/agencies/ebsa/employers-and-advisers/plan-administration-and-compliance/health-plans</a></p>	
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**II. Provide written information about the enrollment process to all new hires who are eligible to enroll in the plan. The enrollment packet must include:**

<p><input type="checkbox"/> Offer of Health Insurance: Click here for a sample <a href="#">Offer of Coverage</a></p>	<p>Date Provided</p>
<p><input type="checkbox"/> The current Summary of Benefits and Coverage for each option offered. These can be found at <a href="http://www.gabankers.com">www.gabankers.com</a>. Choose the Insurance &amp; Retirement tab from the banner at the top and then go to Group Benefit Plans/Medical Plans.</p>	
<p><input type="checkbox"/> The Uniform Glossary.          Click here: <a href="https://www.dol.gov/sites/dolgov/files/EBSA/laws-and-regulations/laws/affordable-care-act/for-employers-and-advisers/sbc-uniform-glossary-of-coverage-and-medical-terms-new.pdf">https://www.dol.gov/sites/dolgov/files/EBSA/laws-and-regulations/laws/affordable-care-act/for-employers-and-advisers/sbc-uniform-glossary-of-coverage-and-medical-terms-new.pdf</a></p>	
<p><input type="checkbox"/> The Creditable Coverage Notice* for Medicare Part D.</p>	

<p>Click here for all plan options except option 71900: <a href="#">Medicare Creditable Coverage Notice except Option 71900</a></p> <p>Click here for plan option 71900: <a href="#">Medicare Non-Creditable Coverage Notice Option 71900 only</a></p>	
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<p><input type="checkbox"/>HIPAA Special Enrollment Rights. Click here for <a href="#">Special Enrollment Rights Notice</a></p>	
<p><input type="checkbox"/>CHIP Notice. To access the current model notice, use the following link and click on the section titled Children’s Health Insurance Program/Children’s Health Insurance Program Reauthorization Act (CHIPRA):</p> <p><a href="https://www.dol.gov/agencies/ebsa/employers-and-advisers/plan-administration-and-compliance/health-plans">https://www.dol.gov/agencies/ebsa/employers-and-advisers/plan-administration-and-compliance/health-plans</a></p>	
<p><b>III. Provide the following information when the employee enrolls in the plan</b></p>	
<p><input type="checkbox"/>Provide a copy of the SPD</p> <p>The SPD/Certificate Booklet can be found at <a href="http://www.gabankers.com">www.gabankers.com</a>. Choose the Insurance &amp; Retirement tab from the banner at the top and then go to Group Benefit Plans/Medical Plans. The link to the booklet is at the bottom of this page.</p>	
<p><input type="checkbox"/>Initial COBRA Notice.</p> <p>This notice requirement is satisfied when you notify GBAIT through the new hire enrollment process</p>	
<p><input type="checkbox"/>HIPAA Privacy Practices Notice</p> <p><input type="checkbox"/> Click here for <a href="#">GBAIT Privacy Practices Notice</a></p>	
<p><input type="checkbox"/>Women’s Health and Cancer Rights Notice: Click here for <a href="#">WHCRA Model Notice</a></p>	
<p><b>*Model Notices and forms marked with an asterisk require customization.</b></p> <p><b>Hard copies of notices current as of January 1, 20201</b></p>	