Q&A from Assurex Global Webinar "DOL Employee Benefit Plan Audits & How to	June 26, 2014
Prepare" Question	Answer
Q: A client had a DOL audit last year and everything was fine. The DOL has come back this year wanting their COBRA info. One item they are requesting is information on medical claims filed and were they paid or denied for the COBRA participant. How/why would an employer have that information, and why does the DOL need it?	<ul> <li>A: While we cannot say for sure why they requested that particular information, it could be due things such as:</li> <li>Something was uncovered in the original audit that caused the DOL to pursue additional information.</li> <li>The DOL occasionally sets compliance priorities and focuses on those issues for a period of time. It could be that the DOL is just taking a closer look at how</li> </ul>
Q: Do all insurance plans fall under ERISA? If not, will DOL still audit your benefits?	Not all employer-sponsored insurance plans are subject to ERISA. Here is a list of common employee benefits subject to ERISA (other benefits not listed here could also be subject to ERISA). The DOL may not have any jurisdiction over other
Q: Do we need to be concerned about other insurances like dental or vision?	<ul> <li>also be subject to ERISA). The DOL may not have any jurisdiction over other types of insurance and thus would not be involved in the administration of these plans.</li> <li>Business Travel Accident Policies</li> <li>Day-care Center</li> <li>Dental Benefits (whether insured or self-insured)</li> <li>Disability Benefits (if insured or funded other than as payroll practice)</li> <li>Disease-Management Program and Employee Assistance Plans (EAPs)</li> <li>Executive Medical Coverage and Mini-med Coverage</li> <li>Group Life Insurance and AD&amp;D</li> <li>Health Flexible Spending Arrangements (Health FSAs)</li> <li>Health Insurance</li> <li>Health Reimbursement Arrangements (HRAs)</li> <li>Hospital Indemnity and Specific Disease Coverage</li> <li>Legal Plans (prepaid group)</li> <li>On-Site Medical Clinic (beyond first aid)</li> <li>Prescription Drug Plan</li> <li>Some Severance Pay Plans</li> <li>Travel Accident Insurance or self-insured)</li> <li>Some Wellness Programs including Health Screenings</li> <li>A: Only employers who sponsored a health plan with at least 100 participants on</li> </ul>
Q: Does the same apply to a non-profit organization or a small business, under 30 EE's regarding 5500 form?	A: Only employers who sponsored a health plan with at least 100 participants on the first day of the plan year are required to file a 5500. This rule applies to private and public employers and also to non-profits.

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Q: If you have a employee in an accident or life insurance plan, that is billed monthly are you subject to the same three day deposit as you have for a 401K plan?	A: No - 401(k) deposit rules don't apply to health and welfare plans.
Q: How it the employer supposed to know about claims paid and denied as part of an audit?	A: It is common for the DOL to request information that the employer does not maintain themselves. In this case the employer must work carefully with their carrier or TPA to collect and provide the necessary information to the DOL.
Q: Does the DOL always agree to a request to extend the deadline for providing the nformation requested?	A: While we obviously cannot guarantee that the DOL will grant an extension, i has been our experience that most reasonable requests for more time are accepted.

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